



# FEC FORM 2

## STATEMENT OF CANDIDACY

OFFICE OF  
GENERAL COUNSEL

2025 SEP 22 AM 7:28

1. (a) Name of Candidate (in full) <u>Jared Sullivan</u>		2. FEC Candidate Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed <u>64 Congress St</u>		
(c) City, State, and ZIP Code <u>Bethlehem, NH 03574</u>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation <u>Democrat</u>	5. Office Sought <u>Senate</u>	6. State & District of Candidate <u>New Hampshire</u>

### 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) <u>Friends of Jared Sullivan for US Senate</u>	
(b) Address (number and street) <u>Po Box 67</u>	
(c) City, State, and ZIP Code <u>Bethlehem, NH, 03574</u>	

### 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 <u>9-19-2025</u>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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NON-CONFIDENTIAL

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OFFICE OF  
GENERAL COUNSEL

# Via FAX

MEMPHIS - 067 - MAY - 04 - 0045-11M-108

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	<div style="display: flex; justify-content: space-between;"> <span>Shipping Date</span> <span>Date of Receipt</span> </div> <div style="display: flex; justify-content: flex-end; align-items: center;"> <span>Next Business Day Delivery</span> <input type="checkbox"/> </div>
<input checked="" type="checkbox"/> Received via FAX	Date of Receipt <b>09/19/25</b>
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<b>MAA</b> PREPARER	<b>9/23/25</b> DATE PREPARED

(4/2023)

NON-PROFIT CORPORATION