**FEC** 

Only

## STATEMENT OF

PAGE 1 / 4

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Devolder Santos Victory Committee PO Box 183 ADDRESS (number and street) (Check if address is changed) Hudson 54016 CITY A STATE A ZIP CODE ▲ 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 2023 C00791137 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] 01 25 2023 Signature of Treasurer Date 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

FE	EC Form 1 (Revised 03/2022)	Page 2			
	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 information below.)	candidate			
	Name of Candidate				
	Candidate Party Affiliation Office 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 Republican,				
	Political Action Committee (PAC):				
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:			
	Corporation Corporation w/o Capital Stock Labor Or	ganization			
	Membership Organization Trade Association Cooperation	iive			
	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)	I 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.)				
(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 politic committees/organizations, none of which is an authorized committee of a federal candidate.					
	Committees Participating in Joint Fundraiser				
	GADS PAC  1. C C00764472				
	DEVOLDER-SANTOS FOR CONGRESS  C C00721365				

•	FEC Form 1 (Revised 0	2/2009)	Page <b>3</b>		
٧	Vrite or Type Committee Name				
	Devolder Santo	s Victory Committee			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NONE				
	Mailing Address				
		CITY ▲ STAT	E ▲ ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Repr			
	Treiationship.	Organization Anniated Organization 50mt rundraising rieph	Leadership 1 AO Sponso		
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Datwyler, T	nomas, , ,			
	Full Name				
	Mailing Address	PO Box 183			
		Hudson   WI	54016		
		CITY ▲ STAT	E ▲ ZIP CODE ▲		
	Title or Position ▼	3.11	211 0002 -		
	Treasurer	Telephone number	715 - 338 - 8544		
8.	<b>Treasurer:</b> 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 Datwyler, T	nomas, , ,			
	of Treasurer				
	Mailing Address	PO Box 183			
		Hudson	/1 54016		
		CITY ▲ STAT	E ▲ ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	715 - 338 - 8544		

F	EC Form 1	(Revised 02/2009)		Page <b>4</b>		
Full N Desig	lame of					
Agent	t					
Mailin	g Address					
Title o	or Position <b>•</b>	CITY A	STATE ▲	ZIP CODE ▲		
		Telephone nu	mber			
Banks safety	s or Other deposit bo	Depositories: List all banks or other depositories in which the committees or maintains funds.	tee deposits f	unds, holds accounts, rents		
Name	Name of Bank, Depository, etc.					
	Flushing Bank					
Mailin	g Address	1044 William Floyd Parkway				
		Shirley	NY	11967		
		CITY A	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.						
Mailin	g Address					
		CITY A	STATE ▲	ZIP CODE ▲		