

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

RIGHT FOR AMERICA

ADDRESS (number and street)

1390 CHAIN BRIDGE RD

STE 515

Check if different
than previously
reported. (ACC)

MCLEAN

VA

22101

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00867036

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

RIZZUTO, LEANDRO, , ,

Signature of Treasurer

RIZZUTO, LEANDRO, , ,

Date

M M /

D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

RIGHT FOR AMERICA

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2024

To:

MM / DD / YYYY
09 / 30 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	38440900.50	
(c) Total Receipts (from Line 19)	27826324.86	66437145.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	66267225.36	66437145.05
7. Total Disbursements (from Line 31)	22642571.10	22812490.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43624654.26	43624654.26
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

RIGHT FOR AMERICA

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2024

To:

M M / D D / Y Y Y Y
09 30 2024

I. Receipts

COLUMN A
Total This PeriodCOLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

26969552.08

63827093.05

(ii) Unitemized

1649.00

1874.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

26971201.08

63828967.05

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

50000.00

300000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

27021201.08

64128967.05

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

805123.78

2308178.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

27826324.86

66437145.05

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

27826324.86

66437145.05

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	215973.30	385892.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	215973.30	385892.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500000.00	500000.00
24. Independent Expenditures (use Schedule E)	21926597.80	21926597.80
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	22642571.10	22812490.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22642571.10	22812490.79

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	27021201.08	64128967.05
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27021201.08	64128967.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	215973.30	385892.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	215973.30	385892.99

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADDISON, MICHAEL, , ,

Mailing Address 27220 PRADO DEL SOL

City
CARMELState
CAZip Code
93923-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 23 / 2024

Transaction ID : SA11A.12508

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALIOTO, ANNETTE, R, ,

Mailing Address 1140 OXFORD ROAD

City
BURLIGAMEState
CAZip Code
94010-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 23 / 2024

Transaction ID : SA11A.12399

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDREESSEN, MARC, , ,

Mailing Address P.O. BOX 1707

City
LOS ALTOSState
CAZip Code
94023-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

A16Z

Occupation (for Individual)

CO FOUNDER AND GENERAL PARTN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 24 / 2024

Transaction ID : SA11A.12495

Amount of Each Receipt this Period

2500000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2503000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANWAR, SYED, JAVAID, ,

Mailing Address 2725 RACQUET CLUB DR.

City
MIDLANDState
TXZip Code
79705-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2024

Transaction ID : SA11A.12557

Amount of Each Receipt this Period

500000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ATTIAS, CECILIA, MARIA, ,

Mailing Address 605 PARK AVENUE

City
NEW YORKState
NYZip Code
10065-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2024

Transaction ID : SA11A.12417

Amount of Each Receipt this Period

200000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BALESTRERI, TED, , ,

Mailing Address 555 ABREGO STREET

City
MONTEREYState
CAZip Code
93940-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CANNERY ROW COMPANY

Occupation (for Individual)

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2024

Transaction ID : SA11A.12559

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

701000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BANCROFT, CHRISTOPHER, , ,

Mailing Address 1621 N ELM ST.

City
DENTONState
TXZip Code
76201-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 01 / 2024

Transaction ID : SA11A.12419

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BASTRIRE, BRET, , ,

Mailing Address 2437 SW COTTONWOOD CIRCLE

City
VISALIAState
CAZip Code
93277-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 19 / 2024

Transaction ID : SA11A.12412

Amount of Each Receipt this Period

6000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BASTRIRE, LINDA, , ,

Mailing Address 2437 SW COTTONWOOD CIRCLE

City
VISALIAState
CAZip Code
93277-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 19 / 2024

Transaction ID : SA11A.12489

Amount of Each Receipt this Period

6000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BECK, DOYLE, , ,

Mailing Address P.O. BOX 1768

City
IDAHO FALLSState
ID

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 09 / 2024

Transaction ID : SA11A.12442

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BERGESON, SUSAN, , ,

Mailing Address 5714 SUGARLOAF STREET

City
ANACORTESState
WAZip Code
98221-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12555

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BICHARA, ANTHONY, GHOSN, ,

Mailing Address 117 LEROY ST.

City
NEW YORKState
NYZip Code
10014-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SHOGUN, INC.

Occupation (for Individual)

EXECUTIVE CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 24 / 2024

Transaction ID : SA11A.12401

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

201000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLOOM, JAY, , ,

Mailing Address 4510 W HACIENDA AVE.

City
LAS VEGASState
NVZip Code
89118-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BLOOM FAMILY OFFICEOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 16 / 2024

Transaction ID : SA11A.12465

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BLOOM, JAY, , ,

Mailing Address 4510 W HACIENDA AVE.

City
LAS VEGASState
NVZip Code
89118-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BLOOM FAMILY OFFICEOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2024

Transaction ID : SA11A.12466

Amount of Each Receipt this Period

250000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOEHLKE, ROBERT, , ,

Mailing Address 8175 CARINA

City
CARMELState
CAZip Code
93923-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2024

Transaction ID : SA11A.12542

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

351000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOSZHARDT, ANDREW, K, ,

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary	☐ General
☐ Other (specify) ▼	

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2024

Transaction ID : SA11A.12397

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAFARO, JOHN, J, ,

Mailing Address 800 WARNER ROAD

City

HUBBARD

State

OH

Zip Code

44425-

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary	☐ General
☐ Other (specify) ▼	

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2024

Transaction ID : SA11A.12471

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAFARO, JOHN, JAVAID, ,

Mailing Address 6874 STRIMBU DRIVE

City

BROOKFIELD

State

OH

Zip Code

44403-

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary	☐ General
☐ Other (specify)	

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2024

Transaction ID : SA11A.12472

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARDINALLI, LAUREN, D, ,

Mailing Address 3006 OTTO DRIVE

City
STOCKTONState
CAZip Code
95209-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INDEPENDENT CONTRACTOROccupation (for Individual)
ACCOUNT EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2024

Transaction ID : SA11A.12483

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARDINALLI, LAUREN, D, ,

Mailing Address 3006 OTTO DRIVE

City
STOCKTONState
CAZip Code
95209-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INDEPENDENT CONTRACTOROccupation (for Individual)
ACCOUNT EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2024

Transaction ID : SA11A.12484

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12504

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 10 / 2024

Transaction ID : SA11A.12505

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 13 / 2024

Transaction ID : SA11A.12506

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 09 / 2024

Transaction ID : SA11A.12510

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2024

Transaction ID : SA11A.12511

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2024

Transaction ID : SA11A.12512

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2024

Transaction ID : SA11A.12513

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 19 / 2024

Transaction ID : SA11A.12514

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 21 / 2024

Transaction ID : SA11A.12515

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 23 / 2024

Transaction ID : SA11A.12516

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 26 / 2024

Transaction ID : SA11A.12517

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 28 / 2024

Transaction ID : SA11A.12518

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 30 / 2024

Transaction ID : SA11A.12519

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2024

Transaction ID : SA11A.12520

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2024

Transaction ID : SA11A.12521

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2024

Transaction ID : SA11A.12522

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2024

Transaction ID : SA11A.12523

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2024

Transaction ID : SA11A.12524

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2024

Transaction ID : SA11A.12525

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2024

Transaction ID : SA11A.12526

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2024

Transaction ID : SA11A.12527

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2024

Transaction ID : SA11A.12528

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2024

Transaction ID : SA11A.12529

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2024

Transaction ID : SA11A.12530

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2024

Transaction ID : SA11A.12531

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARILLI, MICHAEL, , ,

Mailing Address 714 RANCHITOS RD NW,

City
LOS RANCHOSState
NMZip Code
87114-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MATTER LABSOccupation (for Individual)
CRYPTOGRAPHY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2024

