## FEC FORM 2 STATEMENT OF CANDIDACY

| (a) Name of Candidate (in full)   |  |  |
|---|--|--|
| Sue LISA Jones  |  |  |
| (b) Address (number and street)   | FEC Candidate IdentiÀcation Number   |  |
| (c) City, State, and ZIP Code   | 3. Is This New Amended   |  |
| MRSA AZ 85202   | Statement (N) OR (A)   |  |
| 4. Party AfAiation , 5. OfAce Sought , 6. State & Distri  |  |  |
| + \-' \   | ion a  |  |
|   |  |  |
| DEsig NaTiON Of pRiNcipal campaig N c OmmiTTEE  |  |  |
| 7. I hereby designate the following named political committee as my Principal Campaign Comm   | littee for the 2016 election(s).   |  |
| NOTE: This designation should be Aed with the appropriate of Ace listed in the instructions.  | (year of election)   |  |
|   |  |  |
| (a) Name of Committee (in full)   | 7  |  |
| People For Sue Lish Jones   | m <u>s</u>   |  |
| (b) Address (number and street)   |  |  |
| ,   | > - 0  |  |
| 2722 S. Cottonwood  | F P m  |  |
| (c) City, State, and ZIP Code   | C A V  |  |
| Mesa, Az 85202  |  |  |
| TRESH, AC, OJECK  |  |  |
| the control of the co  | to the second se |  |
| DEsig NaTiON Of OThER auThORizED of   |  |  |
| (Including Joint Fundraising Representative   | 25)  |  |
| 0. The section of the delication are sections as well as well as the control of t  | million to another and assessed for do not be to 16 of   |  |
| <ol><li>I hereby authorize the following named committee, which is NOT my principal campaign com<br/>candidacy.</li></ol>   | infiltee, to receive and expend funds on benaff of my  |  |
| NOTE: This designation should be Aled 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 ar  | nd belief it is true, correct and complete.  |  |
| Signature of Candidate  | Date   |  |
| $\bigcap$ P. I  |  |  |
| Luc Ling Lones  | 3,1.15   |  |
|   |  |  |
| 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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| A   | 3/10/15                       |  |
| PREPARER (8/2013)   | DATE PREPARED                 |  |
| (5.2.5)   | •                             |  |