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FEC FORM 2

STATEMENT OF CANDIDACY

	(0 "11 (" (1)								
	e of Candidate (in full)								
	M. Stefanik								
	ess (number and street) Box 17	☐ Check if address changed		Candidate's FEC Identification Number H4NY21079					
(c) City,	State, and ZIP Code					3. Is This	New		Amended
Wills	sboro		NY	12996	3	Stateme	nt (N)	or ×	(A)
4. Party Aff	iliation	5. Office Sought			6. State & Dist	rict of Candida	te		
REPUB	BLICAN PARTY	House			NY	21			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7. I hereby	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)								
NOTE: T	his designation should be	filed with the appr	opriate office	isted in th	e instructions.				
(a) Name	e of Committee (in full)								
Eli	se for Congress								
	ess (number and street) Box 338								
FO	BOX 336								
(c) City,	State, and ZIP Code								
Wi	llsboro				NY	12996			
	DE	SIGNATION	OE OTHE	D ALIT	HODIZED	COMMITT	EES		
	DL				Representative		LLS		
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: T	his designation should be	filed with the princ	ipal campaign	committe	e.				
(a) Name	e of Committee (in full)								
` ,	nning Women								
	ining vvoilien								
(b) Addre	ess (number and street)								
(b) Addro 228	ess (number and street) S. Washington St								
(b) Addre 228 Ste.	ess (number and street) S. Washington St 115								
(b) Addro 228 Ste. (c) City,	ess (number and street) S. Washington St 115 State, and ZIP Code								
(b) Addro 228 Ste. (c) City,	ess (number and street) S. Washington St 115				VA	22314			
(b) Addro 228 Ste. (c) City,	ess (number and street) S. Washington St 115 State, and ZIP Code xandria	amined this Stater	nent and to th	e hest of r			rue correct and	d complete	
(b) Addro 228 Ste. (c) City, 3	ess (number and street) S. Washington St 115 State, and ZIP Code xandria I certify that I have example of the state of th	amined this Stater	nent and to the	e best of r		and belief it is tr	rue, correct and	1 complete.	
(b) Addro 228 Ste. (c) City, S Ale:	ess (number and street) S. Washington St 115 State, and ZIP Code xandria I certify that I have exact	amined this Stater	nent and to th	e best of r			rue, correct and	d complete.	
(b) Addro 228 Ste. (c) City, 3	ess (number and street) S. Washington St 115 State, and ZIP Code xandria I certify that I have exact	amined this Stater	nent and to th			and belief it is tr		d complete.	
(b) Addro 228 Ste. (c) City, S Ale: Signature of	ess (number and street) S. Washington St 115 State, and ZIP Code xandria I certify that I have exact			[Electi	ny knowledge a ronically Filed]	Date 10/02/2014	ı		437g.
(b) Addro 228 Ste. (c) City, S Ale: Signature of	ess (number and street) S. Washington St 115 State, and ZIP Code xandria I certify that I have exacted the corris			[Electi	ny knowledge a ronically Filed]	Date 10/02/2014	ı		437g.
(b) Addro 228 Ste. (c) City, S Ale: Signature of	ess (number and street) S. Washington St 115 State, and ZIP Code xandria I certify that I have exacted the corris			[Electi	ny knowledge a ronically Filed]	Date 10/02/2014	ı		437g.

FEC FORM 2 (REV. 02/2009)

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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DESIGNA	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, candidacy.	which is NOT my principal campaign committee, to receive and exper	nd funds on behalf of my
NOTE:This designation should be filed wit	h the principal campaign committee.	
(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	
DESIGNA	ATION OF OTHER AUTHORIZED COMMITTEE (Including Joint Fundraising Representatives)	S [ADDITIONAL]
I hereby authorize the following named committee, candidacy.	which is NOT my principal campaign committee, to receive and exper	nd funds on behalf of my
NOTE:This designation should be filed wit	h the principal campaign committee.	
(a) Name of Committee (in full)		
Young Guns Day III 2014		
(b) Address (number and street) 228 S. Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314	
DESIGNA	ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	S [ADDITIONAL]
I hereby authorize the following named committee, candidacy.	which is NOT my principal campaign committee, to receive and exper	nd funds on behalf of my
NOTE:This designation should be filed wit	h the principal campaign committee.	
(a) Name of Committee (in full)		_
Republicans Inspiring Su	ccess & Empowerment Project (RISE PR	ROJECT)
(b) Address (number and street) PO BOX 2485		
(c) City, State and ZIP Code		
Springfield	VA 22152	