FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. MARIONY PAC PO BOX 183 ADDRESS (number and street) (Check if address is changed) **HUDSON** 54016 WI CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address tcdatwyler@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00853531 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 DATWYLER, THOMAS, , DATWYLER, THOMAS, , , Date 03 20 2024 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

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|---|--|--|--|--|--|--|--|--|
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| 5. T | TYPE OF COMMITTEE: | | | | | | | |
| C | Candidate Committee: | | | | | | | |
| (a | This committee is a principal campaign committee. (Complete the candidate information below.) | | | | | | | |
| (b | (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) | | | | | | | |
| Name of Candidate '','','','', | | | | | | | | |
| | Candidate Office State | | | | | | | |
| | Party Affiliation Sought: House Senate President District | | | | | | | |
| (c | (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | | | | | |
| | Name of Candidate | | | | | | | |
| _ Р | Party Committee: | | | | | | | |
| (c | (National, State (Democratic, | | | | | | | |
| Р | olitical Action Committee (PAC): | | | | | | | |
| (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization | | | | | | | | |
| | Corporation Corporation w/o Capital Stock Labor Organization | | | | | | | |
| | Membership Organization Trade Association Cooperative | | | | | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | | | |
| (f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or 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.) | | | | | | | |
| (c | 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. | | | | | | | |
| J | oint 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 | | | | | | | |
| | 1C | | | | | | | |

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|------|--|---|-----------------------|--|--|
| | or Type Committee Nam | | | | |
| N | MARIONY PAC | | | | |
| | Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor FRATTO, MARIO, , , | | | | |
| Ľ | TATTO, WARIO, , | , | | | |
| | | | | | |
| Ma | ailing Address | 964 COUNTY ROAD 4 | | | |
| | | | | | |
| | | GENEVA NY 14456 | | | |
| | | CITY ▲ STATE ▲ | ZIP CODE ▲ | | |
| Re | elationship: Connecte | d Organization | Leadership PAC Sponso | | |
| | | | | | |
| | ustodian of Records: Idea | ntify by name, address (phone number optional) and position of the person in possess | ion of committee | | |
| | DATWYL | LER, THOMAS, , , | | | |
| Ful | II Name | | | | |
| Ма | ailing Address | PO BOX 183 | | | |
| | | | | | |
| | | HUDSON WI 54016 | | | |
| | | CITY ▲ STATE ▲ | ZIP CODE ▲ | | |
| Titl | le or Position ▼ | OIT - STATE - | ZII OODE = | | |
| C | USTODIAN OF RECORDS | Telephone number | 866 8229 | | |
| | easurer: List the name a y designated agent (e.g., | and address (phone number optional) of the treasurer of the committee; and the national assistant treasurer). | ame and address of | | |
| | | LER, THOMAS, , , | | | |
| of | Treasurer | PO POV 400 | | | |
| Ма | ailing Address | PO BOX 183 | | | |
| | | | | | |
| | | HUDSON WI 54016 | | | |
| | | CITY ▲ STATE ▲ | ZIP CODE ▲ | | |
| Titl | le or Position ▼ | | | | |
| L | REASURER | Telephone number | 866 8229 | | |

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|--------------------------------|---|------------------|---------------|--|--|--|--|
| Full Name of Designated Agent | | | | | | | |
| Mailing Address | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | | | |
| Title or Position ▼ | | | | | | | |
| | | Telephone number | | | | | |
| | 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, | Name of Bank, Depository, etc. | | | | | | |
| CHAIN | BRIDGE BANK | | | | | | |
| Mailing Address | 1445A LAUGHLIN AVE | | | | | | |
| | | | | | | | |
| | MCLEAN | VA2 | 22101 | | | | |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | | | |
| Name of Bank, Depository, etc. | | | | | | | |
| | | | | | | | |
| Mailing Address | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | | | |