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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Moore, Carlos, , ,		
(b) Address (number and street) 2970 Clairmont Rd NE Ste 240		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Brookhaven GA 30329		2. Candidate's FEC Identification Number H6GA13088
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
6. State & District of Candidate GA 13		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)

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) CARLOS MOORE FOR GEORGIA		
(b) Address (number and street) 2970 CLAIRMONT RD NE STE 240		
(c) City, State, and ZIP Code BROOKHAVEN GA 30329		

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 Moore, Carlos, , ,	Date 06/12/2025
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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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