Image# 20230131957	5633539
FEC	

01/31/2023 17 : 49

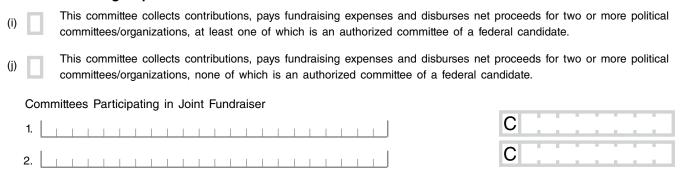
PAGE 1 / 10 🗕

STATEMENT OF
ORGANIZATION

FORM 1				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Eli Crane for Cor	ngress			
ADDRESS (number and street)	PO Box 1950			
(Check if address is changed)				
	Cortaro		AZ 85	5652
	CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	ISS			
 (Check if address is changed) 	llisker@hdafec.com			
	Optional Second E-Mail Ad	dress		1
		• • • • • • • • • • • •		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 01 3	D / Y Y Y Y 11 2023			
3. FEC IDENTIFICATION N	UMBER ► C c	00784934		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct an	id complete.
Type or Print Name of Treasure	er Lisker, Lisa, , ,			
Signature of Treasurer	r, Lisa, , ,	[Electronically Filed]	Date 01	/ D D / Y Y Y Y 31 2023
NOTE: Submission of false, erron		may subject the person signing t TION SHOULD BE REPORTED		e penalties of 52 U.S.C. §30109
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page 2
. TYPE OF COMMITTEE:	
Candidate 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. (Completinformation below.)	ete the candidate
Name of Crane, Eli, , , Candidate	
Candidate Office Sought: House Senate President	State AZ District 02
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	02
Name of Candidate	
(d) This committee is a or subordinate) committee of the Reput	ocratic, blican, etc.) Party
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its committee is a separate segregated fund.	nnected organization is a:
Corporation Corporation w/o Capital Stock	bor Organization
Membership Organization Trade Association Co	ooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segricommittee. (i.e., nonconnected committee)	regated 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hyb	rid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	

Joint Fundraising Representative:



FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
Eli Crane for Congress	

6.	Name of Any Connected O	-			mitte	e, J	loin	t F	unc	drai	sin	g R	epro	ese	enta	tive	e, o	or L	ead	ler	ship	PA	C	Spc	ons	or	
																								<u> </u>			
	Mailing Address	11972 GREY C	DAKS P		RD.																						
		GLEN ALLEN												L	VA			Ľ	230	59			-				
				СІТ	Y 🔺									S	TATI	=					ZII	P C	OD	Ε⊿	•		
	Relationship: Connected	Organization	Affilia	ated O	rgani	zatio	n	x	Jo	oint	Fur	ndra	ising	R	epre	eser	itati	ve			Lea	ders	hip	PA	.C 5	Зрог	າຣດ

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

Lisker, Lisa	,,,
Full Name	
Mailing Address	228 S. Washington St.
	Ste. 115
	Alexandria VA 22314
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 703 - 549 - 7705

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	Lisker, Lisa, , ,
of Treasurer	
Mailing Address	228 S. Washington St.
	Ste. 115
	Alexandria VA 22314
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Image:

FEC Form 1 (Revised 02	2/20	009)																		F	Page	e 4	1		
Full Name of Designated Agent																									1	
Mailing Address																										
																							L			
						CI	ΤY							:	ST/	λΤΕ				ZI	ΡC		ЭЕ			
Title or Position ▼																										
										Tele	əph	one	e n	umt	ber				- [_							

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.

McLean

	Truist/BB&T		
Mailing Address	1445 New York Ave., NW		
	Washington	DC 20005	
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, [
	Chain Bridge Bank, NA		
Mailing Address	1445-A Laughlin Ave.		

