

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

REPUBLICAN PARTY OF IOWA

ADDRESS (number and street)

621 E 9th St

☐ (Check if address is changed)

Des Moines

CITY ▲

IA

STATE ▲

50309

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

tcdatwyler@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

https://www.iowagop.org/

2. DATE

M M / D D / Y Y Y Y
11 / 16 / 2022

3. FEC IDENTIFICATION NUMBER ►

C C00014498

4. 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 Barker, David, , ,

Signature of Treasurer Barker, David, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
11 / 16 / 2022

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

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.)

Name of
CandidateCandidate
Party AffiliationOffice
Sought:☐ House☐ Senate☐ President

State

District

- (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 (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.)

- (g) ☐ 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.

C

C

Write or Type Committee Name

REPUBLICAN PARTY OF IOWA

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

Mailing Address

310 1st St SE

Washington

DC

20003-1885

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☒ Affiliated Organization ☐ 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 Olsen, Chad, , ,

Mailing Address

621 E 9th St

Des Moines

IA

50309

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Custodian of Records

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 Barker, David, , ,

Mailing Address

621 E 9th St

Des Moines

IA

50309

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

715

338

8544

Full Name of
Designated
Agent

Datwyler, Thomas, , ,

Mailing Address

PO Box 183

Hudson

WI

54016

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Assistant Treasurer

Telephone number

715

338

8544

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 Ave

Mclean

VA

22101

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Wells Fargo

Mailing Address

450 Montgomery St

San Francisco

CA

94104

CITY ▲

STATE ▲

ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

1.

2.

3.

4.

FEC ID number

FEC ID number

FEC ID number

FEC ID number

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

NRSC Targeted State Victory Committee

Mailing Address

228 S Washington St

Ste 115

Alexandria

VA

22314-5404

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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, BB&T

Depository, etc.

Mailing Address

1909 K St NW

Washington

DC

20006

CITY ▲

STATE ▲

ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

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FEC ID number

FEC ID number

FEC ID number

FEC ID number

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

NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address

425 2nd St NE

Washington

DC

20002-4914

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐ Connected Organization ☒ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C

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

Trump Victory

Mailing Address 138 Conant St
c/o Red Curve Solutions
Beverly MA 01915-1666
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲

☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name
Mailing Address
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
Telephone Number

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.
Mailing Address
CITY ▲ STATE ▲ ZIP CODE ▲

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2.

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FEC ID number

FEC ID number

FEC ID number

FEC ID number

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

Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

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Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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Name of Bank,

Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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FEC ID number

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Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

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Connected Organization

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Affiliated Committee

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Joint Fundraising Representative

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Leadership PAC Sponsor

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Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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Name of Bank,

Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

1.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
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3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

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

The Founders Committee

Mailing Address	<input type="text" value="1305 W 11th St"/>		
	<input type="text" value="# 213"/>		
	<input type="text" value="Houston"/>	<input type="text" value="TX"/>	<input type="text" value="77008-6501"/>
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
<input type="checkbox"/> Connected Organization	<input type="checkbox"/> Affiliated Committee	<input checked="" type="checkbox"/> Joint Fundraising Representative	<input type="checkbox"/> Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name	<input type="text"/>		
Mailing Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	<input type="text"/>	<input type="text"/>
TITLE OR POSITION ▼	CITY ▲	STATE ▲	ZIP CODE ▲
<input type="text"/>	Telephone Number <input type="text"/> - <input type="text"/> - <input type="text"/>		

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.	<input type="text"/>		
Mailing Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	CITY ▲	STATE ▲	ZIP CODE ▲

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FEC ID number

FEC ID number

FEC ID number

FEC ID number

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

Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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Name of Bank,

Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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FEC ID number

FEC ID number

FEC ID number

FEC ID number

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

Take Back the House 2022

Mailing Address

PO Box 30844

Bethesda

MD

20824-0844

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐ Connected Organization ☒ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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FEC ID number

FEC ID number

FEC ID number

FEC ID number

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

Feenstra Victory Fund

Mailing Address

641 2nd Street

Hull

IA

51239

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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Name of Bank,

Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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FEC ID number

FEC ID number

FEC ID number

FEC ID number

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

MILLER-MEEKS VICTORY FUND

Mailing Address

PO BOX 183

HUDSON

WI

54016

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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Name of Bank,

Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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FEC ID number

FEC ID number

FEC ID number

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Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

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Name of Bank,

Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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FEC ID number

FEC ID number

FEC ID number

FEC ID number

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

JONI'S ROAST AND RIDE

Mailing Address

PO BOX 93441

DES MOINES

IA

50393

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

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STATE ▲

ZIP CODE ▲