PAGE 1/8 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Elise for Congress PO Box 338 ADDRESS (number and street) (Check if address is changed) Willsboro 12996 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance@complianceconsultingva.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.eliseforcongress.com (Check if address is changed) DATE 29 2014 C00547893 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. James E. Morris Type or Print Name of Treasurer James E. Morris [Electronically Filed] 10 29 2014 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Only

Toll Free 800-424-9530 Local 202-694-1100

FEC	Form 1 (Revised 02/2009)	Page 2				
TYPE OF COMMITTEE						
	ite Committee:					
(a) ×	This committee is a principal campaign committee. (Complete the candidate information below.))				
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate				
Name of Candidate	Elise M. Stefanik					
Candidate	Office	State				
Party Affili	ation REP Sought: X House Senate President	District 21				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Committee:						
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Political	Action Committee (PAC):					
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:				
	Corporation Corporation w/o Capital Stock	Labor Organization				
	Membership Organization Trade Association	Cooperative				
	In addition, this committee is a Lobbyist/Registrant PAC.					
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pa committee. (i.e., nonconnected committee)					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint Fu	ndraising Representative:					
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political				
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political				
Co	Committees Participating in Joint Fundraiser					
1.	FEC ID number					
2.	FEC ID number					
3.	FEC ID number					
4						

FEC Form 1 (Davised 03/2000)	Page 3
FEC Form 1 (Revised 02/2009) Write or Type Committee Name	raye 3
Elise for Congress	
6. Name of Any Connected Organization, Affiliated Committee,	Joint Fundraising Representative, or Leadership PAC Sponsor
NEW YORK MAJORITY FUND 2014	
PO BOX 9891	
Mailing Address	
ARLINGTON	VA 22219
CITY	STATE ZIP CODE
Relationship: Connected Organization Affiliated Committee	Exact Sponsor Leadership PAC Sponsor L
 Custodian of Records: Identify by name, address (phone number books and records. 	er optional) and position of the person in possession of committee
Cabell Hobbs	
Full Name PO Box 365	
Mailing Address	
Malaga	, , VA , , ,22101 , ,
McLean	
Title or Position CITY	STATE ZIP CODE
Assistant Treasurer	Telephone number 202 345 - 1213
3. Treasurer: List the name and address (phone number optional, any designated agent (e.g., assistant treasurer).) of the treasurer of the committee; and the name and address of
Full Name James E. Morris	
of Treasurer	
Mailing Address 146 McDougal Road	
Argyle	NY 12809
Argyle CITY Title or Position	NY 12809 - LIP CODE

FEC Form 1 (Revised	1 02/2009)		Page 4			
Full Name of Designated Cabell Hot Agent	obs					
Mailing Address	PO Box 365					
	McLean CITY	VA 22101 STATE	ZIP CODE			
Title or Position Assistant Treasurer		Telephone number 202 -	345 - 1213			
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.						
BB&T						
Mailing Address	1909 K Street NW					
	Washington	DC 20006	<u> </u>			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.						
First Ni	agara 13 Maple Ave					
Walling Address						
	Voorheesville	NY 12186	3			
	CITY	STATE	ZIP CODE			

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NY Congressional Victory Fund 228 S. Washington St Mailing Address Ste. 115 22314 Alexandria **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

FEC Form 1G (Revised 06/2011) Page 6 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Republicans Inspiring Success & Empowerment Project (RISE PROJECT) PO BOX 2485 Mailing Address 22152 Springfield **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

Page 7 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Winning Women 228 S. Washington St Mailing Address Ste. 115 Alexandria 22314 **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

Page 8 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Young Guns Day III 2014 228 S. Washington Street SE Mailing Address Suite 115 DC 22314 Washington **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number