PAGE 1/8 =

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Rodney for Congress PO Box 344 ADDRESS (number and street) (Check if address is changed) Taylorville 62568-0344 IL 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) http://electrodney.com/ (Check if address is changed) DATE 2018 C00521948 FEC IDENTIFICATION NUMBER > 3. X 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] 09 19 2018 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

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	of.	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
Cand		Davis, Rodney, L, ,	
Cand Party	lidate Affiliati	on REP Office Sought: House Senate President	State IL District 13
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee: (National, State	Democratic,
(d)		, , ,	epublican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.	FEC ID number	
	4		

FEC Form 1 (Revised 0	2/2009)	Page 3
Write or Type Committee Name		. ago 🗸
Rodney for Con	aress	
	ganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
-		
Patriot Day II 2015	<u> </u>	
Mailing Address	PO Box 9891	
	Arlington VA 22219-1	891
	CITY STATE	ZIP CODE
ъ Па	o i ii Damii io iii Bii i ii	and a maleira DACC
Relationship: Connected	Organization	eadership PAC Sponso
Datwyler, T Full Name Mailing Address	homas, , , , 499 South Capitol Street SW	
		1016
	Washington DC 20003-2	
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	
B. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the nassistant treasurer).	ame and address of
Full Name Datwyler, T	nomas, , ,	
of Treasurer	499 South Capitol Street SW	
Mailing Address		
	<u> </u> #407	
	Washington DC 20003-4	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	

1 20 1 011	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	<u></u>	<u> </u>
Mailing Address		
	CITY STATE Z	IP CODE
Title or Position	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds.	accounts, rents
Name of Bank,	Depository, etc. Chain Bridge Bank	
Name of Bank, Mailing Address		
	Chain Bridge Bank	
	Chain Bridge Bank 1445-A Laughlin Ave McLean VA 22101	ZIP CODE
	Chain Bridge Bank 1445-A Laughlin Ave McLean VA 22101 CITY STATE Z	ZIP CODE
Mailing Address	Chain Bridge Bank 1445-A Laughlin Ave McLean VA 22101 CITY STATE Z	ZIP CODE
Mailing Address Name of Bank,	Chain Bridge Bank 1445-A Laughlin Ave McLean CITY STATE Z Depository, etc.	ZIP CODE

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

FEC Form 1S (Revised 02/2017)

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5(g)	or(h). Joint Fundraisin	g Participant:			
	1.		FEC II	D number	C
	2.		FEC II	D number	C
	3.		FEC II	D number	С
	4.		FEC II	D number	C
6.	Name of Any Connected Governing Majorit	Organization, Affiliated Committee, Joint Fu	ndraising Re	presentativ	e, or Leadership PAC Sponsor
	Mailing Address	831 Linwood Ct			
		Birmingham		l AL l	35222-4428
	Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	oint Fundraisin	g Represent	
8.	Designated Agent: Identify	by name, address (phone number – optional))		
	Full Name				
	Mailing Address				
			1		I I-I
	TITLE OR POSITION	CITY A		STATE ▲	ZIP CODE ▲
			Telephone N	lumber	
9.	Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address		ich the comm	ittee deposit	s funds, holds accounts, rents
		Washington		DC	20003
		CITY A		STATE ▲	ZIP CODE ▲

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

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h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Rodney Davis Vi	ctory Fund		
Mailing Address	499 S Capitol St SW		
	Ste 407		
	Washington	DC	20003-4016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

Page ____ **of** ____

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponse
Rodney Illinois V	ctory Fund		<u> </u>
Mailing Address	499 S Capitol St SW		<u> </u>
	Ste 407		<u> </u>
	Washington	DC	20003-4016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the safety deposit boxes or make	CITY A CITY A pries: List all banks or other depositories in which aintains funds. Bank 108 W. Market St.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the safety deposit boxes or make	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds. Bank	Telephone Number	

FEC Form 1S (Revised 02/2017)

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

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h). Joint Fundraisi	•		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
PATRIOT ROUN	D IV 2018		
Mailing Address	PO Box 9891		
	Arlington	, , VA	22219-1891
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A