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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a)	Name of Candidate (in full)							
/L.\	Spartz, Victoria, , ,		اد الاصطاحات			2. Condidate's FFC Identification Number		
(D)	Address (number and street) PO Box 505	□Chec	k if addres:	s cnanged		Candidate's FEC Identification Number H0IN05326		
(c)	City, State, and ZIP Code					3. Is This New Amended		
	Noblesville		IN	4606		Statement (N) OR X (A)		
	rty Affiliation	5. Office Sought				strict of Candidate		
RI	EPUBLICAN PARTY	House			IN	05		
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7. I h	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)							
NC	TE: This designation should be	iled with the appro	priate office	e listed in th	ne instructions.			
(a)	Name of Committee (in full)							
	VICTORIA SPARTZ	FOR CON	GRESS					
(b)	Address (number and street)							
	PO BOX 505							
(c)	City, State, and ZIP Code							
	NOBLESVILLE				IN	46061		
car NC	ndidacy. TE: This designation should be f					mmittee, to receive and expend funds on behalf of my		
(a)	Name of Committee (in full)							
	VICTORIA VICTOR	Y FUND						
(b)	Address (number and street) 824 S MILLEDGE AVE STE 1	01						
	624 S WILLEDGE AVE STE	U1						
(c)	City, State, and ZIP Code							
	ATHENS				GA	30605		
	<u> </u>	mined this Statem	ent and to t	he best of I	my knowledge a	and belief it is true, correct and complete.		
Signature of Candidate					Date			
Spart	z, Victoria, , ,					11/14/2024		
NOTE	: Submission of false, erroneous	, or incomplete info	rmation ma	ay subject t	ne person signi	ing this Statement to penalties of 2 U.S.C. §437g.		

FEC FORM 2 (REV. 02/2009)