Transaction ID : SA11A.12532

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASH, CLAY, COLLIN, ,

Mailing Address 7717 MILWAUKEE AVE STE 500-402

City
LUBBOCKState
TXZip Code
79424-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2024

Transaction ID : SA11A.12420

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASSAN, DORIS, , ,

Mailing Address 5623 80TH AVE SE

City
MERCER ISLANDState
WAZip Code
98040-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
RETAIL-AUTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12441

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 109
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CATSIMATIDIS, JOHN, , ,

Mailing Address 817 FIFTH AVE.

City
NEW YORKState
NYZip Code
10065-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2024

Transaction ID : SA11A.12470

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAIKEN, BARRY G, , ,

Mailing Address 625 PARK AVE

City
NEW YORKState
NYZip Code
10065-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2024

Transaction ID : SA11A.12405

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAIKEN, GEOFFREY, , ,

Mailing Address 9623 SE 16TH ST.

City
BELLEVUEState
WAZip Code
98004-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2024

Transaction ID : SA11A.12452

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

265000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLELLA, SAMUEL, , ,

Mailing Address 650 MORNINGSID CIRCLE

City
LOS ALTOSState
CAZip Code
94022-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VERSANT VENTURESOccupation (for Individual)
VENTURE CAPITAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 29 / 2024

Transaction ID : SA11A.12547

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLELLA, TRICIA, , ,

Mailing Address 650 MORNINGSID CIRCLE

City
LOS ALTOSState
CAZip Code
94022-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 29 / 2024

Transaction ID : SA11A.12563

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLEMAN, WYCHE, T, , III

Mailing Address 1025 W POINTE LOOP

City
SHREVEPORTState
LAZip Code
71106-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 24 / 2024

Transaction ID : SA11A.12565

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONIGLIO, RUSS, , ,

Mailing Address 1181 S. ROGERS CIRCLE

City
BOCA RATONState
FLZip Code
33487-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2024

Transaction ID : SA11A.12546

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONRADS, RANDAL, G, ,

Mailing Address 14201 SE PETROVITSKY RD A3-382

City
RETONState
WAZip Code
98058-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12535

Amount of Each Receipt this Period

12500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONRADS, SHARON, , ,

Mailing Address 14201 SE PETROVITSKY RD A3-382

City
RETONState
WAZip Code
98058-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12549

Amount of Each Receipt this Period

12500.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CORKREAN, YVETTE, , ,

Mailing Address 2725 SUTTER STREET

City
SAN FRANCISCOState
CAZip Code
94115-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SPA RADIANCEOccupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 25 / 2024

Transaction ID : SA11A.12566

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ENSTROM, JAMES, E, ,

Mailing Address 1339 ROSCOMARE ROAD,

City
LOS ANGELESState
CAZip Code
90077-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12461

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ERNST, KATHERINE, , ,

Mailing Address 4500 VIEJO ROAD

City
CARMELState
CAZip Code
93923-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 26 / 2024

Transaction ID : SA11A.12475

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FALK, CARY, , ,

Mailing Address P.O. BOX 2521

City
REDMONDState
WAZip Code
98073-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12415

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FANOE, JAMES, , ,

Mailing Address 14451 CASTLE ROCK ROAD

City
SALINASState
CAZip Code
93908-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 25 / 2024

Transaction ID : SA11A.12460

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FIELDS, CLIVE, , ,

Mailing Address 2905 MID LANE UNIT A

City
HOUSTONState
TXZip Code
77027-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 26 / 2024

Transaction ID : SA11A.12422

Amount of Each Receipt this Period

400000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

430000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLAGLER, DENIS, A, ,

Mailing Address 4409 W. WALLACE AVE.

City
TAMPAState
FLZip Code
33611-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TAMPA PATIO FURNITUREOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2024

Transaction ID : SA11A.12438

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FONK, DALE, , ,

Mailing Address 16210 165TH PLACE NE

City

WOODINVILLE

State

WA

Zip Code

98072-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12423

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARSCHINA, KENNETH, M, ,

Mailing Address 1 GRAMERCY PARK W

City

NEW YORK

State

NY

Zip Code

10003-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2024

Transaction ID : SA11A.12478

Amount of Each Receipt this Period

200000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

202000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBBS, MICHAEL, , ,

Mailing Address 218 ALDER STREET

City
PACIFIC GROVEState
CAZip Code
93950-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 23 / 2024

Transaction ID : SA11A.12507

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOLDBERG, ARYEH, , ,

Mailing Address 2200 S. CANFIELD AVE.

City
LOS ANGELESState
CAZip Code
90034-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRUIN BIOMETRICS, LLCOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12404

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORDON, STEVE, M, ,

Mailing Address 21206 SNAG ISLAND DRIVE EAST

City
LAKE TAPPSState
WAZip Code
98391-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12552

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GROPPETTI, DON, , ,

Mailing Address 32595-G ROAD 132

City
VISALIAState
CAZip Code
93292-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHEL-DON, INCOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 27 / 2024

Transaction ID : SA11A.12440

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROPPETTI, SHELLY, , ,

Mailing Address 32595-G ROAD 132

City
VISALIAState
CAZip Code
93292-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 27 / 2024

Transaction ID : SA11A.12550

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROVE, MARY, , ,

Mailing Address 159 WILD HORSE VALLEY DRIVE

City
NOVATOState
CAZip Code
94947-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 25 / 2024

Transaction ID : SA11A.12500

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 30 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAGGLUND, ROBERT, , ,

Mailing Address 312 WEST GALENA STREET

City
GRANITE FALLSState
WAZip Code
98252-FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
OPTUMOccupation (for Individual)
DATA SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 02 / 2024**Transaction ID : SA11A.12541**

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYDEN, STEVEN, , ,

Mailing Address 2950 KILLMORE ROAD

City
ELLENSBURGState
WAZip Code
98926-FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2024**Transaction ID : SA11A.12553**

Amount of Each Receipt this Period

21000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAZELO, MARIA, L, ,

Mailing Address 730 SOUNDVIEW LANE

City
OAK HARBOURState
WAZip Code
98277-FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
ISLAND COUNTYOccupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024**Transaction ID : SA11A.12498**

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAZELO, TIM, , ,

Mailing Address 730 SOUNDVIEW LANE

City
OAK HARBOURState
WAZip Code
98277-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VALIANT INTOccupation (for Individual)
GOVERNMENT CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12560

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOFRICHTER, JAMES, , ,

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12459

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLODILOFF, MARTIE, , ,

Mailing Address 1120 FOREST AVENUE

City
PACIFIC GROVEState
CAZip Code
93950-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 27 / 2024

Transaction ID : SA11A.12499

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLTON, JAMES, , ,

Mailing Address 2701 N. ROCKY POINT DRIVE

City
TAMPAState
FLZip Code
33607-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HALL BOOTH SMITH, P.COccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12462

Amount of Each Receipt this Period

12500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOROWITZ, BENJAMIN, , ,

Mailing Address 7 FALCON VIEW COURT

City

LAS VEGAS

State

NV

Zip Code

89135-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A16ZOccupation (for Individual)
CO FOUNDER AND GENERAL PARTI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12407

Amount of Each Receipt this Period

2500000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUTCHINSON, SUSAN, , ,

Mailing Address 8479 NE WOODLAND COVE DR.

