

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

2018 JAN -9 PM 4:47

Griffin Jones
6302 Dilyn Dr.
Madison WI, 53719

Hello –

I am sending an amended FEC Form 1 to amend the name of the Principal Campaign Committee. My forms were received by the Secretary of the Senate on December 28th, 2017 and today is January 3, 2018.

The name of the committee listed in the original filing was 'Griffin Gilbert Jones', instead of the committee name which is **Griffin Jones for US Senate**.

Thank you,



Griffin Jones

201801100200001129

2018 JAN -9 PM 4:47

FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1 NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

GRIFFIN JONES FOR US SENATE

ADDRESS (number and street)

6302 DYLYN



(Check if address
is changed)

MADISON

CITY ▲

WI

STATE ▲

5,3,7,1,9

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address
is changed)

GRIFFIN@GRIFFINJONES4WI.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

WWW.GRIFFINJONES4WI.COM

2 DATE

01

03

2018

3 FEC IDENTIFICATION NUMBER ▶

C00664227

4 IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

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

Type or Print Name of Treasurer Timothy John David Wilson

Signature of Treasurer

Date

01

03

2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

201801100200001140

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate GRIFFIN JONES

Candidate Party Affiliation REP Office Sought: House Senate President State WI District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<u>C</u> _____
2.	_____	FEC ID number	<u>C</u> _____
3.	_____	FEC ID number	<u>C</u> _____
4.	_____	FEC ID number	<u>C</u> _____

201801100200001141

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

SARA OBENCHAIN

Mailing Address

6302 DYLYN DR,

[Empty grid lines for mailing address]

MADISON WI 53719

Title or Position

CITY

STATE

ZIP CODE

CAMPAIGN IT DIRECTOR

Telephone number

847-668-7484

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

TIMOTHY JOHN DAVID WILSON

Mailing Address

103 WEST COLLEGE AVE SUITE 304

[Empty grid lines for mailing address]

APPLETON WI 54911

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

608-213-2581

201801100200001142

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for Telephone number]

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

S U M M I T C R E D I T U N I O N

Mailing Address

4 0 1 S. Y E L L O W S T O N E D R.

[Empty grid for Mailing Address line 2]

M A D I S O N W I 5 3 7 0 5

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

201001100200001143

201801100200001145

PLY TO SEAL

PRESS FIRMLY TO SEAL

PRIORITY MAIL
POSTAGE REQUIRED

PRIORITY MAIL [®] ★

DATE OF DELIVERY SPECIFIED *

USPS TRACKING™ INCLUDED *

INSURANCE INCLUDED *

PACKUP AVAILABLE

Domestic only

INTERNATIONALLY,
CUSTOMS DECLARATION
MAY BE REQUIRED.

P

U.S. POSTAGE \$6.65
PM 2-DAY 53714 0006
Date of sale 01/06/18 X
06 2500 \$
08276773

PRIORITY MAIL 2-DAY [®]

EXPECTED DELIVERY 01/08/2018

SHIP TO:

0006

Sorted by CASI
Sentinel Post Office
JAN 9 2018

Office of Public Records

PO BOX 77578
WASHINGTON DC 20013-8578

USPS TRACKING NUMBER



9505 5000 0630 8006 0000 10

FROM

*Jones
6302 Dylmar Dr
Madison WI 53714*

Sorted by CASI
Sentinel Post Office
JAN 9 2018



VISIT US AT USPS.COM [®]

EP14F July 2013



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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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Date of Receipt Postmark

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Postmark

USPS PRIORITY MAIL _____
Postmark **1-6-18**

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL **X**

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

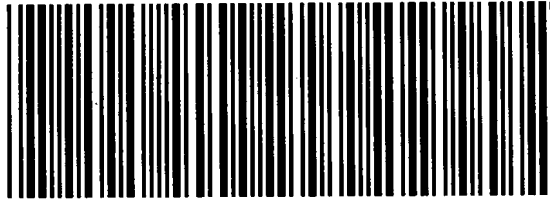
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

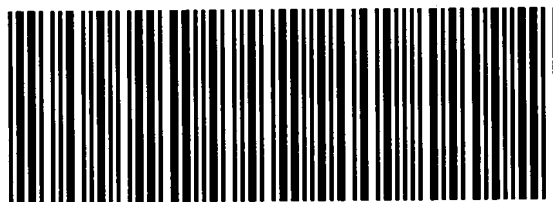
OTHER _____
Date of Receipt or Postmark

PREPARER **DA** DATE PREPARED **1-9-18**

201601100200001146



SEN PATCH



SEN PATCH

201801100200001147