STATEMENT OF

07/15/2021 00 : 13 PAGE 1 / 4 =

FORM 1	RM 1 ORGANIZATION						Office Use Only											
1. NAME OF COMMITTEE (in	full)		(Check is chang			nple:If t the line		type		121	FE4	M5						
EFFECTIVE	LEAD	ERS	HIP E	NHAN	CING	CC	ΜN	1UN	JITI	ES	T)D	ΑY	- E	LE(CT	PA	C
ADDRESS (number ar	nd street)	PO BC	OX 61									1 1						
		CHES								СТ		(06410					
			CITY ▲							STA	TE 🛦				ZIP C	ODE	A	
COMMITTEE'S E-MA	address		ırns@ea	arthlink.ne	et													. 1
is changed	i)	Option	al Second	d E-Mail Ad	Idress													
COMMITTEE'S WEB (Check if a is changed	address	None	URL)															
2. DATE 07	7 14	D /	2021	Y														
3. FEC IDENTIFIC	CATION NU	MBER	>	C	00571430													
4. IS THIS STATEN	MENT X	NE	W (N)	OR		AM	IENDI	ED (A	.)									
I certify that I have e	examined thi	is Stater	ment and	to the best	t of my kr	nowled	ge and	d belie	ef it is	s true	, cor	rect a	and co	omple	te.			
Type or Print Name o	of Treasurer	Burns	, Whitney,	W, ,														
Signature of Treasure	er <i>Burns</i> ,	Whitney,	W, ,		<u>l</u>	Electroi	ically	Filed]	I	Date		м = м 07	/	15] ′ [)21	Y
NOTE: Submission of				information INFORMAT									he pe	nalties	s of 2	U.S.C	C. §43	37g.

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

FF0 =	4 (Davided 00/0000)	D 0
	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
_	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised 0	2/2009)		Page 3	
Write or Type Committee Name				
EFFECTIVE LEAD	ERSHIP ENHANCING	G COMMUNITIE	S TODAY - ELECT	PAC
6. Name of Any Connected O	rganization, Affiliated Committee,	Joint Fundraising Represer	ntative, or Leadership PAC Spor	nsor
NONE				
Mailing Address				
•				
	CITY	ST	ATE ZIP CODE	
Relationship: Connected	Organization Affiliated Committe	e Joint Fundraising Rep	resentative Leadership PAC	Sponsor
 Custodian of Records: Iden books and records. 	tify by name, address (phone numbe	er optional) and position o	f the person in possession of co	ommittee
Burns, Whi	tney, W, ,			
Full Name	PO Box 61			
Mailing Address				
			T , 06410 , ,	
	Cheshire		06410	
Title or Position	CITY	STA	TE ZIP CODE	
Treasurer		Telephone number	703 - 658 - 4	4356
8. Treasurer: List the name and any designated agent (e.g., a	l address (phone number optional) ssistant treasurer).	of the treasurer of the com	mittee; and the name and addre	ess of
Full Name Burns, Whi	tney, W, ,			
of Treasurer	PO Box 61			
Mailing Address				
	Cheshire		CT 06410 -	
Title or Position	CITY	STA		
Treasurer		Telephone number	703 - 658 - 4	4356

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Full Name of			
Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Telep	hone number	-
	ells Fargo		
Name of Bank, Deposi		CT O6	5410
We	ells Fargo 311 Highland Avenue	CT 06	6410 ZIP CODE
We	SIIs Fargo 311 Highland Avenue Cheshire CITY		
Mailing Address	SIIs Fargo 311 Highland Avenue Cheshire CITY		
Mailing Address Name of Bank, Deposi	SIIs Fargo 311 Highland Avenue Cheshire CITY		
Mailing Address Name of Bank, Deposi	SIIs Fargo 311 Highland Avenue Cheshire CITY		
Mailing Address	SIIs Fargo 311 Highland Avenue Cheshire CITY		