City

KIRKLAND

State

WA

Zip Code

98034-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12556

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►

2522500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KALLOP, ARTHUR, G, ,

Mailing Address 1570 NORTH OCEAN BOULEVARD

City
PALM BEACHState
FLZip Code
33480-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12403

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KARBOWSKI, MICHAEL, , ,

Mailing Address 2136 NW 98TH STREET

City
SEATTLEState
WAZip Code
98117-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12502

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KHORRAM, HOSSEIN, , ,

Mailing Address 2310 88TH AVENUE NE

City
CLYDEHILLState
WAZip Code
98004-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MILANO APARTMENT HOMES

Occupation (for Individual)

PROPERTY DEVELOPMENT & MANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12455

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, EDWARD, , ,

Mailing Address 81 AVENUE MARIA ROAD

City
MONTEREYState
CAZip Code
93940-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 26 / 2024

Transaction ID : SA11A.12446

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOCH, RICK, E, ,

Mailing Address 1900 W NICKERSON ST. STE 116-234

City
SEATTLEState
WAZip Code
96118-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ALL CITY FENCE COMPANY

Occupation (for Individual)

PRESIDENT-OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12537

Amount of Each Receipt this Period

1250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOCH, RICK, E, ,

Mailing Address 1900 W NICKERSON ST. STE 116-234

City
SEATTLEState
WAZip Code
96118-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ALL CITY FENCE COMPANY

Occupation (for Individual)

PRESIDENT-OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12538

Amount of Each Receipt this Period

1250.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KORBATOV, LISA, , ,

Mailing Address 624 N RODEO DR.

City
BEVERLY HILLState
CAZip Code
90210-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FISCH PROPERTIESOccupation (for Individual)
PRINCIPLE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2024

Transaction ID : SA11A.12491

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAMELAS, PETER, , ,

Mailing Address 65 SPOONBILL ROAD

City
LANTANAState
FLZip Code
33462-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LEGACY VENTURESOccupation (for Individual)
ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2024

Transaction ID : SA11A.12534

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LARKIN, DEBORAH, , ,

Mailing Address P.O. BOX 1538

City
PEBBLE BEACHState
CAZip Code
93933-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2024

Transaction ID : SA11A.12436

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEE, TIMOTHY, C, ,

Mailing Address 75 107TH AVE SE

City
BELLEVUEState
WAZip Code
98004-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REAL HOME NETWORKOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12561

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, EDWARD, , ,

Mailing Address 10100 EMPYREAN WAY #204

City
LOS ANGELESState
CAZip Code
90067-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
INVESTMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 05 / 2024

Transaction ID : SA11A.12445

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEYVA, LEO, , ,

Mailing Address 25 MAIN STREET

City
HACKENSACKState
NJZip Code
07601-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLE SCHOTZ P.COccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2024

Transaction ID : SA11A.12486

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 109
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LIE, GUNNAR, , ,

Mailing Address 3248 HUTS POINT ROAD

City
HUNTS POINTState
WAZip Code
98004-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 09 / 2024

Transaction ID : SA11A.12454

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOMANGINO, ANTHONY, , ,

Mailing Address 1620 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SOUTHERN WASTE SYSTEMS

Occupation (for Individual)

CHAIRMAN/FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7850000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 23 / 2024

Transaction ID : SA11A.12400

Amount of Each Receipt this Period

2500000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOMANGINO, ANTHONY, , ,

Mailing Address 1620 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SOUTHERN WASTE SYSTEMS

Occupation (for Individual)

CHAIRMAN/FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7850000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2024

Transaction ID : SA11A.12402

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3550000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOW, JOSEPH, A, ,

Mailing Address 5 STAR FARM ROAD

City
PURCHASEState
NYZip Code
10577-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2024

Transaction ID : SA11A.12474

Amount of Each Receipt this Period

75000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEANEY, LISA, , ,

Mailing Address 4335 BALSAM LN

City
JACKSONState
WYZip Code
83001-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 05 / 2024

Transaction ID : SA11A.12490

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, LORI, A, ,

Mailing Address 3950 LAUREL CANYON BLVD. UNIT 1969

City
STUDIO CITYState
CAZip Code
91614-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 12 / 2024

Transaction ID : SA11A.12492

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLS, BRENT, , ,

Mailing Address 5309 WISTERIA DR.

City
OKLAHOMA CITYState
OKZip Code
73142-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2024

Transaction ID : SA11A.12411

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLSTONE, DAVID, J, ,

Mailing Address P.O. BOX 4342

City
ASPENState
COZip Code
81612-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2024

Transaction ID : SA11A.12435

Amount of Each Receipt this Period

5000000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MITZNER, IRA, , ,

Mailing Address 1777 WALKER STREET SUITE 501

City
HOUSTONState
TXZip Code
77010-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RIDA DEVELOPMENT

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12457

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5125000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 109
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NAYDEN, DENIS, J, ,

Mailing Address ADMIRAL COVE, 131 QUAYSIDE DR.

City
JUPITERState
FLZip Code
33477-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2024

Transaction ID : SA11A.12437

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELSON, CHARLES, S, ,

Mailing Address 2925 WHITE PINE LANE

City
WILSONState
WYZip Code
83014-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2024

Transaction ID : SA11A.12418

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NITABACH, LYNDIA, , ,

Mailing Address 1100 S. FLAGLER DRIVE #1803

City
WEST PALM BEACHState
FLZip Code
33401-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2024

Transaction ID : SA11A.12493

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

201000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NITABACH, ROBERT, , ,

Mailing Address 1100 S. FLAGLER DRIVE #1803

City
WEST PALM BEACHState
FLZip Code
33401-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 02 / 2024

Transaction ID : SA11A.12539

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NYKREIM, MICHAEL, K, ,

Mailing Address 4968 126TH AVE SE

City
BELLEVUEState
WAZip Code
98006-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12509

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ORSBORN, BILL, , ,

Mailing Address 130 LEE LANE

City
MOUNT VERNONState
WAZip Code
98274-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GATEWAY AUTOMOTIVEOccupation (for Individual)
CONSOLIDATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2024

