FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5
Vote Kurt Elsas	ser For Congress	
	,44 W Franklin Street	
ADDRESS (number and street)		
(Check if address is changed)	PO Box 2694	
	Hagerstown	MD   21741
		STATE A ZIP CODE A
COMMITTEE'S E-MAIL ADD	RESS	
(Check if address is changed)	Elsasser4congress@gmail.com	
ie enangee,	Optional Second E-Mail Address	
(Check if address is changed)	www.elsasser4congress.com	
2. DATE 01 /	D D / Y Y Y Y   31 2018	
3. FEC IDENTIFICATION	NUMBER ► C C00668103	
4. IS THIS STATEMENT	× NEW (N) OR AMENDED (A)	
I certify that I have examined	d this Statement and to the best of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treas	urer kendall, Jacqueline, nicole, ,	
Signature of Treasurer	ndall, Jacqueline, nicole, , [Electronically Filed]	Date 01 / 01 / 2018
NOTE: Submission of false, en	roneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	· · · · · · · · · · · · · · · · · · ·
Office Use Only	For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

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I	FEC Fo	orm 1 (Revised 02/2009)	Page <b>2</b>	
		COMMITTEE		
Can	ndidate	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. (Comple information below.)	te the candidate	
Nam Canc	e of didate	Elsasser, Kurt, Martin, , II		
	didate / Affiliati	ion REP Office Sought: House Senate President	State M District 0	4
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand	e of didate			
Part	ty Con	nmittee:		
(d)			emocratic, publican, etc.) Pa	rty.
Poli	tical A	Action Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	cted organization i	s a:
		Corporation Corporation w/o Capital Stock	abor Organizatior	ı
		Membership Organization Trade Association	Cooperative	
		In addition, this committee is a Lobbyist/Registrant PAC.		
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or pa	rty
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Join	t Func	draising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two c committees/organizations, none of which is an authorized committee of a federal candidate.	or more political	
	Com	mittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number		
	4.	FEC ID number		

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Write or Type Committee Name

## Vote Kurt Elsasser For Congress

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address							
	CITY	STATE	ZIP CODE				
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor							

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

kendall, J	icqueline, nicole, ,		
Full Name			
Mailing Address	44 w franklin street	_	
	po box 2694		
	hagerstown	MD 21741	
Title or Position	CITY	STATE	ZIP CODE
treasurer	Telepl	hone number	833 - 4598

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	kendall, Jacqueline, nicole, ,
Mailing Address	44 w franklin street
	po box 2694
	hagerstown     MD     21741
	CITY STATE ZIP CODE
Title or Position treasurer	443    833    4598

Full Name of Designated Agent	Elsasser, jodi, ann, ,											
Mailing Address	44 W franklin street											
	po box 2694											
	hagerstown					MD		21741		-	1 1	
		CITY				STATE			ZIP	CODE		

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

SECU			
Mailing Address	17239 cole road		
	Hagerstown	MD	21740
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE