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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Davis, Morris, D., Col.,							
	(b) Address (number and street) PO Box 18584	□Check	if addres	s changed		Candidate's FEC Identification Number H0NC11175		
	(c) City, State, and ZIP Code					3. Is This New Amended		
	Asheville		NC	2880	4	Statement (N) OR (A)		
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate		
	DEMOCRATIC PARTY	House			NC	11		
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(a) Name of Committee (in full) MOE DAVIS FOR CONGRESS								
	(b) Address (number and street) PO BOX 18584							
	(c) City, State, and ZIP Code							
	ASHEVILLE				NC	28814		
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.								
	,	iled with the principa	al campaiç	gn committe	e.			
	NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)							
	(a) Name of Committee (in fail)							
	(b) Address (number and street)							
	(6) / 1441-555 (11411)251 4.114 511-551)							
_	(c) City, State, and ZIP Code							
	I certify that I have exa	mined this Statemer	nt and to t	the best of	my knowledge a	and belief it is true, correct and complete.		
Si	gnature of Candidate					Date		
	avis, Morris, D., Col.,	[Electronically Filed]				02/22/2021		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)