Transaction ID : SA11A.12409

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ORY, LINDA, , ,

Mailing Address 131 HICKORY CREEK DRIVE

City
BRANDONState
FLZip Code
33511-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CYPREXX SERVICES, LLCOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 16 / 2024

Transaction ID : SA11A.12488

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORY, RONNIE, , ,

Mailing Address 131 HICKORY CREEK DRIVE

City
BRANDONState
FLZip Code
33511-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CYPREXX SERVICES, LLCOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 16 / 2024

Transaction ID : SA11A.12545

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PAGON, GARRET, D, ,

Mailing Address 15707 146TH AVE SE

City
SNOHOMISHState
WAZip Code
98290-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 26 / 2024

Transaction ID : SA11A.12451

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAGON, ROBERTA, A, ,

Mailing Address 15707 146TH AVE SE

City
SNOHOMISHState
WAZip Code
98290-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
MEDICAL EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 26 / 2024

Transaction ID : SA11A.12543

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERLMUTTER, ISAAC (IKE), , ,

Mailing Address P.O. BOX 1028

City
LAKE WORTHState
FLZip Code
33460-1028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12551540.97

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 27 / 2024

Transaction ID : SA11A.12458

Amount of Each Receipt this Period

2450000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERLMUTTER, LAURA, , ,

Mailing Address P.O. BOX 1028

City
LAKE WORTHState
FLZip Code
33260-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE LAURA & ISAAC PERLMUTTER FOUNDATIOOccupation (for Individual)
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

12450000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 27 / 2024

Transaction ID : SA11A.12482

Amount of Each Receipt this Period

2450000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4901000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAMIREZ, DAVID, , ,

Mailing Address 467 PALISADE DRIVE

City
MARINAState
CAZip Code
93933-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2024

Transaction ID : SA11A.12433

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REDDY, SUDHAKAR, , ,

Mailing Address 3732 VIA LA SELVA

City

PALOS VERDES ESTAT

State

CA

Zip Code

90274-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HRCP MANAGEMENT, LLC

Occupation (for Individual)

REAL ESTATE INVESTMENT MANAG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 23 / 2024

Transaction ID : SA11A.12554

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REEDE, BELLE, , ,

Mailing Address 6040 CAMINO DE LA COSTA

City

LAJOLLE

State

CA

Zip Code

92037-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2024

Transaction ID : SA11A.12406

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REEDE, PAUL, , ,

Mailing Address 6040 CAMINO DE LA COSTA

City
LAJOLLEState
CAZip Code
92037-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2024

Transaction ID : SA11A.12533

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICH, JOHN, , ,

Mailing Address 500 AUSTRALIAN AVENUE

City
PALM BEACHState
FLZip Code
33480-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2024

Transaction ID : SA11A.12469

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERTS, ANITA, , ,

Mailing Address 78120 SAN TIMOTEO ST.

City
LA QUINTAState
CAZip Code
92253-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MSI

Occupation (for Individual)

ACHITECTURAL REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12398

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBERTS, LENORE, LAWSON, ,

Mailing Address 78120 SAN TIMOTEO ST.

City
LA QUINTAState
CAZip Code
92253-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12485

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWAN, MARC, , ,

Mailing Address 65 EAST 55TH STREET

City
NEW YORKState
NYZip Code
10022-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
APOLLO MANAMGEMENTOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2024

Transaction ID : SA11A.12496

Amount of Each Receipt this Period

1000000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAVAGE, FRANK, G, ,

Mailing Address 5356 SUGAR HILL DRIVE

City
HOUSTONState
TXZip Code
77056-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2024

Transaction ID : SA11A.12449

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1005500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCARPA, JOHN, , ,

Mailing Address 3122 FIRE ROAD SUITE 200

City
EGG HARBOR TOWNSHIState
NJZip Code
08234-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 12 / 2024

Transaction ID : SA11A.12468

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHULTZ, MICHAEL, N, ,

Mailing Address 4904 W 5850 S

City
HOOPERState
UTZip Code
84315-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 24 / 2024

Transaction ID : SA11A.12503

Amount of Each Receipt this Period

250000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIGL, KELLY, , ,

Mailing Address 236 CRYSTAL CITY CREEK

City
BUDAState
TXZip Code
78610-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TX UTILITY GROUPOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12476

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

301000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIROTA, MICHAEL, D, ,

Mailing Address 100 WORTH AVENUE PH-5

City
PALM BEACHState
FLZip Code
33480-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLE SCHOTZ P.C.Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11A.12501

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNOW, CARY, , ,

Mailing Address 8120 E MARINGO DR.

City
SPOKANEState
WAZip Code
99212-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
ENTREPRENEUR /DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12416

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNDQUIST, LARRY, , ,

Mailing Address P.O. BOX 14790

City
MILL CREEKState
WAZip Code
98082-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ADAMANT HOMES INC.Occupation (for Individual)
HOME BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12481

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRINH, LYNN, , ,

Mailing Address 4023 173RD CT NE

City
REDMONDState
WAZip Code
98052-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CANDIDATEOccupation (for Individual)
CANDIDATE FOR LD48 STATE LEGIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12494

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRUE, JANET, D, ,

Mailing Address 230 36TH AVE EAST

City
SEATTLEState
WAZip Code
98112-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12464

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLACE, ROBERT, C, ,

Mailing Address P.O. BOX 4184

City
BELLEVUEState
WAZip Code
96009-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALLACE PROPERTIES, INC.Occupation (for Individual)
REAL ESTATE INVESTMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12540

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATERFIELD, RICHARD, R, ,

Mailing Address 1 PARK PLAZA

City
IRVINEState
CAZip Code
92614-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2024

Transaction ID : SA11A.12536

Amount of Each Receipt this Period

20000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINKLEVOSS, CAROL, , ,

Mailing Address 30 WEST 24TH STREET 4TH FL

City
NEW YORKState
NYZip Code
10010-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 09 / 2024

Transaction ID : SA11A.12414

Amount of Each Receipt this Period

12500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINKLEVOSS, HOWARD, E, , JR.

Mailing Address 30 WEST 24TH STREET 4TH FL

City
NEW YORKState
NYZip Code
10010-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 09 / 2024

Transaction ID : SA11A.12456

Amount of Each Receipt this Period

12500.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 51 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WISE, ERASMIA, , ,

Mailing Address 240 EL RIO DRIVE

City
YAKIMAState
WAZip Code
98908-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12447

Amount of Each Receipt this Period

240.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOOSLEY, TIMOTHY (TJ), , ,

Mailing Address 3015 124TH AVE, NE

City
BELLEVUEState
WAZip Code
98005-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAL WOOSLEY PROPERTIES, INC.Occupation (for Individual)
CO-OWNER REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12562

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZELLMER, L.GENE, , ,

Mailing Address POB 221174

City
CARMELState
CAZip Code
93923-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2024

Transaction ID : SA11A.12480

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2240.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZIMMERMAN, STEPHEN, , ,

Mailing Address 3617 W PLATT ST

City
TAMPAState
FLZip Code
33609-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12551

Amount of Each Receipt this Period

3250.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADVOCATE FOR AMERICA

Mailing Address 1390 CHAIN BRIDGE ROAD STE 515

City
MCLEANState
VAZip Code
22101-3904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1867062.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2024

Transaction ID : SA11A.12574

Amount of Each Receipt this Period

1567062.08

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ADVOCATE FOR AMERICA

Mailing Address 1390 CHAIN BRIDGE ROAD STE 515

City
MCLEANState
VAZip Code
22101-3904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1867062.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2024

Transaction ID : SA11A.12575

Amount of Each Receipt this Period

300000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1870312.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BESTBET HOLDINGS, INC.

