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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Moore, Tim, , ,		ook if odds-			2 Condidate's EEO Lite	atification Number		
	(b) Address (number and street) PO Box 97275	☐ Check if address changed		Candidate's FEC Identification Number H4NC14015					
	(c) City, State, and ZIP Code		NO	0760	4 707E		ew Amended		
	Raleigh Party Affiliation	E Office Sough	NC	2762	4-7275	Statement X (N	I) OR (A)		
4.	REPUBLICAN PARTY	5. Office Sough House	t .		NC	14			
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)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
	FRIENDS OF TIM M	100RE							
	(b) Address (number and street)								
	PO Box 97275								
	(c) City, State, and ZIP Code								
	Raleigh				NC	27624-7275			
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 f	iled with the prin	cipal campa	ign committ	ee.				
	(a) Name of Committee (in full)								
	NC STRONG BUCK	KHOUT, H	ARRIG <i>A</i>	AN, KNO	OTT, MCD	OWELL, MOOR	E		
	(b) Address (number and street) PO Box 97275								
	(c) City, State, and ZIP Code								
	Raleigh				NC	27624-7275			
	I certify that I have exa	mined this State	ment and to	the best of	my knowledge a	and belief it is true, correct	and complete.		
Si	gnature of Candidate					Date			
M	loore, Tim, , ,					07/18/2024			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									

FEC FORM 2 (REV. 02/2009)

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F2N Transaction ID:

Form/Schedule: Transaction ID:

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

	candidacy. NOTE : This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full) MOORE NC VICTORY FUND								
	(b) Address (number and street) PO Box 97275								
	(c) City, State, and ZIP Code								
	Raleigh	NC	27624-7275						
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								
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								
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								