Image# 201801049090366638 PAGE 1 / 3

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)			<u> </u>					
	Stefanik, Elise, M., , (b) Address (number and street) PO Box 500	X C	heck if addre	ess change	d	2. Candidate's FEC Ide	entification No	umber	
	(c) City, State, and ZIP Code					H4NY21079 3. Is This	lew		Amended
	Glens Falls		N'	Y 128	01		N) OR	×	(A)
4.	Party Affiliation	5. Office Soug	ght			rict of Candidate			
	REPUBLICAN PARTY	House			NY	21			
	DE	SIGNATIO	N OF PR	INCIPA	L CAMPAIGN	N COMMITTEE			
7.	I hereby designate the following nar	ned political co	ommittee as r	ny Principa	l Campaign Comr	mittee for the 2018 (year of ele	electio	n(s).	
	NOTE: This designation should be f	iled with the ap	opropriate off	ice listed in	the instructions.				
	(a) Name of Committee (in full)								
	Elise for Congress								
	(b) Address (number and street) PO Box 500								
	(c) City, State, and ZIP Code								
	Glens Falls				NY	12801			
8.	I hereby authorize the following nan- candidacy.					nmittee, to receive and ex	kpend funds	on beh	nalf of my
	NOTE: This designation should be f	iled with the pr	incipal campa	aign commi	ttee.				
	(a) Name of Committee (in full) Elise Victory Fund								
	(b) Address (number and street) Po Box 500								
	(c) City, State, and ZIP Code								
	Glens Falls				NY	12801			
	I certify that I have exa	mined this Sta	tement and to	o the best o	f my knowledge a	and belief it is true, correc	t and comple	te.	
Si	gnature of Candidate					Date			
Н	obbs, Cabell, , ,			[Ele	ctronically Filed]	01/04/2018			
NO	OTE: Submission of false, erroneous	or incomplete	information r	may subject	the person signir	ng this Statement to pena	lties of 2 U.S	.C. §4	37g.
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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	3

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 m candidacy. NOTE : This designation should be filed with the principal campaign committee.				f my
	(a) Name of Committee (in full)			
	NY Congressional Victory Fund			
	(b) Address (number and street) 228 S. Washington Street Suite 115			
	(c) City, State, and ZIP Code			
	Alexandria	VA	22314	
8.	I hereby authorize the following named committee, which is NOT my prin candidacy. NOTE : This designation should be filed with the principal can		•	fmy
	(a) Name of Committee (in full)			
	Millennial GOP Victory Committee 2017			
	(b) Address (number and street) 824 S Milledge Ave Ste 101			
	(c) City, State, and ZIP Code			
	Athens	GA	30605	
8.	I hereby authorize the following named committee, which is NOT my princandidacy. NOTE: This designation should be filed with the principal can (a) Name of Committee (in full) Winning Women Victory Committee		•	f my
	(b) Address (number and street) 228 S. Washington Street			
	Suite 115			
	(c) City, State, and ZIP Code			
	Alexandria	VA	22314	
8.	I hereby authorize the following named committee, which is NOT my prin candidacy. NOTE : This designation should be filed with the principal can		•	f my
	(a) Name of Committee (in full)			
	RISE PROJECT			
	(b) Address (number and street) PO BOX 2485			
	(c) City, State, and ZIP Code			
	SPRINGFIELD	VA	22152	

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	³ of	3	
Page	- 01	-	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

8. I ca	a) Name of Committee (in full) Strengthen America Committee b) Address (number and street) 138 Conant Street 2nd Floor c) City, State, and ZIP Code Beverly hereby authorize the following named committee, which is NOT my presendidacy. NOTE: This designation should be filed with the principal cata) Name of Committee (in full)		
8. I c:	b) Address (number and street) 138 Conant Street 2nd Floor c) City, State, and ZIP Code Beverly hereby authorize the following named committee, which is NOT my preandidacy. NOTE: This designation should be filed with the principal care	incipal campaign c	committee, to receive and expend funds on behalf of my
8. I c:	138 Conant Street 2nd Floor c) City, State, and ZIP Code Beverly hereby authorize the following named committee, which is NOT my prendidacy. NOTE: This designation should be filed with the principal care	incipal campaign c	committee, to receive and expend funds on behalf of my
8. I c: (٤	Beverly hereby authorize the following named committee, which is NOT my presentions. NOTE: This designation should be filed with the principal care.	incipal campaign c	committee, to receive and expend funds on behalf of my
(é	hereby authorize the following named committee, which is NOT my preandidacy. NOTE : This designation should be filed with the principal ca	incipal campaign c	committee, to receive and expend funds on behalf of my
(é	andidacy. NOTE: This designation should be filed with the principal ca		
_	a) Name of Committee (in full)		
(I	b) Address (number and street)		
(0	c) City, State, and ZIP Code		
C	hereby authorize the following named committee, which is NOT my preandidacy. NOTE : This designation should be filed with the principal cata) Name of Committee (in full)	· · ·	
(k	b) Address (number and street)		
(0	c) City, State, and ZIP Code		
	hereby authorize the following named committee, which is NOT my prandidacy. NOTE : This designation should be filed with the principal ca		
(8	a) Name of Committee (in full)		
(k	b) Address (number and street)		
(0	c) City, State, and ZIP Code		