

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

RECEIVED

2013 JUL 18 AM 8:00

FEC MAIL CENTER

1. (a) Name of Candidate (in full) <b>JENNIFER D. GARRISON</b>			2. Candidate's FEC Identification Number		
(b) Address (number and street) <input type="checkbox"/> Check if address changed <b>427 5TH ST.</b>					
(c) City, State, and ZIP Code <b>MARIETTA OH 45750</b>			3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation <b>DEMOCRAT</b>		5. Office Sought <b>U.S. HOUSE</b>		6. State & District of Candidate <b>OHIO 6</b>	

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 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) <b>JENNIFER GARRISON FOR CONGRESS</b>	
(b) Address (number and street) <b>427 5TH ST</b>	
(c) City, State, and ZIP Code <b>MARIETTA OH 45750</b>	

**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 <b>Jennifer Garrison</b>	Date <b>7/12/13</b>
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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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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.

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

	7/18/13
PREPARER	DATE PREPARED

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