STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Elist for US Senate 3843 S Bristol St #604 ADDRESS (number and street) (Check if address is changed) Sana Ana 92704 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lysaray.campaignservices@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.elistforsenate.com (Check if address is changed) DATE 2022 C00805994 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Ray, Lysa,,, Type or Print Name of Treasurer Ray, Lysa,,, [Electronically Filed] 05 16 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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TYPE OF COMMITTEE	
Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate informati	on below)
(b) This committee is an authorized committee, and is NOT a principal campaign commitinformation below.)	
Name of Candidate Elist, Jon, , ,	
Candidate Party Affiliation REP Office Sought: House X Senate Pr	State CA resident
(c) This committee supports/opposes only one candidate, and is NOT an authorized com	District
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line	6.) Its connected organization is a
Corporation Corporation w/o Capital Stock	Labor Organization
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 scommittee. (i.e., nonconnected committee)	eparate segregated 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 Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proc committees/organizations, at least one of which is an authorized committee of a federal of	
(h) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.	
Committees Participating in Joint Fundraiser	
1.	
2. FEC ID number	
3. FEC ID number	
4	2

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Write or Type Committee Nam	ne	
Elist for US Ser	nate	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	lership PAC Sponsor
None		
		<u> </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in	possession of committee
Ray, Lysa	a, , ,	
Full Name	3843 S Bristol St STE 604	
Mailing Address		
	Santa Ana CA 9270)4
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	714	, 540 ₁ 2295
	Telephone number	
	nd address (phone number optional) of the treasurer of the committee; and the	
Treasurer: List the name an	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	
Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	
Treasurer: List the name an any designated agent (e.g., Full Name Ray, Lysa of Treasurer	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	
Treasurer: List the name an any designated agent (e.g., Full Name Ray, Lysa of Treasurer	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	e name and address of
Treasurer: List the name an any designated agent (e.g., Full Name Ray, Lysa of Treasurer	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer). a, , , 3843 S Bristol St STE 604	e name and address of

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Full Name of Designated Agent	None, , , ,	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Name of Bank,	Bank of America	<u> </u>
Name of Bank, Mailing Address	Bank of America	
	Bank of America	
	Bank of America 3730 S Bristol St	ZIP CODE
	Bank of America 3730 S Bristol St Santa Ana CA 92704 CITY STATE	ZIP CODE
Mailing Address	Bank of America 3730 S Bristol St Santa Ana CA 92704 CITY STATE	ZIP CODE
Mailing Address Name of Bank,	Bank of America 3730 S Bristol St Santa Ana CA 92704 CITY STATE Depository, etc.	ZIP CODE
Mailing Address	Bank of America 3730 S Bristol St Santa Ana CA 92704 CITY STATE Depository, etc.	ZIP CODE
Mailing Address Name of Bank,	Bank of America 3730 S Bristol St Santa Ana CA 92704 CITY STATE Depository, etc.	ZIP CODE
Mailing Address Name of Bank,	Bank of America 3730 S Bristol St Santa Ana CA 92704 CITY STATE Depository, etc.	ZIP CODE