Image# 14970759909 PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Elise M. Stefanik (b) Address (number and street) PO Box 17	☐ Check if address changed			Candidate's FEC Identification Number LIANN/24070					
_	(c) City, State, and ZIP Code					H4NY21079 3. Is This	ew Am	nended		
	Willsboro		N	1299	6	Statement (N	~			
4.	Party Affiliation	5. Office Soug	ht		6. State & Distr	rict of Candidate				
	REPUBLICAN PARTY	House			NY	21				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full) Elise for Congress									
	Elise for Congress									
	(b) Address (number and street) PO Box 338									
	(c) City, State, and ZIP Code									
	Willsboro				NY	12996				
(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 my candidacy.										
	NOTE: This designation should be f	ilea with the ph	псіраї сапіра	aigii cominiu	ee. 					
	(a) Name of Committee (in full) Winning Women									
	(b) Address (number and street) 228 S. Washington St									
	Ste. 115									
	(c) City, State, and ZIP Code									
	Alexandria				VA	22314				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Si	gnature of Candidate					Date		-		
Ja	umes E. Morris			[Elec	tronically Filed]	09/13/2014				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
				1]			

FEC FORM 2 (REV. 02/2009)

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 /
DESIGN	NATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee candidacy.	e, which is NOT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE:This designation should be filed	with the principal campaign committee.	
(a) Name of Committee (in full)		
NY Congressional Victor	ory Fund	
(b) Address (number and street) 228 S. Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314	
DESIG	NATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee candidacy.	ee, which is NOT my principal campaign committee, to receive and expend funds or	n behalf of my
NOTE: This designation should be filed	with the principal campaign committee.	
(a) Name of Committee (in full)		
Young Guns Day III 201	14	
(b) Address (number and street) 228 S. Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314	
DESIGI	NATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committe candidacy.	e, which is NOT my principal campaign committee, to receive and expend funds or	n behalf of my
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		