PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) BUCKEYE LIBERTY POLITICAL ACTION COMMITTEE 499 SOUTH CAPITOL STREET SW ADDRESS (number and street) 407 (Check if address is changed) WASHINGTON 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS TCDATWYLER@GMAIL.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00693796 FEC IDENTIFICATION NUMBER > 3. 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. DATWYLER, THOMAS, , , Type or Print Name of Treasurer DATWYLER, THOMAS, , , [Electronically Filed] 80 19 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530 Only Local 202-694-1100

	rm 1 (Revised 02/2009)	Page 2	
	COMMITTEE e Committee:		
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)		
(b) x	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate	
Name of Candidate			
Candidate Party Affiliat	Office Sought: House Senate President	State	
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate			
Party Cor		'Damagratia	
(d)		Democratic, Republican, etc.) Party	
Political A	action Committee (PAC):		
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is	
	Corporation Corporation w/o Capital Stock	Labor Organization	
	Membership Organization Trade Association	Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.		
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated 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 Fund	draising Representative:		
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw	o or more political	
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw	o or more political	
(h)	committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political	
Com	mittees Participating in Joint Fundraiser		
1.	FEC ID number		
2.	FEC ID number		
3.	FEC ID number		
4.			

FEC Form	1 (Revised 0	2/2009)	Page 3
Write or Type Com	mittee Name		
BUCKEY	E LIBE	RTY POLITICAL ACTION COMMITTEE	
6. Name of Any C	Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
JORDAN, JAI	MES D., ,	<u>'</u> '	
Mailing Address		1709 SOUTH STATE ROUTE 560	
Mailing Address			
		URBANA OH 43078	
		CITY STATE 70	
		CITY STATE ZI	P CODE
Relationship:	Connected	Organization Affiliated Committee Joint Fundraising Representative X Leade	ership PAC Sponsor
		ify by name, address (phone number optional) and position of the person in posse	ssion of committee
books and recor	us.		
Full Name	DATWYLE	R, THOMAS, , ,	
Mailing Address		499 SOUTH CAPITOL STREET SW	
ivialling Address		407	
		WASHINGTON , DC , 20003	
Title or Position		CITY STATE ZIF	CODE
TREASURER		Telephone number 715 - 33	8 - 8544
		address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).	and address of
Full Name	DATWYLE	R, THOMAS, , ,	1
of Treasurer		MOS COUTU CARITOL STREET SW	
Mailing Address		499 SOUTH CAPITOL STREET SW	
		407	
		WASHINGTON DC 20003	
Title or Position		CITY STATE ZIF	CODE
TREASURER			8544

Telephone number

FEC Forr	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Maning Address		
	CITY STATE Z	IP CODE
Title or Position		1 1
	Telephone number	
Name of Bank, I		
-	CHAIN BRIDGE BANK 1445A LAUGHLIN AVENUE MCLEAN VA 22101	
Name of Bank, I	CHAIN BRIDGE BANK 1445A LAUGHLIN AVENUE MCLEAN VA 22101	
Name of Bank, I	CHAIN BRIDGE BANK 1445A LAUGHLIN AVENUE MCLEAN CITY STATE Z	IP CODE
Name of Bank, I	CHAIN BRIDGE BANK 1445A LAUGHLIN AVENUE MCLEAN CITY STATE Z	IP CODE
Name of Bank, I	CHAIN BRIDGE BANK 1445A LAUGHLIN AVENUE MCLEAN CITY STATE Z	IP CODE
Name of Bank, I	CHAIN BRIDGE BANK 1445A LAUGHLIN AVENUE MCLEAN CITY STATE Z	IP CODE
Name of Bank, I	CHAIN BRIDGE BANK 1445A LAUGHLIN AVENUE MCLEAN CITY STATE Z	IP CODE

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

FEC Form 1S (Revised 02/2017)

Page ____ **of** ____

5(g) (or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected BUCKEYE VICTO	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	499 SOUTH CAPITOL STREET SW		
		407		
		WASHINGTON	DC DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.		by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OF POOLTION	_ CITY ▲		
	TITLE OR POSITION	▼ OIII ▼	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	V	STATE ▲ lephone Number	ZIP CODE A
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which t	lephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which t	lephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which t	lephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which t	lephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which t	lephone Number	