

Image# 202606049870369231

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Jones, Shevrin, , ,		2. Candidate's FEC Identification Number H6FL24087
(b) Address (number and street) PO Box 530158		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Miami FL 33153		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 24

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) Shevrin for Congress	
(b) Address (number and street) PO Box 530158	
(c) City, State, and ZIP Code Miami FL 33153	

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 Jones, Shevrin, , ,	Date 06/04/2026
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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