Mailing Address 201 MONUMENT ROAD

City
JACKSONVILLEState
FLZip Code
32225-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary	☐ General
☐ Other (specify) ▼	

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 11 / 2024

Transaction ID : SA11C.12567

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BIG BOX SALES & MARKETING INC

Mailing Address P.O. BOX 849

City
MEDINAState
WAZip Code
98039-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary	☐ General
☐ Other (specify) ▼	

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12408

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLACKSTORM LLC

Mailing Address 5940 S RAINBOW BLVD STE 400

City
LAS VEGASState
NMZip Code
89118-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary	☐ General
☐ Other (specify)	

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 24 / 2024

Transaction ID : SA11A.12573

Amount of Each Receipt this Period

500000.00

☐ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION REQUESTED

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

530000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLIFTON, EZELL & CLIFTON / GOLF DESIGN GROUP, LLC

Mailing Address 1304 ERROR PARKWAY

City
APOKAState
FLZip Code
32712-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12570

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DELRAY VILLAGE SHOPPES, INC.

Mailing Address 1000 MARKET ST. BLD 1 STE 300

City
PORTSMOUTHState
NHZip Code
03801-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11C.12569

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEO ACQUISITION II INC.

Mailing Address 4955 TECHNOLOGY WAY

City
BOCA RATONState
FLZip Code
33431-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11C.12568

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

355000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KEMPER HOLDINGS LLC

Mailing Address 575 BELLEVUE SQUARE

City
BELLEVUEState
WAZip Code
98004-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11A.12477

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RTT INVESTMENTS LLC

Mailing Address 9138 BLUFFTON ROAD

City
FORT WAYNEState
INZip Code
46809-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2024

Transaction ID : SA11A.12572

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TECTONIC INVESTMENTS

Mailing Address 4405 BELCLAIRE AVE

City
DALLASState
TXZip Code
75205-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2024

Transaction ID : SA11C.12558

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 56 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THE DE MOYA GROUP, INC.

Mailing Address 14600 SW 136TH STREET

City
MIAMIState
FLZip Code
33186-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 07 / 2024

Transaction ID : SA11C.12571

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50000.00

26969552.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 109
(check only one)

☐ 11a	☐ 11b	☒ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BUILDING A BETTER FLORIDA

Mailing Address 610 S. BOULEVARD

City
TAMPAState
FLZip Code
33606-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 22 / 2024

Transaction ID : SA11C.12413

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50000.00

50000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 58 OF 109
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☒ 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5416.19

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2024

Transaction ID : SA17.02

Amount of Each Receipt this Period

8040.29

☐ Memo Item

INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORGAN STANELY

Mailing Address 55 EAST 52ND ST 15TH FL

City
NEW YORKState
NYZip Code
10055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800117.53

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2024

Transaction ID : SA17.01

Amount of Each Receipt this Period

800083.49

☐ Memo Item

INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

805123.78

805123.78

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. GOR, SERGIO, , ,

Mailing Address 1390 CHAIN BRIDGE RD STE 515

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

REIMBURSEMENT: FOOD/BEVERAGES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	7			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.013**

Amount of Each Disbursement this Period

6130.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SWEETING, ALEXIS, , ,

Mailing Address 6055 NW 105TH CT APT. 503

City
DORALState
FLZip Code
33178

Purpose of Disbursement

FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.078**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WOOD, TIM, , ,

Mailing Address 12195 CAROLA DR

City
CARMEL VALLEYState
CAZip Code
93924

Purpose of Disbursement

CATERING/FOOD/BEVERAGES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.061**

Amount of Each Disbursement this Period

9047.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

19177.74

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. BLACKLANE

Mailing Address 6000 NORTH TERMINAL PKWY

City
ATLANTAState
GAZip Code
30320

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.042**

Amount of Each Disbursement this Period

196.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL TREASURY ASSOCIATES LLC

Mailing Address 7500 W HIGHWAY 71 STE 101

City
AUSTINState
TXZip Code
78735

Purpose of Disbursement

COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.033**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL TREASURY ASSOCIATES LLC

Mailing Address 7500 W HIGHWAY 71 STE 101

City
AUSTINState
TXZip Code
78735

Purpose of Disbursement

COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.070**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6196.82

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CAPITOL TREASURY ASSOCIATES LLC

Mailing Address 7500 W HIGHWAY 71 STE 101

City
AUSTINState
TXZip Code
78735Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0		2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.110**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9		2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.005**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	7		2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.012**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3050.00

TOTAL This Period (last page this line number only)..... ►

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

RIGHT FOR AMERICA

Category/
Type

District:

C

25.00

 Memo Item

M M / D D / Y Y Y Y
07 24 2024

Category/
Type

District:

C

25.00

 Memo Item

07 / 30 / 2024

Category/
Type

District:

C

25.00

 Memo Item

75.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.030

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.031

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.034

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.035**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.071**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.072**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			0	4		2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.075**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			0	4		2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.076**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CURB NYC TAXI

Mailing Address 1111 34TH

City
LONG ISLAND CITYState
NYZip Code
11106

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			2	7		2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.105**

Amount of Each Disbursement this Period

29.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.04

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CURB NYC TAXI

Mailing Address 1111 34TH

City
LONG ISLAND CITYState
NYZip Code
11106

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			2	7			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.106**

Amount of Each Disbursement this Period

22.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CURB NYC TAXI

Mailing Address 1111 34TH

City
LONG ISLAND CITYState
NYZip Code
11106

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.111**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CURB NYC TAXI

Mailing Address 1111 34TH

City
LONG ISLAND CITYState
NYZip Code
11106

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.112**

Amount of Each Disbursement this Period

23.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

80.70

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

RIGHT FOR AMERICA

Category/
Type

16.32

Memo Item

Category/
Type

248.47

Memo Item

Category/
Type

44.99

Memo Item

309.78

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DELTA

Mailing Address 1030 DELTA BLVD DEPT 982

City
ATLANTAState
GAZip Code
30354

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.006**

Amount of Each Disbursement this Period

432.97

☐

Memo Item

Full Name (Last, First, Middle Initial)

