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FEC FORM 2

STATEMENT OF CANDIDACY

4 (a) Name of Opendidate (in full)					
 (a) Name of Candidate (in full) Davis, Don, , , 					
	□ Ob *		0.0	FEO I-I	Ni is a se
(b) Address (number and street) PO Box 511	☐ Check if addre	ss changed	H2NC	ate's FEC Identification 02287	Number
(c) City, State, and ZIP Code			3. Is This	s New	Amended
Snow Hill	NC	28580	Staten	nent (N) OR	× (A)
4. Party Affiliation	5. Office Sought	6. State	& District of Candid	date	
DEMOCRATIC PARTY	House	NC	01		
DE	SIGNATION OF PR	INCIPAL CAME	AIGN COMM	ITTEE	
7. I hereby designate the following na	med political committee as m	y Principal Campaigi	Committee for the	2026 (year of election)	ion(s).
NOTE: This designation should be	filed with the appropriate offi	ce listed in the instruc	ctions.		
(a) Name of Committee (in full)					
DON DAVIS FOR N	С				
(b) Address (number and street)					
PO BOX 511					
(c) City, State, and ZIP Code					
SNOW HILL		N	28580)	
DE	SIGNATION OF OT	HER AUTHORI		TEES	
O The arches and beginning the fall assistance		F	·		h - h - lf - f
I hereby authorize the following nar candidacy.	ned committee, which is NO	i my principal campa	ign committee, to re	eceive and expend fund	s on benair or my
NOTE: This designation should be	iled with the principal campa	ign committee.			
(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	ı	
3/ LE.W			. 01010		
I certify that I have exa	nmined this Statement and to	the best of my know	ledge and belief it is	s true, correct and comp	olete.
Signature of Candidate			Date		
			04/15/20	25	
Davis, Don, , ,			04/15/20	25	
NOTE: Submission of false, erroneous				mont to popultion of 2 L	
	, or incomplete information n	nay subject the perso	n signing this Stater	ment to penalties of 2 o	.S.C. §437g.
	, or incomplete information n	nay subject the perso	n signing this Stater	nent to penalties of 2 o	.S.C. §437g.
	, or incomplete information n	nay subject the perso	n signing this Stater	heric to periatiles of 2 o	.S.C. §437g.

FEC FORM 2 (REV. 02/2009)

Washington

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 Fundrais	ing Representa	tives)
B. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of r			ommittee, to receive and expend funds on behalf of my
	candidacy. NOTE: This designation should be filed with the principal camp	aign committee	2 .
	(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
_			
3.	I hereby authorize the following named committee, which is NOT my principle candidacy. NOTE : This designation should be filed with the principal camp		
	(a) Name of Committee (in full)		
	House Victory Project 2024		
	(b) Address (number and street)		
	600 Pennsylvania Ave SE #15180		
	(c) City, State, and ZIP Code		_
	Washington	DC	20003
3.	I hereby authorize the following named committee, which is NOT my principle candidacy. NOTE : This designation should be filed with the principal camp		
	(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
3.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal camp		
	(a) Name of Committee (in full)		
	Don Davis Victory Fund		
	(b) Address (number and street)		
	122 C Street NW		
	Suite 360 (c) City, State, and ZIP Code		

DC

20001

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Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

3.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	Generation 18					
	(b) Address (number and street)					
	600 Pennsylvania Ave SE #15180					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
3.	I hereby authorize the following named committee, which candidacy. NOTE : This designation should be filed with the candidacy.		•	ny		
	(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			
3.	I hereby authorize the following named committee, which candidacy. NOTE : This designation should be filed with t			my		
	(a) Name of Committee (in full)			_		
	Don Davis Victory Fund					
	(b) Address (number and street)					
	122 C Street NW					
	Suite 360 (c) City, State, and ZIP Code					
	Washington	DC	20001			
3.	I hereby authorize the following named committee, which candidacy. NOTE : This designation should be filed with the			my		
	(a) Name of Committee (in full)					
	DEMOCRACY SUMMER 2026					
	(b) Address (number and street) 600 PENNSYLVANIA AVE SE #15180			_		
	(c) City, State, and ZIP Code					

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Optional Supplemental Page for Designation of Additional Authorized Committees

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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 candidacy. NOTE : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)				
	FRONTLINE PROTECTION FUND				
	(b) Address (number and street)				
	PO BOX 65322				
	(c) City, State, and ZIP Code				
	WASHINGTON D	OC .	20035		
8.	8. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campaign		nittee, to receive and expend funds on behalf of my		
	(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	Α (01970		
8.	8. I hereby authorize the following named committee, which is NOT my principal cacandidacy. NOTE: This designation should be filed with the principal campaign (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code		nittee, to receive and expend funds on behalf of my		
8.	I hereby authorize the following named committee, which is NOT my principal ca candidacy. NOTE: This designation should be filed with the principal campaign		nittee, to receive and expend funds on behalf of my		
	(a) Name of Committee (in full)				
	(b) Address (number and street)				
	(c) City, State, and ZIP Code				