CITY **▲**

VA

STATE **▲**

22101

ZIP CODE 🔺

FFC	Form	1 S	(Revised	02/2017)
LO	1 01111	10	(Lieviseu	02/2017)

5(g) or (h).	Joint	Fundraising	Participant:

2. FEC ID number C		
3 FEC ID number C		
4 FEC ID number C		

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

Mailing Address	11972 GREY OAKS PARK RD.	
	GLEN ALLEN	VA 23059
Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
Connected	Organization Affiliated Committee	Joint Fundraising Representative

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																												
Mailing Address	L														1			1							1	1	I	
	Ĺ					1															L				-	- L		
TITLE OR POSITION	▼						0	CIT	Y								S	TAT	Ε				ZIP	C	OD	E		
													Te	lep	hor	ne	Nui	nbe	ər			 · L				- [

Name of Bank, Wells F Depository, etc.	argo Bank		
Mailing Address	8302 Woodmont Ave		
	Bethesda	MD	20814
	CITY 🔺	STATE A	ZIP CODE 🔺

FFC	Form	1 S	(Revised	02/2017)
I LO	1 01111	10	(LIEVISEU	02/2017)

5(g) or (h).	Joint	Fundraising	Participant:

1	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor CRUZ 25 FOR 22 VICTORY FUND

]
Mailing Address	P.O. BOX 341027		
	AUSTIN		78734
Relationship:		STATE A	ZIP CODE
Connected	Organization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																									
Mailing Address																									
	L																								
																		L					- [_		
TITLE OR POSITION	▼				С	IT	(🔺							S	TAT	E				ZIP	C	DD	E 🖌		
										Te	lep	hor	ne I	Nur	nbe	ər			 · L				- [_		

Name of Bank, Evolve Depository, etc.	Bank & Trust		
Mailing Address	301 Shoppingway Blvd		
	West Memphis		72301
	CITY A	STATE A	ZIP CODE 🔺

FEC	Form	1S	(Revised	02/2017)
			(11001000	02/2011/

5(g) or (h).	Joint	Fundraising	Participant:

1	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

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

Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
			22314
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected (Organization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																											
Mailing Address	L																										
	L								1	1																	
																									-		
TITLE OR POSITION	▼					C	ידוכ	Y								S	TAT	E				ZIP	C	DD	E 🔺	•	
												Te	lep	hor	ne	Nur	nbe	ər			· L				- [

Name of Bank, Depository, etc.																							
Mailing Address	L																						
	L																					<u> </u>	
	L																			. [
					С	ΊTΥ	^					S	AT	Ε			ZIP	C	OD	E 🔺	•		

FFC	Form	1S	(Revised	02/2017)
1 20	1 01111	10	(11001300	02/2017

5(g) or (h).	Joint	Fundraising	Participant:

2. FEC ID number	
3 FEC ID number C	
4 FEC ID number C	

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor CRANE FOR AZ-02

Mailing Address	PO BOX 30844			
	BETHESDA		MD 208	324
Relationship:	CITY 🔺		STATE A	ZIP CODE
Connected	Organization X Affiliated Committee	Joint Fundraisin	g Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																					
Mailing Address																					
TITLE OR POSITION	•			CII	ΓY ⊿						S	STA	ΤE				ZIP	СС	DDE		
								Tel	eph	ione	e Nu	ımb	er	L		 · L					

Name of Bank, Depository, etc.											1			1									
Mailing Address																							
	L																						
																L					· L		
					С	ITY	′▲					S	TAT	Έ			7	ZIP	C	ODI	Ξ 🔺	•	I

FEC	Form	15	(Revised	02/2017)	١
FEU	FOIIII	13	(neviseu	02/2017	1

5(g) o	r(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra epublican Nominee Fund 2022	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO Box 9891		
			· · · · · · · · · · · · · · · · · · ·	20040
				22219
	Relationship:	CITY Organization Affiliated Committee Joint	STATE ▲	ZIP CODE ▲ ative Leadership PAC Sponso
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION		⊥ L STATE ▲	
		I I I I I I I I I I I I Tel	ephone Number	

Name of Bank, Depository, etc.	<u> </u>																						
Mailing Address																							
																					. [
					С	ITY	′▲					S	TAT	Έ			7	ZIP	C	DD	E 🔺	•	1

FFC	Form	1S	(Revised	02/2017)
			(11001000	02/2017/

5(g) or (h).	Joint	Fundraising	Participant:

1	FEC ID number	
2.	FEC ID number C	
3.	FEC ID number C	
4	FEC ID number C	

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

Mailing Address	228 S Washington St				
	Suite 115				
	Alexandria			VA 223	14
Relationship:	Cl	TY 🔺		STATE 🔺	ZIP CODE
Connected C	Organization Affiliated	Committee X	Joint Fundraising	Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name			
Mailing Address			
TITLE OR POSITION		STATE A	ZIP CODE
	Te	ephone Number	

Name of Bank, Depository, etc.																							
Mailing Address	L																						
	L																						
																L					- [
					C	ITY	∕▲					S	TAT	E.				ZIP	C	OD	E	•	1