B. DELTA

Mailing Address 1030 DELTA BLVD DEPT 982

City
ATLANTAState
GAZip Code
30354

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.007**

Amount of Each Disbursement this Period

352.98

☐

Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA

Mailing Address 1030 DELTA BLVD DEPT 982

City
ATLANTAState
GAZip Code
30354

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.022**

Amount of Each Disbursement this Period

758.98

☐

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

1544.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DELTA

Mailing Address 1030 DELTA BLVD DEPT 982

City
ATLANTAState
GAZip Code
30354

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.094**

Amount of Each Disbursement this Period

251.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EXPEDIA

Mailing Address 1111 W EXPEDIA GROUP WAY

City
SEATTLEState
WAZip Code
98119

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.089**

Amount of Each Disbursement this Period

1358.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EXPEDIA

Mailing Address 1111 W EXPEDIA GROUP WAY

City
SEATTLEState
WAZip Code
98119

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.090**

Amount of Each Disbursement this Period

653.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2263.32

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA

Mailing Address 1111 W EXPEDIA GROUP WAY

City
SEATTLEState
WAZip Code
98119

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.091**

Amount of Each Disbursement this Period

630.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EXPEDIA

Mailing Address 1111 W EXPEDIA GROUP WAY

City
SEATTLEState
WAZip Code
98119

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.107**

Amount of Each Disbursement this Period

346.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.001**

Amount of Each Disbursement this Period

50.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1027.69

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.004**

Amount of Each Disbursement this Period

50.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.009**

Amount of Each Disbursement this Period

50.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.010**

Amount of Each Disbursement this Period

50.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

152.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	9			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.026**

Amount of Each Disbursement this Period

50.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.036**

Amount of Each Disbursement this Period

50.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	2			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.039**

Amount of Each Disbursement this Period

50.56

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.12

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

RIGHT FOR AMERICA

Category/
Type

C

50.56

Memo Item

District:

Category/
Type

C

76.05

Memo Item

District:

Category/
Type

C

50.46

Memo Item

District:

177.07

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.053**

Amount of Each Disbursement this Period

47.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	6			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.057**

Amount of Each Disbursement this Period

50.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.064**

Amount of Each Disbursement this Period

50.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

147.98

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.084**

Amount of Each Disbursement this Period

50.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120

Purpose of Disbursement

SHIPPING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.114**

Amount of Each Disbursement this Period

50.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address LBJ FREEWAY STE 500

City
DALLASState
TXZip Code
75240

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.095**

Amount of Each Disbursement this Period

377.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

477.73

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. INSURANCE FIRST INC

Mailing Address 3530 WORTHINGTON BLVD UNIT 101

City
URBANAState
MDZip Code
21704

Purpose of Disbursement

INSURANCE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.008**

Amount of Each Disbursement this Period

44211.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INSURANCE FIRST INC

Mailing Address 3530 WORTHINGTON BLVD UNIT 101

City
URBANAState
MDZip Code
21704

Purpose of Disbursement

INSURANCE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.085**

Amount of Each Disbursement this Period

84198.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043

Purpose of Disbursement

SOFTWARE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.019**

Amount of Each Disbursement this Period

60.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

128469.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.065**

Amount of Each Disbursement this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.096**

Amount of Each Disbursement this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JETBLUE

Mailing Address 27-01 QUEENS PLAZA N

City
LONG ISLAND CITYState
NYZip Code
11101Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.023**

Amount of Each Disbursement this Period

103.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

223.10

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JETBLUE

Mailing Address 27-01 QUEENS PLAZA N

City
LONG ISLAND CITYState
NYZip Code
11101

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.092**

Amount of Each Disbursement this Period

168.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JETBLUE

Mailing Address 27-01 QUEENS PLAZA N

City
LONG ISLAND CITYState
NYZip Code
11101

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.097**

Amount of Each Disbursement this Period

218.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JETBLUE

Mailing Address 27-01 QUEENS PLAZA N

City
LONG ISLAND CITYState
NYZip Code
11101

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.098**

Amount of Each Disbursement this Period

218.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

604.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JETBLUE

Mailing Address 27-01 QUEENS PLAZA N

City
LONG ISLAND CITYState
NYZip Code
11101

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.099**

Amount of Each Disbursement this Period

183.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JETBLUE

Mailing Address 27-01 QUEENS PLAZA N

City
LONG ISLAND CITYState
NYZip Code
11101

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.100**

Amount of Each Disbursement this Period

183.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JETBLUE

Mailing Address 27-01 QUEENS PLAZA N

City
LONG ISLAND CITYState
NYZip Code
11101

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.101**

Amount of Each Disbursement this Period

31.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

397.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JETBLUE

Mailing Address 27-01 QUEENS PLAZA N

City
LONG ISLAND CITYState
NYZip Code
11101

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.102**

Amount of Each Disbursement this Period

29.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MO'S A PLACE FOR STEAKS

Mailing Address 720 N PLANKINTON AVE

City
MILWAUKEEState
WIZip Code
53203

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.011**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MO'S A PLACE FOR STEAKS

Mailing Address 720 N PLANKINTON AVE

City
MILWAUKEEState
WIZip Code
53203

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.015**

Amount of Each Disbursement this Period

6070.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6599.02

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	7			2	2		2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.017**

Amount of Each Disbursement this Period

2250.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	7			2	6		2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.024**

Amount of Each Disbursement this Period

206.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	7			3	0		2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.028**

Amount of Each Disbursement this Period

1045.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3502.30

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.029**

Amount of Each Disbursement this Period

960.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.032**

Amount of Each Disbursement this Period

40.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.037**

Amount of Each Disbursement this Period

822.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	8	2	3	.	6	0							
---	---	---	---	---	---	---	--	--	--	--	--	--	--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	2			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.040**

Amount of Each Disbursement this Period

960.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.044**

Amount of Each Disbursement this Period

1045.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	8			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.051**

Amount of Each Disbursement this Period

540.90

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2547.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.054

Amount of Each Disbursement this Period

400.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	3			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.055

Amount of Each Disbursement this Period

4.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	5			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.056

Amount of Each Disbursement this Period

400.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

804.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204Purpose of Disbursement
CREDIT CARD MERCHANT FEES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	6			2	0	2	4		

FEC Identification Number

C Transaction ID : SB21B.058

Amount of Each Disbursement this Period

811.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204Purpose of Disbursement
CREDIT CARD MERCHANT FEES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	9			2	0	2	4		

FEC Identification Number

C Transaction ID : SB21B.059

Amount of Each Disbursement this Period

400.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204Purpose of Disbursement
CREDIT CARD MERCHANT FEES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	2	4		

FEC Identification Number

C Transaction ID : SB21B.060

Amount of Each Disbursement this Period

400.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	6	1	1	.	7	6							
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	2		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.062

Amount of Each Disbursement this Period

401.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	7		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.067

Amount of Each Disbursement this Period

400.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.068

Amount of Each Disbursement this Period

1900.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2702.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.069

Amount of Each Disbursement this Period

400.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.074

Amount of Each Disbursement this Period

400.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.077

Amount of Each Disbursement this Period

1.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

802.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.079**

Amount of Each Disbursement this Period

806.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.080**

Amount of Each Disbursement this Period

0.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.081**

Amount of Each Disbursement this Period

400.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1207.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	1			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.082

