Only

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. Constitutional Rights PAC 1750 Tysons Boulevard ADDRESS (number and street) **Suite 1500** (Check if address is changed) McLean 22102 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS office@woodfinlaw-va.com (Check if address is changed) Optional Second E-Mail Address Iward@politicalmedia.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.ConstitutionalRightsPAC.com (Check if address is changed) DATE 25 2019 C00540229 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR 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. Woodfin, Christopher, , , Type or Print Name of Treasurer Woodfin, Christopher, , , [Electronically Filed] 05 2020 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

Local 202-694-1100

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 4go 2
Cano	didate	Committee:	
(a)	Ш	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. (Cominformation below.)	plete the candidate
Name Candi			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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	Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	
Constitutional Rights PAC	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraisin	ng Representative, or Leadership PAC Sponsor
NONE	
Mailing Address	
CITY	STATE ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundamental	draising Representative Leadership PAC Sponsor
. Custodian of Records: Identify by name, address (phone number optional) are books and records.	nd position of the person in possession of committee
Woodfin, Christopher, , ,	
Full Name1750 Tysons Boulevard	
Mailing Address Suite 1500	
McLean	VA 22102
Title or Position CITY	STATE ZIP CODE
Treasurer Telepho	one number 703 - 944 - 7015
 Treasurer: List the name and address (phone number optional) of the treasure any designated agent (e.g., assistant treasurer). 	er of the committee; and the name and address of
Full Name Woodfin, Christopher, , , of Treasurer	
Mailing Address 1750 Tysons Boulevard	
Suite 1500	
McLean	VA 22102
CITY Title or Position	STATE ZIP CODE
Treasurer Telepho	one number

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Full Name of Designated Agent	Woodfin, Christopher, , Mr.,	
Mailing Address	3300 Acorn Street	
	Suite 316	
	Williamsburg VA 231	88
	CITY STATE	ZIP CODE
Title or Position Legal Counsel		. 559 - 1505
		holds accounts, rents
Banks or Othe safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds, boxes or maintains funds.	
safety deposit b	poxes or maintains funds. Depository, etc.	
safety deposit b	poxes or maintains funds.	
safety deposit b	Depository, etc. Capital Bank 14001 Lee Jackson Memorial Hwy.	
safety deposit b Name of Bank,	Depository, etc. Capital Bank 14001 Lee Jackson Memorial Hwy.	
safety deposit b Name of Bank,	Depository, etc. Capital Bank 14001 Lee Jackson Memorial Hwy.	
safety deposit b Name of Bank,	Depository, etc. Capital Bank 14001 Lee Jackson Memorial Hwy.	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Capital Bank 14001 Lee Jackson Memorial Hwy. Chantilly VA 201:	51
safety deposit b Name of Bank, Mailing Address	Capital Bank 14001 Lee Jackson Memorial Hwy. Chantilly CITY STATE	51
safety deposit b Name of Bank, Mailing Address	Depository, etc. Capital Bank 14001 Lee Jackson Memorial Hwy. Chantilly CITY STATE Depository, etc.	51
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Capital Bank 14001 Lee Jackson Memorial Hwy. Chantilly CITY STATE Depository, etc.	51
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Capital Bank 14001 Lee Jackson Memorial Hwy. Chantilly CITY STATE Depository, etc.	51