

Image# 202507299764341832

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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Thorp, Jonathan, , ,		2. Candidate's FEC Identification Number H6TN07153	
(b) Address (number and street) 6364 Hopewell Rd		3. Is This Statement <input type="checkbox"/> New (N) <input checked="" type="checkbox"/> Amended (A)	
(c) City, State, and ZIP Code Springfield		TN      37172	
4. Party Affiliation INDEPENDENT	5. Office Sought House	6. State & District of Candidate TN      07	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2025 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)

**FRIENDS OF JON THORP**

(b) Address (number and street) 513 MEMORIAL BLVD PMB 114	TN      37172
(c) City, State, and ZIP Code SPRINGFIELD	

### 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 Thorp, Jonathan, , ,	Date 07/29/2025
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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**Form/Schedule:** F2A

**Transaction ID :**

2025 Special Election.

**Form/Schedule:**

**Transaction ID:**