Amount of Each Disbursement this Period

402.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.083

Amount of Each Disbursement this Period

400.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.086

Amount of Each Disbursement this Period

401.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1203.90

TOTAL This Period (last page this line number only)..... ►

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

RIGHT FOR AMERICA

District:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204Purpose of Disbursement
CREDIT CARD MERCHANT FEES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.108

Amount of Each Disbursement this Period

4.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PIRYX LLC

Mailing Address 2626 COLE AVE STE 300

City
DALLASState
TXZip Code
75204Purpose of Disbursement
CREDIT CARD MERCHANT FEES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.115

Amount of Each Disbursement this Period

400.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHOPIFY

Mailing Address 151 O'CONNOR ST GROUND FLOOR

City
OTTAWA, ON K2P 2L8, CANADA

State

Zip Code

Purpose of Disbursement
SUBSCRIPTION SERVICE
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.025

Amount of Each Disbursement this Period

39.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

443.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SHOPIFY

Mailing Address 151 O'CONNOR ST GROUND FLOOR

City
OTTAWA, ON K2P 2L8, CANADA

State

Zip Code

Purpose of Disbursement
SUBSCRIPTION SERVICE

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.066**

Amount of Each Disbursement this Period

39.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHOPIFY

Mailing Address 151 O'CONNOR ST GROUND FLOOR

City
OTTAWA, ON K2P 2L8, CANADA

State

Zip Code

Purpose of Disbursement
SUBSCRIPTION SERVICE

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.093**

Amount of Each Disbursement this Period

868.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SILVER TAXI SERVICE

Mailing Address 1720 ORANGE TREE DR

City
EDGEWATERState
FLZip Code
32132Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.020**

Amount of Each Disbursement this Period

78.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

985.88

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SILVER TAXI SERVICE

Mailing Address 1720 ORANGE TREE DR

City
EDGEWATERState
FLZip Code
32132

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.021**

Amount of Each Disbursement this Period

8.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SILVER TAXI SERVICE

Mailing Address 1720 ORANGE TREE DR

City
EDGEWATERState
FLZip Code
32132

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.045**

Amount of Each Disbursement this Period

141.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE PENINSULA

Mailing Address 700 5TH AVE

City
NEW YORKState
NYZip Code
10019

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	2			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.041**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

649.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. THE PENINSULA

Mailing Address 700 5TH AVE

City
NEW YORKState
NYZip Code
10019

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.046**

Amount of Each Disbursement this Period

1383.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE PENINSULA

Mailing Address 700 5TH AVE

City
NEW YORKState
NYZip Code
10019

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.047**

Amount of Each Disbursement this Period

788.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE PENINSULA

Mailing Address 700 5TH AVE

City
NEW YORKState
NYZip Code
10019

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.048**

Amount of Each Disbursement this Period

35.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2207.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. THE PENINSULA

Mailing Address 700 5TH AVE

City
NEW YORKState
NYZip Code
10019

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.049**

Amount of Each Disbursement this Period

16.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE PENINSULA

Mailing Address 700 5TH AVE

City
NEW YORKState
NYZip Code
10019

Purpose of Disbursement

TRAVEL/FOOD/BEVERAGES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	2			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.063**

Amount of Each Disbursement this Period

5273.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE PLAZA HOTEL

Mailing Address 5TH AVE

City
NEW YORKState
NYZip Code
10118

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.116**

Amount of Each Disbursement this Period

85.01

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5374.72

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TRUMP TOWER BAR

Mailing Address 725 5TH AVE

City
NEW YORKState
NYZip Code
10022

Purpose of Disbursement

FOOD/BEVERAGES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0		2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.117**

Amount of Each Disbursement this Period

2380.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 900 BRENTWOOD RD NE

City
WASHINGTONState
DCZip Code
20066

Purpose of Disbursement

POSTAGE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	7		2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.014**

Amount of Each Disbursement this Period

64.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WESTIN HOTEL GRAMERCY

Mailing Address 212 E 42ND ST

City
NEW YORKState
NYZip Code
10017

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6		2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.104**

Amount of Each Disbursement this Period

13.84

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2458.41

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WESTIN HOTEL GRAMERCY

Mailing Address 212 E 42ND ST

City
NEW YORKState
NYZip Code
10017

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.109**

Amount of Each Disbursement this Period

57.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WESTIN HOTEL GRAMERCY

Mailing Address 212 E 42ND ST

City
NEW YORKState
NYZip Code
10017

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.118**

Amount of Each Disbursement this Period

34.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILEY REIN

Mailing Address 2050 M ST NW

City
WASHINGTONState
DCZip Code
20036

Purpose of Disbursement

LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.038**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5091.80

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WILEY REIN

Mailing Address 2050 M ST NW

City
WASHINGTONState
DCZip Code
20036

Purpose of Disbursement

LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.073**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILEY REIN

Mailing Address 2050 M ST NW

City
WASHINGTONState
DCZip Code
20036

Purpose of Disbursement

LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : SB21B.119**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10000.00

TOTAL This Period (last page this line number only)..... ►

215973.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

RIGHT FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TURNING POINT PAC INC

