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## FEC FORM 2

## STATEMENT OF CANDIDACY

<ol> <li>(a) Name</li> </ol>									
	e of Candidate (in full)								
	erd, Charles, Wallace, ,		1. 16 = -1.0			0.0- "	-1- 550.17	ALE	l
	ess (number and street) Box 5411	☐ Check if address changed				Candidate's FEC Identification Number     H0NC11209			
(c) City, S	State, and ZIP Code					3. Is This	Ne		Amended
	eville		NC	28813	<b>i</b>	Stateme	ent 🗶 (N	) OR	(A)
4. Party Affi	iliation	5. Office Sought					ate		
REPUB	LICAN PARTY	House			NC	11			
	DE	SIGNATION	OF PRINC	CIPAL (	CAMPAIGN		TTEE		
7. I hereby	designate the following na	med political comm	ittee as my Pr	rincipal C	ampaign Comn		2020 (year of elec		on(s).
NOTE: T	his designation should be	filed with the appro	priate office lis	sted in the	e instructions.				
(a) Name	e of Committee (in full)	5. Office Sought House  6. State & District of Candidate NC 11  SIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE  med political committee as my Principal Campaign Committee for the 2020 (year of election)  (year of election)  NC 28813  SIGNATION OF OTHER AUTHORIZED COMMITTEES							
Arc	cherd For Congre	SS							
(b) Addro	and (number and atreat)								
	ess (number and street) Box 5411								
(c) City, S	State, and ZIP Code								
Ash	heville				NC	28813			
	DE			_	_		rees		
		(Incl	uding Joint Fu	ndraising	Representative	es)			
8. I hereby candidac	authorize the following nar	ned committee, wh	ich is NOT my	principa	l campaign con	nmittee, to red	eive and exp	oend funds	on behalf of my
NOTE: T	his designation should be	filed with the princip	oal campaign	committe	e.				
(a) Name	e of Committee (in full)								
(b) Addre	ess (number and street)								
(b) Addre	ess (number and street)								
	ess (number and street)  State, and ZIP Code								
	State, and ZIP Code			h 4 - 6					
(c) City, S	State, and ZIP Code  I certify that I have exa	amined this Statem	ent and to the	best of n	ny knowledge a	nd belief it is i	true, correct	and compl	ete.
(c) City, S	State, and ZIP Code	nmined this Statem	ent and to the	best of n	ny knowledge a	nd belief it is	true, correct	and compl	ete.
(c) City, S	State, and ZIP Code  I certify that I have exa	nmined this Statem	ent and to the					and compl	ete.
(c) City, S	State, and ZIP Code  I certify that I have exact	nmined this Statem	ent and to the		ny knowledge a ronically Filed]	Date		and compl	ete.
(c) City, S	State, and ZIP Code  I certify that I have exact	amined this Statem	ent and to the			Date		and compl	ete.
(c) City, S Signature c	State, and ZIP Code  I certify that I have exact			[Electr	onically Filed]	<b>Date</b> 12/26/201	9		
(c) City, S Signature c	State, and ZIP Code  I certify that I have executed the second conditions of Candidate contracts, Wallace, ,			[Electr	onically Filed]	<b>Date</b> 12/26/201	9		
(c) City, S Signature c	State, and ZIP Code  I certify that I have executed the second conditions of Candidate contracts, Wallace, ,			[Electr	onically Filed]	<b>Date</b> 12/26/201	9		

FEC FORM 2 (REV. 02/2009)