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FEC FORM 2

STATEMENT OF CANDIDACY

_	(a) Name of Candidate (in	. fII\									
1.	(a) Name of Candidate (in Stefanik, Elise, M., ,	i iuii)									
	(b) Address (number and	stroot)	ПС	heck if addre	se changed		2 Candida	ate's FEC Ider	tification	Numb	or
	PO Box 500	Silect)		TICCK II AGGIC	33 changed		H4NY		itilication	INGITID	Ci
	(c) City, State, and ZIP Co	ode					3. Is This	s Ne	•W		Amended
	Glens Falls			NY	1280	1	Stater			,	(A)
4.	Party Affiliation		5. Office Soug	ht		6. State & Dis	trict of Candi	date			
	REPUBLICAN PARTY		House			NY	21				
		DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMM	ITTEE			
7.	I hereby designate the fol	lowing nan	ned political co	mmittee as m	y Principal (Campaign Com	mittee for the	2024 (year of elec		tion(s)	
	NOTE: This designation s	should be f	iled with the ap	propriate offi	ce listed in th	ne instructions.					
	(a) Name of Committee (i	n full)									
	Elise for Cong	gress									
	(b) Address (number and	street)									
	PO Box 500										
	(c) City, State, and ZIP Co	ode									
	Glens Falls					NY	1280	1			
		DE	SIGNATIO	N OF OT	HER AU	THORIZED	COMMIT	TEES			
						g Representativ					
0	I haraby outhorize the fall	owing nom	and committee	which ic NO	F mu principa	al compoign cor	mmittaa tar	socius and avr	and fund	0 00 6	scholf of my
0.	I hereby authorize the folloandidacy.	owing nan	iea committee,	WILCH IS INO	i my pimcipa	ai campaign coi	minitee, to re	eceive and exp	ena iuna	S OII L	enall of my
	NOTE: This designation s	hould be fi	led with the pri	ncipal campa	ign committe	ee.					
	(a) Name of Committee (i	n full)									
	ELISE VICTO	RY FU	JND								
	/b) A -l -l /	-4									
	(b) Address (number and PO BOX 500	street)									
	(c) City, State, and ZIP Co	ode									
	GLENS FALLS					NY	12801				
	I certify that	I have exa	mined this Stat	tement and to	the best of	my knowledge a	and belief it is	s true, correct	and comp	olete.	
Si	gnature of Candidate						Date				
Ste	efanik, Elise, , ,				[Elect	ronically Filed]	07/12/20	23			
					[Eleci	roпісану ғыва <u>ј</u>	017.12/20				
NC	OTE: Submission of false,	erroneous,	or incomplete	information n	nay subject t	he person signi	ng this State	ment to penalt	ies of 2 U	.S.C.	§437g.

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	2 6	of ²
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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	8. I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE : This designation should be filed with the principal campa		mmittee, to receive and expend funds on behalf of my
	(a) Name of Committee (in full)		
	UPSTATE NEW YORK FIGHTERS		
	(b) Address (number and street) P.O. BOX 500		
	(c) City, State, and ZIP Code		
	GLENS FALLS	NY	12801
8.	 I hereby authorize the following named committee, which is NOT my principe candidacy. NOTE: This designation should be filed with the principal campa 		mmittee, to receive and expend funds on behalf of my
	(a) Name of Committee (in full)		
	TEAM ELISE		
	(b) Address (number and street) PO BOX 500		
	(c) City, State, and ZIP Code		
	GLENS FALLS	NY	12801
8.	8. I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE: This designation should be filed with the principal campa (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code	al campaign co aign committee.	mmittee, to receive and expend funds on behalf of my
8.	8. I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE: This designation should be filed with the principal campa (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500	al campaign co aign committee.	
	8. I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE: This designation should be filed with the principal campa (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code	al campaign coaign committee.	mmittee, to receive and expend funds on behalf of my
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