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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Genant, Pamela, , ,					O Condidatela FFO Identiff ti No. 1	_	
	(b) Address (number and street) 1519 Falls Road	□Cr	eck if addre	ss cnanged		Candidate's FEC Identification Number     H4NC14023		
	(c) City, State, and ZIP Code					3. Is This New Amended		
	Valdese		NC	2869		Statement X (N) OR (A)		
4.	Party Affiliation	5. Office Sough	nt			trict of Candidate		
	DEMOCRATIC PARTY	House			NC	14	_	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	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)							
	Elect Pam Genant							
	(b) Address (number and street)						_	
	1519 Falls Road							
	(c) City, State, and ZIP Code						_	
	Valdese				NC	28690		
<ul> <li>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.</li> <li>NOTE: This designation should be filed with the principal campaign committee.</li> <li>(a) Name of Committee (in full)</li> <li>(b) Address (number and street)</li> <li>(c) City, State, and ZIP Code</li> </ul>								
							_	
	I certify that I have exa	mined this State	ement and to	the best of	my knowledge a	and belief it is true, correct and complete.		
Signature of Candidate					Date	-		
Genant, Pamela, , ,					11/27/2023			
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)