## FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)					
Adams, Alma, Shealey, ,					
(b) Address (number and street) 310 W 10th Street				2. Candidate's FEC Identification Number H4NC12100	
(c) City, State, and ZIP Code				3. Is This	lew Amended
Charlotte	NC 28202		Statement (f	N) OR 🎽 (A)	
4. Party Affiliation	5. Office Sought		6. State & Distr	rict of Candidate	
DEMOCRATIC PARTY	House		NC	12	
DE	SIGNATION OF PR	RINCIPAL	CAMPAIGN		
7. I hereby designate the following nar	ned political committee as	my Principal (	Campaign Comm	nittee for the 2020 (year of ele	election(s). ction)
NOTE: This designation should be f	iled with the appropriate of	fice listed in th	ne instructions.		
(a) Name of Committee (in full)					
Alma Adams for Co	ngress				
(b) Address (number and street) P.O. Box 31473					
(c) City, State, and ZIP Code					
Charlotte			NC	28231	
<ul> <li>8. I hereby authorize the following nancandidacy.</li> <li>NOTE: This designation should be f <ul> <li>(a) Name of Committee (in full)</li> </ul> </li> <li>(b) Address (number and street)</li> <li>(c) City, State, and ZIP Code</li> </ul>				nmittee, to receive and ex	xpend funds on behalf of my
	mined this Statement and t	to the best of	my knowledge al	nd belief it is true, correc	t and complete.
Signature of Candidate				Date	
Adams, Alma, S, ,		[Elect	tronically Filed]	01/01/2019	
NOTE: Submission of false, erroneous	or incomplete information	may subject t	he person signin	ng this Statement to pena	Ities of 2 U.S.C. §437g.