FEC FORM 2
STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

   Jones, Laura, , ,

(b) Address (number and street) 621 Saddle Surrey Rd	☐ Check if address changed	2. Candidate's FEC Identification Number H0TX08145		
(c) City, State, and ZIP Code Coldspring TX 77331		3. Is This Statement	☒ New (N) **OR**	☐ Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate TX 08		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the ___2020___ election(s).
   (year of election)

   NOTE: This designation should be filed with the appropriate office listed in the instructions.

   (a) Name of Committee (in full)

   ## LAURA JONES FOR CONGRESS

   (b) Address (number and street)
   621 SADDLE SURREY RD

   (c) City, State, and ZIP Code

   COLDSPRING   TX   77331

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

   NOTE: This designation should be filed with the principal campaign committee.

   (a) Name of Committee (in full)

   (b) Address (number and street)

   (c) City, State, and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate	Date
Jones, Laura, , , **[Electronically Filed]**	01/10/2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

FEC FORM 2 (REV. 02/2009)