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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Moore, Ariadne, Taige, Ms, / Raines, Liira, , Ms,		
(b) Address (number and street) ☐ Check if address changed 4986 Colonial Park Drive Apt E		2. Candidate's FEC Identification Number P40013161
(c) City, State, and ZIP Code South Charleston WV 25309		3. Is This Statement ☒ New (N) OR ☐ Amended (A)
4. Party Affiliation W	5. Office Sought Presidential	6. State & District of Candidate 00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2023 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) There is no committee		
(b) Address (number and street) 4986 Colonial Park Drive Apt E		
(c) City, State, and ZIP Code South Charleston WV 25309		

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 filed with the principal campaign committee.

(a) Name of Committee (in full)		
(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 Moore, Ariadne, Taige, Ms., [Electronically Filed]	Date 05/27/2023
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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 MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F2N

Transaction ID :

2023 Special Election.

Form/Schedule:

Transaction ID: