Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Republican Party of Cuyahoga County Federal Campaign Committee 1500 West Third Street ADDRESS (number and street) Suite 120 (Check if address is changed) Cleveland 44113 ОН 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://www.cuyahogacountygop.com/ (Check if address is changed) DATE 05 2021 C00452482 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] 2021 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

Local 202-694-1100

FEC <b>F</b>	orm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF	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. (Con information below.)	nplete the candidate
Name of Candidate		
Candidate Party Affilia	tion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		(Domogratio
(d) <b>x</b>	This committee is a SUB (National, State or subordinate) committee of the REP	(Democratic, Republican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 scommittee. (i.e., nonconnected committee)	egregated 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.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Сог	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.		
4.		

Treasurer

<del>-</del>		$\neg$
FEC <b>Form 1</b> (Revised	02/2009)	Page <b>3</b>
Write or Type Committee Nam		r age <b>v</b>
	rty of Cuyahoga County Federal Cam	paign Committee
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
OHIO REPUBLICAN	PARTY STATE CENTRAL & EXECUTIVE COMMI	TTEE
Mailing Address	211 S. FIFTH STREET	
	COLUMBUS	43215
	CITY STATE	ZIP CODE
Relationship: Connected	ed Organization 🗶 Affiliated Committee Joint Fundraising Representation	tive Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	entify by name, address (phone number optional) and position of the p	erson in possession of committee
Datwyler, Full Name	, Thomas, , ,	
Mailing Address	PO Box 183	
	Hudson	54016
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	715 - 338 - 8544
Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Datwyler, of Treasurer	Thomas, , ,	
Mailing Address	PO Box 183	
	Hudson	54016
Title or Position	CITY STATE	ZIP CODE

Telephone number

8544

FEC Form	<b>1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
	CITY STATE ZI	IP CODE
Title or Position		
	Telephone number	
	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds a exes or maintains funds.  Depository, etc.	
safety deposit box Name of Bank, D	Depository, etc.  National City Bank Corp.	
safety deposit box Name of Bank, D	oxes or maintains funds.  Depository, etc.	
safety deposit box Name of Bank, D	Depository, etc.  National City Bank Corp.	
safety deposit box Name of Bank, D	Depository, etc.  National City Bank Corp.	
safety deposit box Name of Bank, D	Depository, etc.  National City Bank Corp.  1375 E 9th Street  Cleveland  OH  44114	IP CODE
safety deposit box Name of Bank, D	Depository, etc.  National City Bank Corp.  1375 E 9th Street  Cleveland  CITY  STATE  Z	
safety deposit box Name of Bank, D  Mailing Address	Depository, etc.  National City Bank Corp.  1375 E 9th Street  Cleveland  CITY  STATE  Z	
Name of Bank, D  Mailing Address  Name of Bank, D	Depository, etc.  National City Bank Corp.  1375 E 9th Street  Cleveland  CITY  STATE  Z  Depository, etc.  Branch Banking & Trust Co.	
safety deposit box Name of Bank, D  Mailing Address	Depository, etc.  National City Bank Corp.  1375 E 9th Street  Cleveland  CITY  STATE  Z  Depository, etc.  Branch Banking & Trust Co.	
Name of Bank, D  Mailing Address  Name of Bank, D	Depository, etc.  National City Bank Corp.  1375 E 9th Street  Cleveland  CITY  STATE  Z  Depository, etc.  Branch Banking & Trust Co.	

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

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h). <b>Joint Fundrais</b> i	ing Participant:	FFC ID was made as	C
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
STARK COUNT	Y REPUBLICAN PARTY		
Mailing Address	2727 FULTON DRIVE NW		
	CANTON	OH	44718
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization	t Fundraising Representa	Leadership PAC S
esignated Agent: Ident		t Fundraising Representa	Leadership PAC S
esignated Agent: Ident		t Fundraising Representa	Leadership PAC S
esignated Agent: Ident		t Fundraising Representa	Leadership PAC S
esignated Agent: Ident			Leadership PAC S
esignated Agent: Ident	ify by name, address (phone number – optional)		
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY   CITY		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or necessity.	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page \_\_\_\_ **of** \_\_\_\_

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fun		e, or Leadership PAC Spons
Mailing Address	700 WALNUT ST., STE. 309		
	CINCINNATI	OH	45202
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	fy by name, address (phone number – optional)		
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address  TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	CITY A	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION	pries: List all banks or other depositories in which	Telephone Number	
TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other depositories in which	Telephone Number	

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

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anks or Other Deposito		s or other depositories in			is funds, holds accounts, rent
TITLE OR POSITION	<b>V</b>		Telephone Nu		211 OODE <b>2</b>
		CITY A		STATE A	ZIP CODE ▲
Mailing Address					
Full Name					
	d Organization  y by name, addres	Affiliated Committee  See Section 1 (2015)  Affiliated Committee    Section 2 (2015)  Affiliated Committee    Section 3 (2015)  Affiliated Committee    Affiliated Committee    Section 3 (2015)  Affiliated Committee    Affiliated Committee    Section 3 (2015)  Affiliated Committee    Affiliated Committee	Joint Fundraising	Hepresent	ative Leadership PAC Sp
Relationship:		CITY ▲	1	STATE A	ZIP CODE ▲
Deletionship	ALEXANDRIA	OTTV		VA	22314
					0004:
Mailing Address	228 S WASHIN	IGTON STREET #115			
JOYCE VICTORY	COMMITTE	<b>E</b>			
ame of Any Connected	Organization, Aff	iliated Committee, Joint	Fundraising Rep	resentativ	e, or Leadership PAC Spon
4.			FEC ID	number	C
3.			FEC ID	number	С
2.			FEC ID	number	С

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

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n). Joint Fundraising	r ai ticipaiit.				C
1.				FEC ID number	C
2.				FEC ID number	C
3				FEC ID number	C
4.				FEC ID number	C
ame of Any Connected C	organization, Affilia	ted Committee, Jo	int Fundrais	ing Representativ	e, or Leadership PAC Spor
Mailing Address	9856 Archer Lane				
	Dublin			OH	43017
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
Connected	Organization	filiated Committee	Joint Fu	ndraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name				ndraising Represent	ative Leadership PAC S
esignated Agent: Identify				ndraising Represent	ative Leadership PAC S
esignated Agent: Identify  Full Name				ndraising Represent	ative Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (		otional)		Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (	phone number — op	otional)		
esignated Agent: Identify  Full Name	by name, address (	phone number — op	otional)		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	by name, address (	phone number – op	otional)	STATE A	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main ame of Bank, epository, etc.	by name, address (	phone number – op	otional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	by name, address (	phone number – op	otional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main ame of Bank, epository, etc.	by name, address (	phone number – op	otional)	STATE A	ZIP CODE A