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## FEC FORM 2

## STATEMENT OF CANDIDACY

| 1.  | (a) Name of Candidate (in full)  |                       |              |              |                  |  |  |
|---|--|-----------------------|--------------|--------------|------------------|--|--|
|   | DeBerry, Shaunesi, Yvette, ,   |                       |              |              |                  |  |  |
|   | (b) Address (number and street)<br>2631 Housley Rd<br>1116   | 631 Housley Rd        |              |              |                  | Candidate's FEC Identification Number     S6NC00399            |  |
|   | (c) City, State, and ZIP Code  |                       |              |              |                  | 3. Is This New Amended   |  |
|   | Annapolis  |                       | MD           | 21401        | 1                | Statement X (N) OR (A)   |  |
| 4.  | Party Affiliation  | 5. Office Sought      |              |              | 6. State & Dist  | rict of Candidate  |  |
|   | INDEPENDENT  | Senate                |              |              | NC               | 00   |  |
|   | DE   | SIGNATION C           | OF PRIN      | ICIPAL       | CAMPAIG          | N COMMITTEE  |  |
| 7.  | 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election) |                       |              |              |                  |  |  |
|   | NOTE: This designation should be f   | iled with the approp  | riate office | listed in th | e instructions.  |  |  |
|   | (a) Name of Committee (in full)  |                       |              |              |                  |  |  |
|   | SHAUNESI FOR SE  | NATE                  |              |              |                  |  |  |
|   | (b) Address (number and street)  |                       |              |              |                  |  |  |
|   | 2631 Housley Rd  |                       |              |              |                  |  |  |
|   | 1116   |                       |              |              |                  |  |  |
|   | (c) City, State, and ZIP Code  |                       |              |              |                  |  |  |
|   | Annapolis  |                       |              |              | MD               | 21401  |  |
|   |  |                       |              |              |                  |  |  |
|   | DE   | CIONIATION            | SE OTU       | ED 4113      | THORIZED         | COMMITTEES   |  |
|   | DE   |                       | _            | _            | Representativ    | COMMITTEES es)   |  |
|   |  | ·                     |              |              |                  | ,  |  |
| 8.  | I hereby authorize the following name candidacy.   | ned committee, which  | ch is NOT i  | my principa  | al campaign cor  | nmittee, to receive and expend funds on behalf of my           |  |
|   | NOTE: This designation should be f   | led with the principa | al campaig   | n committe   | ee.              |  |  |
|   | (a) Name of Committee (in full)  |                       |              |              |                  |  |  |
|   | ,  |                       |              |              |                  |  |  |
|   |  |                       |              |              |                  |  |  |
|   | (b) Address (number and street)  |                       |              |              |                  |  |  |
|   |  |                       |              |              |                  |  |  |
|   |  |                       |              |              |                  |  |  |
|   | (c) City, State, and ZIP Code  |                       |              |              |                  |  |  |
|   |  |                       |              |              |                  |  |  |
|   |  |                       |              |              |                  |  |  |
|   |  | mined this Stateme    | nt and to tl | he best of i | my knowledge a   | and belief it is true, correct and complete.                   |  |
| I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct Signature of Candidate  Date |  |                       |              |              |                  | Date   |  |
|   |  |                       |              |              |                  |  |  |
| D   | EBERRY. SHAUNESI   |                       |              |              |                  | 07/06/2025   |  |
| D.  | EBERRY, SHAUNESI, , ,  |                       |              |              |                  | 07/06/2025   |  |
| D   | EBERRY, SHAUNESI, , ,  |                       |              |              |                  | 07/06/2025   |  |
| _   |  | or incomplete infor   | mation ma    | y subject th | ne person signir | 07/06/2025  Ing this Statement to penalties of 2 U.S.C. §437g. |  |
| _   |  | or incomplete infor   | mation ma    | y subject th | ne person signir |  |  |
| _   |  | or incomplete infor   | mation ma    | y subject tl | ne person signir |  |  |

FEC FORM 2 (REV. 02/2009)