03/31/2023 17 : 14

STATE	MENT	OF
ORGA	NIZAT	ION

FEC FORM 1		STATEM ORGANI			Office Us	PAGE 1 / 4
1. NAME OF COMMITTEE (in t	full)	(Check if name is changed)	Example: If typing over the lines.	g, type 12	FE4M5	
	Amer					
ADDRESS (number and	street)	101 W ARGONNE DR				
(Check if ac		#24				
is changed)		SAINT LOUIS			0 63122	
		CITY A		STA		ZIP CODE▲
COMMITTEE'S E-MAI	L ADDRES	S				
 (Check if ac is changed) 	ldress					
is changed)		Optional Second E-Mail	Address			
COMMITTEE'S WEB F (Check if ac is changed)		PRESS (URL)				
2. DATE 03	/ D 31	2023				
3. FEC IDENTIFICA	ATION NU	MBER ► C	C00826362			
4. IS THIS STATEME		NEW (N) OR	× AMENE	DED (A)		
I certify that I have ex	amined thi	s Statement and to the b	est of my knowledge a	nd belief it is true	e, correct and comp	lete.
Type or Print Name of	Treasurer	RUTLAND, JANNA, , ,				
Signature of Treasurer	RUTLA	ND, JANNA, , ,	[Electronically	v Filed] Date	M M / D 03 31	D / Y Y Y Y 2023
NOTE: Submission of fa	llse, erroned	ous, or incomplete informat ANY CHANGE IN INFOF				ies of 52 U.S.C. §30109
Office Use Only						FORM 1 ised 06/2012)

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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. (Complete th information below.)	e candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
	District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee: (National, State or subordinate) committee of the (Democration of the or subordinate)	o, etc.) Party
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	-
	rganization
Membership Organization Trade Association Coopera	itive
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 segregate committee. (i.e., nonconnected committee)	d 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 (Hybrid PA	AC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser С 1. С 2.

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V	Vrite or Type Committee Name		
	Winning for Am	erica PAC	
6.	Name of Any Connected Of SCHMITT, ERIC, , ,	panization, Affiliated Committee, Joint Fundraising Repr	esentative, or Leadership PAC Sponsor
	Mailing Address	101 W ARGONNE DR, #24	
			MO 63122
		CITY A	STATE ▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising	g 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.

RUTLAND,	JANNA, , ,	
Full Name		
Mailing Address	101 W ARGONNE DR	
	#24	
	SAINT LOUIS MO 63122 - - -	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
	Image:	

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	RUTLAND, JANNA, , ,
of Treasurer	
Mailing Address	101 W ARGONNE DR
	#24
	SAINT LOUIS MO 63122 - - - - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
TREASURER	Telephone number

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Full Name of Designated Agent									
Mailing Address									
	CITY A STATE A	ZIP CODE ▲							
Title or Position ▼									
	Telephone number								

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.

		BRIDO	SE B	ANK	(
Mailing Address		1445-A	LAUGI		AVEI	NUE																		
			N												L \	/A 	L	221	01					
						CIT	Y 🔺							ę	STA	ΤE				ZI	Р (DE		
Name of Bank, I	Depository, e	etc.																						
Mailing Address																								
																	L							
		CITY ▲								S	STA	ΤE				ZI	ΡC	DE						