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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) N	lame of Candidate (i	n full)								
P	Adams, Jennifer, , ,									
	ddress (number and PO Box 1791	street)	☐ Check if address changed				Candidate's FEC Identification Number H4FL07137			
(c) City, State, and ZIP Code Winter Park			FL 32790					New (N) OR	X (A)	
4. Party	Party Affiliation 5. Office Sought 6. Sta				6. State & Dis	rict of Candidate				
DE	MOCRATIC PARTY	,	House			FL	07			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I her	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)									
NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full)										
JENNIFER ADAMS FOR CONGRESS										
(b) A	ddress (number and	street)								
	PO BOX 1791									
(c) C	ity, State, and ZIP C	ode							_	
	WINTER PARK					FL	32790			
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)										
(b) Address (number and street)										
(c) City, State, and ZIP Code										
	I certify that	I have exa	mined this Stat	ement and to	the best of	my knowledge	nd belief it is true, corre	ct and comp	ete.	
Signature of Candidate							Date .			
Adams, Jennifer, , ,							11/18/2024			
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)