

Image# 202010259336528923

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Beasley, Sharese, N, Ms.,		
(b) Address (number and street) 509 southern Pines Dr.		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Columbus		2. Candidate's FEC Identification Number S8NC00320
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)
5. Office Sought Senate	6. State & District of Candidate NC 00	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2028 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)

Democratic national

(b) Address (number and street)
1600 Pennsylvania ave nw

(c) City, State, and ZIP Code

Washington DC 20500

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 Beasley, Sharese, N, Ms.,	Date 10/25/2020
<i>[Electronically Filed]</i>	

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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Form/Schedule: F2N

Transaction ID :

I am a disability person and I am running for senator in 2030

Form/Schedule: F2N

Transaction ID:

2028 Special Election.