Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. JAY ADKINS FOR CONGRESS **BOX 1386** ADDRESS (number and street) (Check if address is changed) **ELIZABETHTON** ΤN 37644 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS steph@jayadkinsforcongress.com (Check if address is changed) Optional Second E-Mail Address ıjay@jayadkinsforcongress.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.JayAdkinsforCongress.com (Check if address is changed) DATE 04 2020 C00741074 FEC IDENTIFICATION NUMBER > 3. IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Adkins, Stephanie, Eva,, Type or Print Name of Treasurer Adkins, Stephanie, Eva,, [Electronically Filed] 07 15 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FFO Forms 4 /Do-	vised 03/0000)	Dogs 2
TYPE OF COMMITT	<u> </u>	Page 2
Candidate Comm		
(a) This co	ommittee is a principal campaign committee. (Complete the candidate information below.)	
,	ommittee is an authorized committee, and is NOT a principal campaign committee. (Compation below.)	plete the candidate
Name of All Candidate	DKINS, JAMES, LYNN, , JR	
Candidate Party Affiliation	REP Office Sought: House Senate President	State TN District 01
(c) This co	emmittee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee		(Domooratio
(d) This co		(Democratic, Republican, etc.) Party.
Political Action C	committee (PAC):	
(e) This co	ommittee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	ommittee supports/opposes more than one Federal candidate, and is NOT a separate se tee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising	Representative:	
	mmittee collects contributions, pays fundraising expenses and disburses net proceeds for tw tees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
` '	mmittee collects contributions, pays fundraising expenses and disburses net proceeds for tw tees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Committees	Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Commi	nittee Name	
JAY ADKII	NS FOR CONGRESS	
6. Name of Any Co	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
NONE		
	<u> </u>	
Mailing Address		
		7ID 00DE
	CITY STATE	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
 Custodian of Rec books and records 	cords : Identify by name, address (phone number optional) and position of the person in pos s.	session of committee
	Adkins, Stephanie, Eva, ,	
Full Name	,175 Richardson Hollow Rd	
Mailing Address	173 Nichardson Hollow Rd	
	Elizabethton TN 37643	
Title or Position	CITY STATE	ZIP CODE
_I Treasurer	423	342 5001
	Telephone number	
Treasurer: List the	e name and address (phone number optional) of the treasurer of the committee; and the nar	ne and address of
	gent (e.g., assistant treasurer).	
Full Name of Treasurer	Adkins, Stephanie, Eva, ,	
Mailing Address	175 Richardson Hollow Rd	
	Elizabethton TN 37643	-
Title or Desition	CITY STATE 2	ZIP CODE
Title or Position Treasurer		342 - 5001

FEC Form	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE ZIF	P CODE
Title or Position		
Name of Bank, I	Eastman Credit Union 2021 Meadowview Lane	
	Kingsport TN 37662	
	CITY STATE ZIF	P CODE
Name of Bank, [Depository, etc.	
Mailing Address		
		· · · · · · · · · · · · · · · · · · ·
	CITY STATE ZIF	CODE