Mailing Address 4930 E. BEVERLY ROAD, SUITE 2000

City
PHOENIXState
AZZip Code
85044

Purpose of Disbursement

CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	4		

FEC Identification Number

C C00814152**Transaction ID : SB23.001**

Amount of Each Disbursement this Period

500000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500000.00

500000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 100 OF 109
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee DIRECT RESULTS RADIO INC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 16 2024	
Mailing Address 815 HAMPTON DR UNIT 2			Amount 30000.00	
City VENICE	State CA	Zip Code 90291	Transaction ID : SE24.1069 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 19 2024	
Purpose of Expenditure MEDIA: RADIO			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee DIRECT RESULTS RADIO INC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 16 2024	
Mailing Address 815 HAMPTON DR UNIT 2			Amount 825061.00	
City VENICE	State CA	Zip Code 90291	Transaction ID : SE24.1070 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 04 2024	
Purpose of Expenditure MEDIA: RADIO			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			855061.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>RIZZUTO, LEANDRO, , ,</u>			Date M M / D D / Y Y Y Y Y Y 09 16 2024	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 101 OF 109
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee DIRECT RESULTS RADIO INC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 815 HAMPTON DR UNIT 2			Amount 878843.00	
City VENICE	State CA	Zip Code 90291	Transaction ID : SE24.1075 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure MEDIA: RADIO			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , , ☐ Support ☒ Oppose			Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee DIRECT RESULTS RADIO INC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 815 HAMPTON DR UNIT 2			Amount 902633.00	
City VENICE	State CA	Zip Code 90291	Transaction ID : SE24.1076 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure MEDIA: RADIO			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , , ☐ Support ☒ Oppose			Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 1781476.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. <u>RIZZUTO, LEANDRO, , ,</u> Signature Date M M / D D / Y Y Y Y Y Y				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 102 OF 109
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee DIRECT RESULTS RADIO INC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 30 / 2024	
Mailing Address 815 HAMPTON DR UNIT 2			Amount 913376.00	
City VENICE	State CA	Zip Code 90291	Transaction ID : SE24.1088 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 24 / 2024	
Purpose of Expenditure MEDIA: RADIO			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee HANCO PRODUCTIONS LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 24 / 2024	
Mailing Address 47 ANN STREET #6F			Amount 3000.00	
City NEW YORK	State NY	Zip Code 10038	Transaction ID : SE24.1066 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 20 / 2024	
Purpose of Expenditure MEDIA: DIGITAL			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			916376.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
_____ Signature			Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2024	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 103 OF 109
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on MM / DD / YYYY	
Full Name of Payee HARRIS MEDIA LLC ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2024	
Mailing Address 66 WEST FLAGLER STREET, UNIT PH-1			Amount 150000.00	
City MIAMI	State FL	Zip Code 33130	Transaction ID : SE24.1065 Date of Disbursement or Obligation MM / DD / YYYY 08 / 21 / 2024	
Purpose of Expenditure MEDIA: DIGITAL		Category/ Type		
Name of Federal Candidate: HARRIS, KAMALA, , , ☐ Support ☒ Oppose			Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee HARRIS MEDIA LLC ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 04 / 2024	
Mailing Address 66 WEST FLAGLER STREET, UNIT PH-1			Amount 500000.00	
City MIAMI	State FL	Zip Code 33130	Transaction ID : SE24.1071 Date of Disbursement or Obligation MM / DD / YYYY 09 / 04 / 2024	
Purpose of Expenditure MEDIA: DIGITAL		Category/ Type		
Name of Federal Candidate: HARRIS, KAMALA, , , ☐ Support ☒ Oppose			Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			650000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>RIZZUTO, LEANDRO, , ,</u>			Date MM / DD / YYYY 08 / 25 / 2024	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 104 OF 109
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on			M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee HARRIS MEDIA LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y	
Mailing Address 66 WEST FLAGLER STREET, UNIT PH-1			Amount 1000000.00	
City MIAMI		State FL	Zip Code 33130	
Purpose of Expenditure MEDIA: DIGITAL		Category/ Type		Transaction ID : SE24.1077 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate: HARRIS, KAMALA, , , ☐ Support ☒ Oppose			Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee HARRIS MEDIA LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y	
Mailing Address 66 WEST FLAGLER STREET, UNIT PH-1			Amount 1000000.00	
City MIAMI		State FL	Zip Code 33130	
Purpose of Expenditure MEDIA: DIGITAL		Category/ Type		Transaction ID : SE24.1087 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate: HARRIS, KAMALA, , , ☐ Support ☒ Oppose			Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			2000000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>RIZZUTO, LEANDRO, , ,</u>			Date M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 105 OF 109
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee OUTLAW MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 24 2024	
Mailing Address 3532 GODDARD WAY			Amount 32000.00	
City ALEXANDRIA	State VA	Zip Code 22304	Transaction ID : SE24.1067 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 20 2024	
Purpose of Expenditure MEDIA: DIGITAL			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee OUTLAW MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 03 2024	
Mailing Address 3532 GODDARD WAY			Amount 4000.00	
City ALEXANDRIA	State VA	Zip Code 22304	Transaction ID : SE24.1073 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 03 2024	
Purpose of Expenditure MEDIA: DIGITAL			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 36000.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>RIZZUTO, LEANDRO, , ,</u>			Date M M / D D / Y Y Y Y Y Y 08 25 2024	

SCHEDULE E (FEC Form 3X)
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NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee RED EAGLE MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 04 / 2024	
Mailing Address 815 SLATERS LANE			Amount 2850503.87	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.1068 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 03 / 2024	
Purpose of Expenditure MEDIA			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , ,			☐ Support Office Sought: ☐ House District: _____ ☒ Oppose ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee RED EAGLE MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2024	
Mailing Address 815 SLATERS LANE			Amount 3109007.63	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.1074 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 06 / 2024	
Purpose of Expenditure MEDIA: TELEVISION			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , ,			☐ Support Office Sought: ☐ House District: _____ ☒ Oppose ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 5959511.50 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. _____ Signature Date M M / D D / Y Y Y Y Y Y 09 / 05 / 2024				

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NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RED EAGLE MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 17 / 2024	
Mailing Address 815 SLATERS LANE			Amount 2932670.71	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.1078 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2024	
Purpose of Expenditure MEDIA: TELEVISION			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , , ☐ Support ☒ Oppose			Office Sought: ☐ House ☐ Senate ☒ President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee RED EAGLE MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 24 / 2024	
Mailing Address 815 SLATERS LANE			Amount 3176709.23	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.1080 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 23 / 2024	
Purpose of Expenditure MEDIA: TELEVISION			Category/ Type	
Name of Federal Candidate: HARRIS, KAMALA, , , ☐ Support ☒ Oppose			Office Sought: ☐ House ☐ Senate ☒ President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 21926597.80			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 6109379.94 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>RIZZUTO, LEANDRO, , ,</u>			Date M M / D D / Y Y Y Y Y Y 09 / 18 / 2024	

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NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report			New report ☐ Amends report filed on MM / DD / YYYY	
Full Name of Payee RED EAGLE MEDIA		☐ Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 26 / 2024	
Mailing Address 815 SLATERS LANE		City ALEXANDRIA	State VA	Zip Code 22314
Amount 130650.00				
Purpose of Expenditure MEDIA: TELEVISION		Category/ Type	Transaction ID : SE24.1086 Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2024	
Name of Federal Candidate: HARRIS, KAMALA, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		21926597.80	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee RED EAGLE MEDIA		☐ Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2024	
Mailing Address 815 SLATERS LANE		City ALEXANDRIA	State VA	Zip Code 22314
Amount 661143.36				
Purpose of Expenditure MEDIA: TELEVISION		Category/ Type	Transaction ID : SE24.1090 Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2024	
Name of Federal Candidate: HARRIS, KAMALA, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		21926597.80	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 791793.36 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>RIZZUTO, LEANDRO, , ,</u>			Date MM / DD / YYYY 09 / 26 / 2024	

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NAME OF COMMITTEE (In Full) RIGHT FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00867036	
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee X CORP		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 03 / 2024	
Mailing Address 1355 MARKET ST STE 900		City SAN FRANCISCO	State CA	Zip Code 94103
Amount 952000.00				
Purpose of Expenditure MEDIA: DIGITAL		Category/ Type	Transaction ID : SE24.1072 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 03 / 2024	
Name of Federal Candidate: HARRIS, KAMALA, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		21926597.80	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee X CORP		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2024	
Mailing Address 1355 MARKET ST STE 900		City SAN FRANCISCO	State CA	Zip Code 94103
Amount 1875000.00				
Purpose of Expenditure MEDIA: DIGITAL		Category/ Type	Transaction ID : SE24.1079 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2024	
Name of Federal Candidate: HARRIS, KAMALA, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		21926597.80	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			2827000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures			21926597.80	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>RIZZUTO, LEANDRO, , ,</u>			Date M M / D D / Y Y Y Y Y Y 09 / 05 / 2024	