FEC FORM 1	ORGA	EMENT O		Offic	e use only
1. NAME OF COMMITTEE (in	full) (Check if is change		nple: If typying, type the lines	12FE4M5	
Ellen Simon f	or Congress				
ADDRESS (number and	street)	5			
(Check if addr is changed)	ess Sedona			AZ	└──└──└──└──└──└──└──└──└──└──└──└──└──
		CITY		STATE	ZIP CODE 🔺
COMMITTEE'S E-MA	L ADDRESS simonforcongress.com				
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
www.ellensin	onforcongress.com				
COMMITTEE'S FAX N	IUMBER				
2. DATE 0.5		Y			
3. FEC IDENTIFICA	TION NUMBER	C C00	423897		
4. IS THIS STATEN	IENT X NEW (N)	OR	AMENDED (A)	4	
Leartify that I have aver	ned this Statement and to the bes		heliefitie true correct on	d aamalata	
r certiny that thave exam			d dener it is true, correct an		
Type or Print Name of	Treasurer Gael Sur	nmer			
Signature of Treasure	Electronically Filed by G	ael Summer		Date 05	0 0 1 Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	se, erroneous, or incomplete infor ANY CHANGE IN II		e person signing this State		2 U.S.C. S437g.
Office Use Only			For further information c Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (0	Check One)			
	(a) X This comm	nittee is a principal campaign committee. (Complete the candidate information below.)			
	(-)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
	Name of Elle Candidate	en Simon			
	Candidate Party Affiliation	M Office X House Senate President	t District AZ		
	(c) This commi	ittee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name of Candidate				
(d) This committee is a (National, State (Democratic, Republican, etc.)					
(e) This committee is a separate segregated fund					
	(f) This committee.	ittee supports/opposes more than one Federal candidate, and is NOT a separate segreg	ated fund or party		
6.	Name of Any Connected	Organization or Affiliated Committee			
	Mailing Address				
		CITY STATE	ZIP CODE 🛦		
	Relationship				
	Type of Connected Organi	ization:			
	Corporation	Corporation w/o Capital Stock Labor Org	ganization		
	Membership Orga	anization Trade Association Cooperati	ve		

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Write or Type Con	nmittee Name			
Ellen Simo	n for Congress	3		
		tify by name, address, (phone number ooks and records.	optional), and position of th	ne person in
Full Name				
Mailing Addres	s _			
Title or Positior	- ▼	СІТҮ 🛦	STATE	ZIP CODE
			Telephone number	
3. Treasurer: L name and ac Full Name	ist the name ar ddress of any d	nd address (phone number optional) esignated agent (e.g., assistant treasu	of the treasurer of the commi rer).	ttee; and the
of Treasurer	Gael Sur	nmer		
Mailing Addres	s _	130 Pinon Dr.		
	-	Sedona	AZ	86336
Title or Positior	ו ∀	СІТҮ 🛦	STATE	
				ZIP CODE
	Treasurer		Telephone number	
Full Name of Designated Agent	Treasurer		Telephone number	
Designated			Telephone number	ZIP CODE A
Designated Agent			Telephone number	
Designated Agent	S		Telephone number	
Designated Agent Mailing Addres	S			

Name of Bank, Depository, etc.

9.

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Danka an Olkan Dan a itania a		
Banks or Other Depositories:	List all banks or other depositories in which the committee deposits funds, holds accounts, rents	
safety deposit boxes or maintains f	unds.	

	Wells Fargo	
Mailing Address	2201 W HWY 89A	
	Sedona AZ	86336 _
	CITY A STATE	△ ZIP CODE △