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STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Melton, Jessica, , Ms.,							
	(b) Address (number and street) 3351 NE 5th Ave	☐ Check if address changed				Candidate's FEC Identification Number H0FL22084		
	(c) City, State, and ZIP Code					3. Is This No	ew Amended	
	Boca Raton		Fl	L 3343	1	Statement (N	I) OR (A)	
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	rict of Candidate		
	REPUBLICAN PARTY	House			FL	22		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) JESSI MELTON FOR CONGRESS							
	(b) Address (number and street) 3351 NE 5TH AVE							
	(c) City, State, and ZIP Code							
	BOCA RATON				FL	33431		
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								
8.	I hereby authorize the following name candidacy.	ned committee	, which is NO	T my princip	al campaign con	nmittee, to receive and ex	pend funds on behalf of my	
	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 Date								
M	elton, Jessica, , ,	[Electronically Filed]			tronically Filed]	10/23/2019		
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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