

FEC FORM 2  
STATEMENT OF CANDIDACY

|                                                                                                          |  |                                                       |
|----------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|
| 1. (a) Name of Candidate (in full)<br>ROSS, RICKY, ALLEN, MISTER, JR                                     |  |                                                       |
| (b) Address (number and street)<br>2023 W GALBRAITH ROAD<br>APT #3                                       |  | <input type="checkbox"/> Check if address changed     |
| (c) City, State, and ZIP Code<br>CINCINNATI OH 45239                                                     |  | 2. Candidate's FEC Identification Number<br>P40020299 |
| 4. Party Affiliation<br>INDEPENDENT                                                                      |  | 5. Office Sought<br>Presidential                      |
|                                                                                                          |  | 6. State & District of Candidate<br>00                |
| 3. Is This Statement <input checked="" type="checkbox"/> New (N) 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 2024 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)<br>MISTER RICKY ALLEN ROSS JR FOR PRESIDENT |  |  |
| (b) Address (number and street)<br>2023 W GALBRAITH ROAD<br>APT #3          |  |  |
| (c) City, State, and ZIP Code<br>CINCINNATI OH 45239                        |  |  |

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<br>ROSS, RICKY, ALLEN, MISTER, JR | Date<br>06/25/2024 |
|----------------------------------------------------------|--------------------|

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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