## FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 2

1.	(a) Name of Candidate (in full)									
	Davis, Don, , ,									
	(b) Address (number and street) PO Box 511	□ Check if address changed			2. Candidate's FEC Identification Number H2NC02287					
	(c) City, State, and ZIP Code					3. Is Thi		New	N	Amended
	Snow Hill		N	2858	80	Stater	nent	(N)	OR >	< (A)
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Soug House	lht		6. State & Dis	trict of Candi 01	date			
						-				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election(s).									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
DON DAVIS FOR NC										
	(b) Address (number and street)									
	PO BOX 511									
	(c) City, State, and ZIP Code									
	SNOW HILL				NC	28580	C			
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 pri	ncipal campa	aign commit	iee.					
	(a) Name of Committee (in full)									
SERVE AMERICA VICTORY FUND										
	(b) Address (number and street)									
	PO BOX 2013									
	(c) City, State, and ZIP Code									
	SALEM				MA	01970	)			
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						Date	Date			
D	avis, Don, , ,					04/11/20	)24			
N	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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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

## 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)			
Blue to the Future 2024			
(b) Address (number and street)			
430 South Capitol Street SE			
2nd Floor			
(c) City, State, and ZIP Code			
Washington	DC	20003	
Washington	DC	20003	

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.

House Victory Project 2024						
(b) Address (number and street)						
600 Pennsylvania Ave SE #15180						
(c) City, State, and ZIP Code						
Washington DC 20003						

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)						
DEMOCRACY SUMMER 2024						
(b) Address (number and street)						
600 PENNSYLVANIA AVE SE #15180						
(c) City, State, and ZIP Code						
WASHINGTON	DC	20003				

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