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Office Use Only

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1 PAGE 1 / 4 =

FEC FORM 1		-	sta Dr(_						
1. NAME OF COMMITTEE (ir	n full)		(Cheo is cha			ne		ixar ver					g, ty	ype	
Right for Am	erica														
					1	1 1	1		1	I	1		I	1	

ADDRESS (number and street)	1390 Chain Bridge Rd
(Check if address is changed)	Ste 515
	McLean

CITY

COMMITTEE'S E-MAIL ADDRESS

Only

(Check if address is changed)	john@capitoltreasury.com
	Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)					
2. DATE 01 / 24	D / Y Y Y Y 2024				
3. FEC IDENTIFICATION NU	JMBER ► C	C C00867036			
4. IS THIS STATEMENT	NEW (N) O	DR	AMENDED (A)		
I certify that I have examined thi	is Statement and to the	best of my know	ledge and belief it i	is true, correct	and complete.
Type or Print Name of Treasurer	Rizzuto, Leandro, , ,				
Signature of Treasurer Rizzut	ito, Leandro, , ,			Date 01	/ D D / Y Y Y Y 24 2024
NOTE: Submission of false, errone	eous, or incomplete inform ANY CHANGE IN INFO				
Office Use		Fede	further information co eral Election Commission Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

Local 202-694-1100

FE	EC Form 1 (Revised 03/2022)	Page 2
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 c information below.)	andidate
	Name of Candidate	
		State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Common Republican, etc	c.) Party
	Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	rganization is a:
	Corporation Corporation w/o Capital Stock Labor Orga	nization
	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 fu committee. (i.e., nonconnected committee)	und or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) X This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	

Joint Fundraising Representative:

(i) 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.
 (j) 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
 1.
 2.

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	

Right for America

6.	Name of Any Connected Or	ganization, Affil	ated Committee, Joint	Fundraising Representative	, or Leadership PAC Sponsor
	Mailing Address				
			CITY 🔺	STATE 🔺	ZIP CODE
	Relationship: Connected	Organization	Affiliated Organization	Joint Fundraising Represent	tative 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.

Rizzuto, Le	ndro, , ,	
Full Name		
Mailing Address	1390 Chain Bridge Rd	
	Ste 515	
	McLean VA 22101	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
Treasurer	Telephone number	

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	Rizzuto, Leandro, , ,
Mailing Address	1390 Chain Bridge Rd
	Ste 515
	McLean VA 22101
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image:

FEC Form 1	(Revised 02/2009)
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Full Name of Designated Agent	Plishka, John, , ,
Mailing Address	1390 Chain Bridge Rd
	Ste 515
	McLean VA 22101 Image: Image
	CITY STATE ZIP CODE
Title or Position	
Assistant Treasur	rer

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	1445A Laughlin Ave		
	McLean	VA 2210	1
	CITY A	STATE A	ZIP CODE
Name of Bank, I]
Mailing Address			
	CITY A	STATE A	ZIP CODE ▲