Image# 201903149145706519				03/14/2019 15 . 11
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 ——
				fice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
JENKINS FOR S	SENATE			
ADDRESS (number and street)	PO BOX 727			
(Check if address is changed)				
is changed)	HUNTINGTON		WV 257	11
	CITY A		STATE A	ZIP CODE A
COMMITTEE'S E-MAIL ADDRI	ESS			
🖌 🚽 (Check if address	jarred@evanjenkins.co	om		
is changed)				
	Optional Second E-Mail Adevanjenkinswv@aol.	com		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address	www.evanjenkins.com			
is changed)				
	4 2019			
3. FEC IDENTIFICATION N	UMBER ► C c	00548271		
	1			
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief	it is true, correct and	complete.
	Connon lorrad			
Type or Print Name of Treasure	er Cannon, Jarred, , ,			
Signature of Treasurer	non, Jarred, , ,	[Electronically Filed]	Date	14 / Y Y Y Y 14
NOTE: Submission of false, error		may subject the person signing ON SHOULD BE REPORTED		penalties of 2 U.S.C. §437g.
Office		For further information	contact:	FEC FORM 1
Use Only		Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	sion	(Revised 06/2012)

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		COMMITTEE
Ca		e Committee:
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
	me of ndidate	
	ndidate rty Affiliati	ion REP Office Sought: House Senate President District 00
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	me of ndidate	
Pa	arty Con	nmittee:
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
Ро	litical A	ction Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joi	int Fund	draising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4.	FEC ID number

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Write or Type Committee Name

Title or Position

JENKINS FOR SENATE

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fund	raising Representative	e Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	tify by name, address (phone number optional) and	position of the perso	on in possession of committee
Cannon, J Full Name	arred, , ,		
Mailing Address	PO Box 727		

TREASURER 304 360 279 Telephone number -	798
--	-----

STATE

ZIP CODE

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

CITY

Full Name of Treasurer	Cannon, Jarred, , ,														1										
Mailing Address	PO Box 727																								
	Huntington	I	1	1	I	I	1	I	I				N	٧٧			25	71	1		I	-	- [
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Title or Position				CI	TΥ						I	S	TA	ΓE	-					ZI	P (DE		

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Full Name of Designated Agent														1												
Mailing Address																										
			1																L			1				
							CI	ΓY								STA	ΤE				ZIF	р С	OD	θE		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of B	ank, Depo	ository, etc.
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FIFTH			
Mailing Address	517 9TH STREET		
		WV	25701
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE