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FEC FORM 2 STATEMENT OF CANDIDACY

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2019 JAN 29 AM 10: 10

1. (a) Name of Candidate (in full) Trevor Michael Fuller				
(b) Address (number and street)				
(c) City, State, and ZIP Code Chorlo He, NC 28217 3. Is This Statement (N) OR (A)				
4. Party Affiliation 5. Office Sought 6. State & District of Candidate New Oct 11.5. Senate Voith Corolly 0				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE				
DESIGNATION OF PHINOIPAE CAMPAIGN COMMITTEE				
7. I hereby designate the following named political committee as my Principal Campaign Committee for the document designate the following named political committee as my Principal Campaign Committee for the document designate the following named political committee as my Principal Campaign Committee for the document designate the following named political committee as my Principal Campaign Committee for the document designate the following named political committee as my Principal Campaign Committee for the document designate the following named political committee as my Principal Campaign Committee for the document designate the following named political committee as my Principal Campaign Committee for the document designated as the following named political committee as my Principal Campaign Committee for the document designated as the document				
NOTE: This designation should be filed with the appropriate office listed in the instructions.				
(a) Name of Committee (in full)				
Fuller for North Carolina (b) Address (number and street)				
(b) Address (number and street)				
756 Tyvola Road, Sulte 119				
(c) City, State, and ZIP Code				
Charlotte, NC 28217				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)				
(massing sount and along 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.				
The table of the transfer of t				
(a) Name of Committee (in full)				
\cdot				
(b) Address (number and street)				
(c) City, State, and ZIP Code				
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 1 Date				
1.10,2019				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.				
9-00068 FEC FORM 2 (REV. 02/2009				

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Optional Supplemental Page for Designation of Additional Authorized Committees

Page 2 of 2

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

3.	candidacy. NOTE : This designation should be filed with the principal campaign committee.		
(a) Name of Committee (in full)			
	(c) City, State, and ZIP Code		
3.	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 (aumber and steps)		
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Federal Election Commission Washington, DC 20463 1050 First Street, NE

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