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PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MELLOR, VICTOR, GILBERT, ,		
(b) Address (number and street) 54 BURNETT ROAD		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code WARWICK		RI 20889
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate RI 02
3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input 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 2026 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 VICTOR MELLOR

(b) Address (number and street)

133 SOUTH HARBOR DRIVE

(c) City, State, and ZIP Code

VENICE

FL

34285

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 MELLOR, VICTOR, GILBERT, ,	Date 11/01/2025
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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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