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. Joey Nations for Congress 1130 Nebraska Ct. NE ADDRESS (number and street) (Check if address is changed) Salem 97301 OR CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS joey@joeynations.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.joeynations.com (Check if address is changed) DATE 03 2019 C00672477 FEC IDENTIFICATION NUMBER > 3. X 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. Nations, Charlotte, , , Type or Print Name of Treasurer Nations, Charlotte, , , [Electronically Filed] 02 2019 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

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		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Cominformation below.)	plete the candidate
Name Cano	e of lidate	Nations, Joey, , ,	
	lidate Affiliati	on REP Office Sought: X House Senate President	State OR District 05
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name	e of lidate		
Part	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected organization is a:
		Corporation Wo 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 secommittee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.		
	4.		

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Write or Type Committee Na		Tage U
Joey Nations	for Congress	
	d Organization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STA	ATE ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
7. Custodian of Records: le books and records.	dentify by name, address (phone number optional) and position of	the person in possession of committee
	s, Charlotte, , ,	
Full Name	1130 Nebraska Ct. NE	
Mailing Address		
	Salem , Of	R , 97301
Title or Position	CITY STAT	E ZIP CODE
	Telephone number	
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the comr j., assistant treasurer).	mittee; and the name and address of
	s, Charlotte, , ,	
of Treasurer	1130 Nebraska Ct. NE	
Mailing Address		
	Salem	P 197301 1
	Salem OI CITY STAT	
Title or Position		ZII 000L
	Telephone number	

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Telepl	none number	
safety deposit boxes or Name of Bank, Deposit	tory, etc.	committee deposits funds, h	
safety deposit boxes or Name of Bank, Deposit	tory, etc.	e committee deposits funds, h	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. Ils Fargo 3245 Market Street NE		
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. 3245 Market Street NE Salem CITY	OR 9730	01
safety deposit boxes or Name of Bank, Deposit We Mailing Address	maintains funds. tory, etc. 3245 Market Street NE Salem CITY	OR 9730	01
Safety deposit boxes or Name of Bank, Deposit We Mailing Address Name of Bank, Deposit	maintains funds. tory, etc. 3245 Market Street NE Salem CITY tory, etc.	OR 9730 STATE	01
Safety deposit boxes or Name of Bank, Deposit We Mailing Address Name of Bank, Deposit	maintains funds. tory, etc. 3245 Market Street NE Salem CITY tory, etc.	OR 9730 STATE	01
safety deposit boxes or Name of Bank, Deposit We Mailing Address	maintains funds. tory, etc. 3245 Market Street NE Salem CITY tory, etc.	OR 9730 STATE	01