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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Bray, Shannon, W, ,		
(b) Address (number and street) 375 Matthews Mill Pond Rd		<input checked="" type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Angier NC 27501		2. Candidate's FEC Identification Number S0NC00335
4. Party Affiliation LIBERTARIAN		5. Office Sought Senate
6. State & District of Candidate NC 00		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) FRIENDS OF SHANNON BRAY		
(b) Address (number and street) 215 MYSTIC PINE PL		
(c) City, State, and ZIP Code APEX NC 27539		

### 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 Bray, Shannon, W, Mr.,	Date 12/15/2025
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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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