

FEC FORM 2
STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) THOMAS F. JONES		2. FEC Candidate Identification Number
(b) Address (number and street) <input type="checkbox"/> Check if address changed 4310 GASPARVILLE ST.		
(c) City, State, and ZIP Code LAS VEGAS, NEVADA 89129		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation INDEPENDENT AMERICAN PARTY	5. Office Sought SENATOR	6. State & District of Candidate NEVADA

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 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) COMMITTEE TO ELECT TOM JONES
(b) Address (number and street) 4310 GASPARVILLE STREET
(c) City, State, and ZIP Code LAS VEGAS, NEVADA 89129

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 Thomas F. Jones	Date 12/23/15
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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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 THOMAS JONES
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 4310 GASPARVILLE ST
 LAS VEGA, NV 89128
 UNITED STATES US

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 CRD: 6031329/FSSR1500

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WASHINGTON DC 20463

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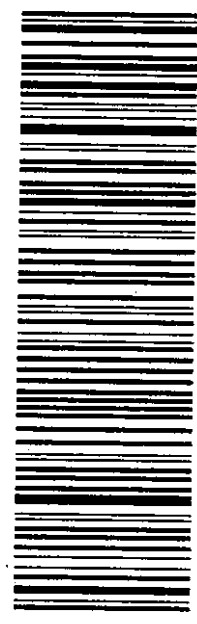
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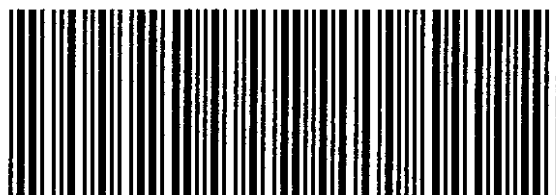
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