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STATEMENT OF CAND	IDACY		ŗ	PECFI	/ED		
(a) Name of Candidate (in full) JAMIE MAYO (b) Address (number and street)	☐Check if address	changed	23/4	2. Identifica	닭 9: 나 ⁹		
318 KING OAKS DR (c) City, State, and ZIP Code MONROE LA 71202				3. Is This Statem	ent (N)		Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought HOUSE	6. 3	State & Distri LA 05	ct of Candid	ate		
DE 7. I hereby designate the following nar	SIGNATION OF PRINTED TO THE PRINTED			ittee for the	TTEE 2014 (year of electi	electio on)	n(s).
NOTE: This designation should be t	iled with the appropriate office	e listed in the in	structions.				
(a) Name of Committee (in full)							
JAMIE MAYO FOR	CONGRESS						
(b) Address (number and street)							
318 KING OAKS DR	₹						
(c) City, State, and ZIP Code	·					•	
MONROE, LA 712	02						
DE	SIGNATION OF OTH (Including Joint				TEES		
I hereby authorize the following nar candidacy	ned committee, which is NOT	my principal ca	ampaign com	mittee, to red	ceive and exp	end funds	on behalf of my
NOTE: This designation should be	filed with the principal campaig	gn committee.					
(a) Name of Committee (in full)							
(b) Address (number and street)							
(c) City, State, and ZIP Code							
I certify that I have exa	amined this Statement and to t	he best of my i	knowledge ar	nd belief it is	true, correct a	and comple	ete.
Signature of Candidate	_			Date			
Hemie Mays	5	-	8/12/2014				
NOTE: Submission of false, erroneous	, or incomplete information ma	ay subject the p	person signin	g this Statem	nent to penalti	es of 2 U.S	i.C. §437g.
						FEC	C FORM 2 (REV. 12/20

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8/13/2014

From: (318) 600-4060 Sonya Jacobs Accounting Plus LLC Suite 207 300 Washington Street Monroe, LA 71201

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