## STATEMENT OF

PAGE 1 / 5 =

FORM 1		0	RGAN	IIZA	ΓΙΟ	N						Of	fice III	oo Onl	h.			
NAME OF     COMMITTEE (ir	ı full)		Check if nams changed)	ie	-	le:If typ le lines.	ing, ty	ре	1:	2FE	4M5		ice Us	se Onl	<u>y</u>			_
Save Americ	a PAC		<u> </u>															
ADDRESS (number a	nd street)	407 W Je	efferson St												1 1			
(Check if a is changed																		
is changed	••	Boise	TY 🛦						L	D TATE	•	837	02-60		]-[	DDE 🛦		
COMMITTEE'S E-MA	AIL ADDRES	SS																
X ◀ (Check if a is changed		saveam	ericapac@gm	nail.com														
		Optional	Second E-Ma	ail Addres	ss 													
COMMITTEE'S WEB		RESS (UI	RL)															
(Check if a is changed																		
2. DATE 12		D / Y	y y y 2024															
3. FEC IDENTIFIC	CATION NU	MBER ▶		C004	61723													
4. IS THIS STATEN	MENT _	NEW	(N) O	R	×	AME	NDED	(A)										
I certify that I have e	examined thi	s Stateme	nt and to the	best of	my kno	wledge	and be	elief i	t is tr	ue, co	orrect	and	com	plete.				
Type or Print Name	of Treasurer	Risch, Ja	ason, , ,															
Signature of Treasure	er Risch,	Jason, , ,						_	Date	•	12		0	D D	/ Y	202		Y
NOTE: Submission of	false, errone		omplete inform										penal	lties o	f 52	U.S.C	. §30	109.
Office Use					Fe	or further deral Elector	ction Co	mmiss		t:				C Fo				 

Local 202-694-1100

	1 (Revised 03/2022) Page 2
TYPE O	DF COMMITTEE:
Candid	late 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 the candidate information below.)
Name Candid	
Candid Party /	date Office State Affiliation Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Nam Cand	ne of didate
Party C	Committee:
(d)	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party
Politica	al Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	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 segregated fund or party committee. (i.e., nonconnected committee)
	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 PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.
	Sundraining Denvergentatives
Joint F	Fundraising Representative:
Joint F	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

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	FEC Form 1 (Revised 0)	2/2009)			Page <b>3</b>
٧	rite or Type Committee Name Save America P	<b>^</b>			
6.		ganization, Affiliated Committee,	Joint Fundraising Repres	sentative, or Lead	dership PAC Sponsor
	Mailing Address	407 W Jefferson St			
		Boise		ID 837	02-6049
	_	CITY ▲		STATE A	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organizat	Joint Fundraising	Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number	r optional) and position of	the person in poss	ession of committee
	Risch, Jaso	n, , , , , , , , , , , , , , , , , , ,			
	Mailing Address				
		Boise		ID 837	02-6049
		CITY ▲	\$	STATE A	ZIP CODE ▲
	Title or Position ▼				
	Custodian of Records		Telephone numb	per	
8.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number option ssistant treasurer).	al) of the treasurer of the	committee; and the	e name and address of
	Full Name Risch, Jaso of Treasurer	n, , ,			
	Mailing Address	407 W Jefferson St			
		Boise		ID 837	02-6049
		CITY ▲	;	STATE A	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone numb	per	

FEC Form 1	(Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
Title of Position		
	Telephone number	
	<b>Depositories:</b> List all banks or other depositories in which the committee deposits xes or maintains funds.	funds, holds accounts, rents
Name of Bank, D	Depository, etc.	
	US BANK	
Mailing Address	101 S. Capitol Blvd	
	Suite 102	
	Boise	83702
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page	of <sup>5</sup>
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h). <b>Joint Fundraisi</b>	ng rantcipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected Risch, James, E, ,	I Organization, Affiliated Committee, Joint Fu	ndraising Representati	ve, or Leadership PAC Spon
Kiscii, James, E., ,			
Mailing Address	407 W Jefferson Street		
	Boise	, , , ,   ID	83702-6049
Relationship:	CITY A	STATE 4	✓ ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	oint Fundraising Represer	ntative X Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee		ntative X Leadership PAC Sp
esignated Agent: Identi			ntative X Leadership PAC Sp
esignated Agent: Identi			ntative X Leadership PAC Sp
esignated Agent: Identi			ntative X Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional		
esignated Agent: Identi	fy by name, address (phone number – optional		Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of the control of the	fy by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A