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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Morrow, Michele, , ,			2. Candidate's FEC Identification Number S6NC00522	
(b) Address (number and street) 423 Oakridge Road		☐ Check if address changed		
(c) City, State, and ZIP Code Cary NC 27511		3. Is This Statement ☒ New (N) OR ☐ Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate NC 00		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 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) THE ELECT MICHELE MORROW COMMITTEE		
(b) Address (number and street) 1170 BLACK HORSE RUN		
(c) City, State, and ZIP Code RALEIGH NC 27615		

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 Morrow, Michele, , ,	Date 02/01/2026
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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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