Right to Rise PAC, Inc.

ADDRESS (number and street)  P.O. Box 14349

Tallahassee  FL  32317

COMMITTEE'S E-MAIL ADDRESS  SalPurpura2010@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)  www.RighttoRisePAC.org

DATE  01/16/2015

FEC IDENTIFICATION NUMBER  C00571380

IS THIS STATEMENT  NEW (N)  OR  AMENDED (A)

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

Type or Print Name of Treasurer  James P. Robinson

Signature of Treasurer  [Electronically Filed]
5. TYPE OF COMMITTEE

**Candidate Committee:**

(a) □ This committee is a principal campaign committee. (Complete the candidate information below.)

(b) □ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

(c) □ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

<table>
<thead>
<tr>
<th>Candidate Party Affiliation</th>
<th>Office Sought:</th>
<th>House</th>
<th>Senate</th>
<th>President</th>
<th>State</th>
<th>District</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Candidate</th>
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</table>

**Party Committee:**

(d) □ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

(e) □ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

- □ Corporation
- □ Corporation w/o Capital Stock
- □ Labor Organization
- □ Membership Organization
- □ Trade Association
- □ Cooperative

   In addition, this committee is a Lobbyist/Registrant PAC.

(f) □ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

   In addition, this committee is a Lobbyist/Registrant PAC.

   In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

(g) □ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) □ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

<table>
<thead>
<tr>
<th>1.</th>
<th></th>
<th>FEC ID number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td></td>
<td>FEC ID number</td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td>FEC ID number</td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td>FEC ID number</td>
</tr>
</tbody>
</table>
Write or Type Committee Name

Right to Rise PAC, Inc.

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address: ____________________________

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salvatore Purpura</td>
<td>P.O. Box 14349</td>
</tr>
</tbody>
</table>

Tallahassee, FL 32317

Title or Position: Assistant Treasurer

CITY | STATE | ZIP CODE
--- | --- | ---
--- | --- | ---

Relationship: [ ] Connected Organization [ ] Affiliated Committee [ ] Joint Fundraising Representative [ ] Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name: James P. Robinson

Mailing Address: P.O. Box 14349

Tallahassee, FL 32317

Title or Position: Treasurer

CITY | STATE | ZIP CODE
--- | --- | ---
--- | --- | ---

Relationship: [ ] Connected Organization [ ] Affiliated Committee [ ] Joint Fundraising Representative [ ] Leadership PAC Sponsor

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: James P. Robinson

Mailing Address: P.O. Box 14349

Tallahassee, FL 32317

Title or Position: Treasurer

CITY | STATE | ZIP CODE
--- | --- | ---
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Telephone number: 754-800-4819
9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

**Chain Bridge Bank**

Mailing Address

1445-A Laughlin Avenue

McLean  VA  22101

CITY  STATE  ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY  STATE  ZIP CODE