FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 5

1.	(a) Name of Candidate (in full)												
	Cunningham, Cal, , , (b) Address (number and street)		heck if addre		nacd		20	Candidate		dontific	ation N	lumber	
	PO Box 309		neck il adult		ingeu			SONC00		dentino	alionin	umber	
	(c) City, State, and ZIP Code			_			3.	Is This		New		v	Amended
	Raleigh		N	С	27602			Stateme		(N)	OR	×	(A)
4.	Party Affiliation	5. Office Soug	ht			6. State & Dist	rict of	Candidat	e				
	DEMOCRATIC PARTY	Senate				NC							
	DE	SIGNATIO	N OF PR	RINCI	PAL	CAMPAIGN		OMMIT	TEE				
7.	I hereby designate the following nar	med political co	mmittee as i	my Prin	cipal C	ampaign Comn	nittee		2020 /ear of e	election	_ electio	on(s).	
	NOTE: This designation should be f	iled with the ap	propriate off	fice liste	ed in th	e instructions.							
	(a) Name of Committee (in full) Cal for NC												
	(b) Address (number and street) PO Box 309												
	(c) City, State, and ZIP Code												
	Raleigh					NC		27602					
8.	I hereby authorize the following nan candidacy. NOTE: This designation should be f						nmitte	e, to rece	ive and	expend	d funds	on beł	nalf of my
	(a) Name of Committee (in full) Cal Cunningham Vi	ctory Fund	b										
	(b) Address (number and street) 611 Pennsylvania Ave SE												
	#143												
	(c) City, State, and ZIP Code												
	Washington					DC		20003					
	I certify that I have exa	mined this Stat	ement and t	o the b	est of r	ny knowledge a	nd be	elief it is tr	ue, corre	ect and	compl	ete.	
Si	gnature of Candidate						Dat	е					
С	unningham, Cal, , ,				[Elect	ronically Filed]	12	2/07/2020)				
N	OTE: Submission of false, erroneous	, or incomplete	information	may su	bject th	ne person signir	ng this	Stateme	nt to pe	nalties	of 2 U.:	S.C. §4	37g.

FEC FORM 2 (REV. 02/2009)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)		
IA/NC Senate 2020		
(b) Address (number and street) 918 Pennsylvania Ave SE		
(c) City, State, and ZIP Code Washington	DC	20003

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)		
Iowa North Carolina Victory Fund		
-		
(b) Address (number and street) 918 Pennsylvania Ave SE		
(c) City, State, and ZIP Code		
Washington	DC	20003

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)		
End Citizens United - NOW		
(b) Address (number and street) 514 Daniels St		
#286		
(c) City, State, and ZIP Code		
Raleigh	NC	27605

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)		
Blue Senate Majority 2020		
(b) Address (number and street) 120 Maryland Ave NE		
(c) City, State, and ZIP Code		
Washington	DC	20002

Optional Supplemental Page for Designation of Additional Authorized Committees

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)			
Blue Senate Candidate Fund			
(b) Address (number and street) 918 Pennsylvania Ave SE			
(c) City, State, and ZIP Code			
Washington	DC	20003	

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)			
Common Sense 2020			
(b) Address (number and street) 910 17th St NW			
Ste 925			
(c) City, State, and ZIP Code			
Washington	DC	20006	

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)		
Win the Senate 2020		
(b) Address (number and street) 611 Pennsylvania Ave SE		
#143		
(c) City, State, and ZIP Code		
Washington	DC	20003

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)			
Senate Spurs			
(b) Address (number and street) 918 Pennsylvania Ave SE			
(c) City, State, and ZIP Code			
Washington	DC	20003-2140	

Optional Supplemental Page for Designation of Additional Authorized Committees

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)								
North Carolina Senate Victory 2020								
(b) Address (number and street) 120 Maryland Ave NE								
(c) City, State, and ZIP Code								
Washington	DC	20002						

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)							
Senate Battleground Victory Fund							
(b) Address (number and street) 611 Pennsylvania Ave SE #143							
(c) City, State, and ZIP Code Washington	DC	20003					
	20						

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)		
Green the Senate 2020 Victory Fund		
(b) Advecc (number and street)		
(b) Address (number and street) 600 Pennsylvania Ave SE		
#15845		
(c) City, State, and ZIP Code		
Washington	DC	20003

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)			
Senate 180 Victory Fund			
(b) Address (number and street) 600 Pennsylvania Ave SE			
#15845			
(c) City, State, and ZIP Code			
Washington	DC	20003	

Optional Supplemental Page for Designation of Additional Authorized Committees

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)		
Core Four Victory Fund		
(b) Address (number and street) 611 Pennsylvania Ave SE		
#143		
(c) City, State, and ZIP Code		
Washington	DC	20003

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	 	

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

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