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FEC FORM 2

STATEMENT OF CANDIDACY

	e of Candidate (n full)									
	Stefanik, Elise, M., , (b) Address (number and street)					2. Candida	2. Candidate's FEC Identification Number				
PO Box 500				50 0.1a.1g0a	H4NY21079						
	State, and ZIP C ns Falls	ode		NY	1280	1	3. Is This Staten			×	Amended (A)
Party Affi			5. Office Soug		1200	6. State & Dis) OK		(A)
REPUB	LICAN PARTY		House			NY	21				
		DE	SIGNATIO	N OF PR	NCIPAL	CAMPAIG	N COMM	ITTEE			
7. I hereby	designate the fo	llowing nan	ned political co	mmittee as m	y Principal (Campaign Com	mittee for the	2024 (year of elect	election)	on(s).	
NOTE: T	his designation	should be fi	led with the ap	propriate offic	ce listed in th	ne instructions.					
(a) Name	of Committee	in full)									
Eli	se for Con	gress									
(b) Addre	ess (number and	street)									
PO	Box 500										
(c) City, S	State, and ZIP C	ode									
Gle	ns Falls					NY	12801	I			
 I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. 											
	of Committee (INID								
	ISE VICT		טאנ								
	ess (number and 3OX 500	I street)									
	State, and ZIP C	ode									
GLE	ENS FALLS					NY	12801				
	I certify that	I have exa	mined this Stat	ement and to	the best of	my knowledge	and belief it is	s true, correct a	and compl	ete.	
Signature of Candidate					Date						
Stefanik, Elise, , ,				02/29/2024							
NOTE: Subr	mission of false,	erroneous,	or incomplete	information m	nay subject t	ne person signi	ing this Stater	ment to penalt	ies of 2 U.	S.C. §4	37g.

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Includina	Joint	Fundraising	Rep	resentative	es)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full) UPSTATE NEW YORK FIGHTERS							
	(b) Address (number and street)							
	P.O. BOX 500							
	(c) City, State, and ZIP Code		40004					
	GLENS FALLS	NY	12801					
8.		I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)							
	TEAM ELISE							
	(b) Address (number and street) PO BOX 500							
	(c) City, State, and ZIP Code							
	0. = 1.0 = 1.1 . 0	ND	12801					
	GLENS FALLS	NY	12001					
8.	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street)	ny principal campaigr	committee, to receive and expend funds	on behalf of my				
8.	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND	ny principal campaigr	committee, to receive and expend funds	on behalf of my				
8.	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street)	ny principal campaigr	committee, to receive and expend funds	on behalf of my				
8.	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500	ny principal campaigr	committee, to receive and expend funds	on behalf of my				
	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code	ny principal campaigr al campaign committ NY	committee, to receive and expend funds e. 12801 committee, to receive and expend funds					
	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code GLENS FALLS	ny principal campaigr al campaign committ NY	committee, to receive and expend funds e. 12801 committee, to receive and expend funds					
	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code GLENS FALLS I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip	ny principal campaigr al campaign committ NY	committee, to receive and expend funds e. 12801 committee, to receive and expend funds					
	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code GLENS FALLS I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full)	ny principal campaigr al campaign committ NY	committee, to receive and expend funds e. 12801 committee, to receive and expend funds					
	I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) HOUSE GOP BATTLEGROUND FUND (b) Address (number and street) PO BOX 500 (c) City, State, and ZIP Code GLENS FALLS I hereby authorize the following named committee, which is NOT m candidacy. NOTE: This designation should be filed with the princip (a) Name of Committee (in full) GROW THE MAJORITY NY	ny principal campaigr al campaign committ NY	committee, to receive and expend funds e. 12801 committee, to receive and expend funds					

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full) STEFANIK- ESPOSITO NY VICTORY							
	(b) Address (number and street)							
	P.O. BOX 500							
	(c) City, State, and ZIP Code	_						
	GLENS FALLS NY 12801							
	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	STEFANIK-MAZI NY VICTORY							
	(b) Address (number and street) 228 S WASHINGTON ST STE 115							
	(c) City, State, and ZIP Code							
	ALEXANDRIA VA 22314							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							