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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)					
	Stefanik, Elise, M., ,		ماماد الأحماطية			2. Condidate's FFC Identification Number
	(b) Address (number and street) PO Box 500	ЦС	heck if addre	ss cnanged		Candidate's FEC Identification Number H4NY21079
	(c) City, State, and ZIP Code				_	3. Is This New Amended
	Glens Falls		N)	1280		Statement (N) OR X (A)
4.	Party Affiliation	5. Office Soug	jht			trict of Candidate
	REPUBLICAN PARTY	House			NY	21
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMITTEE
7.	I hereby designate the following nar	med political co	mmittee as n	ny Principal	Campaign Com	mittee for the 2024 election(s). (year of election)
	NOTE: This designation should be f	iled with the ap	propriate offi	ce listed in t	he 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
	DE	SIGNATIO	N OF OT	HER AU	THORIZED	COMMITTEES
					g Representativ	
•		·				
	candidacy.	nea committee,	wnich is NO	i my princip	ai campaign coi	mmittee, to receive and expend funds on behalf of my
	NOTE: This designation should be f	iled with the pr	incipal campa	aign committ	ee.	
	(a) Name of Committee (in full)					
	ELISE VICTORY F	UND				
	(b) Address (number and street)					
	PO BOX 500					
	(c) City, State, and ZIP Code					
	GLENS FALLS				NY	12801
	322113171223					12001
	I certify that I have exa	mined this Sta	tement and to	the best of	my knowledge a	and belief it is true, correct and complete.
Sig	gnature of Candidate					Date
	efanik, Elise, , ,					01/03/2024
Sic	ejanik, Elise, , ,					01/03/2024
	•					
NO		, or incomplete	information n	nay subject	he person signi	ng this Statement to penalties of 2 U.S.C. §437g.
NO		, or incomplete	information n	nay subject	he person signi	ng this Statement to penalties of 2 U.S.C. §437g.
NO		, or incomplete	information n	nay subject	he person signi	ng this Statement to penalties 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

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

3.	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)						
	UPSTATE NEW YORK FIGHTERS						
	(b) Address (number and street) P.O. BOX 500						
	(c) City, State, and ZIP Code GLENS FALLS	NY	12801				
3.	I hereby authorize the following named committee, which is NOT my p candidacy. NOTE : This designation should be filed with the principal of		•	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				
3.	I hereby authorize the following named committee, which is NOT my p candidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND			of my			
3.	candidacy. NOTE : This designation should be filed with the principal of (a) Name of Committee (in full)			of my			
3.	candidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code			of my			
3.	candidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500			of my			
	candidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code	nampaign commit	12801 committee, to receive and expend funds on behalf				
	candidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code GLENS FALLS	nampaign commit	12801 committee, to receive and expend funds on behalf				
	candidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code GLENS FALLS I hereby authorize the following named committee, which is NOT my pocandidacy. NOTE: This designation should be filed with the principal of the control of the c	nampaign commit	12801 committee, to receive and expend funds on behalf				
	candidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code GLENS FALLS I hereby authorize the following named committee, which is NOT my pocandidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full)	nampaign commit	12801 committee, to receive and expend funds on behalf				
	candidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code GLENS FALLS I hereby authorize the following named committee, which is NOT my pocandidacy. NOTE: This designation should be filed with the principal of (a) Name of Committee (in full) TEAM ELISE (b) Address (number and street)	nampaign commit	12801 committee, to receive and expend funds on behalf				

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

	(including John Fundalsing 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)						
	STEFANIK- ESPOSITO NY VICTORY						
	(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 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)						
	GROW THE MAJORITY NY						
	(b) Address (number and street) 228 S WASHINGTON ST STE 115						
	(c) City, State, and ZIP Code						
	ALEXANDRIA VA 22314						
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						
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						
	(0, 0.9, 0.00, 0.00						