Only

PAGE 1 / 4

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. Border Security PAC 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 2022 C00828251 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] 2022 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

FEC Form 1 (Revised 03/2022)	Page 2					
TYPE OF COMMITTEE:						
Candidate Committee:						
(a) This committee is a principal campaign committee. (Cor	nplete the candidate information below.)					
(b) This committee is an authorized committee, and is NOT information below.)	a principal campaign committee. (Complete the candidate					
Name of Candidate						
Candidate Office Party Affiliation Sought: House	State President 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) co	(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 Corpora	tion w/o Capital Stock Labor Organization					
Membership Organization Trade A	ssociation Cooperative					
In addition, this committee is a Lobbyist/Regis	trant PAC.					
(f) This committee supports/opposes more than one Feder committee. (i.e., nonconnected committee)	al candidate, and is NOT a separate segregated fund or party					
In addition, this committee is a Lobbyist/Regis	trant PAC.					
In addition, this committee is a Leadership PA	.C. (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/Regis	trant 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.	C					

	FEC Form 1 (Revised 0)	2/2009)		Page 3		
٧	Vrite or Type Committee Name					
	Border Security	PAC				
6.	Name of Any Connected Or NONE	ganization, Affiliated Committee, Joint Fundraising	g Representati	ive, or Leadership PAC Sponsor		
	Mailing Address					
				I I I-I I		
		CITY ▲	STATE	▲ ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fund	ndraising Repres			
			0 1			
7.	Custodian of Records: Identi books and records.	y by name, address (phone number optional) and po	osition of the pe	rson in possession of committee		
	Datwyler, T	nomas, , ,				
	Full Name					
	Mailing Address	PO Box 183				
		Hudson	WI	54016		
		CITY ▲	STATE	▲ ZIP CODE ▲		
	Title or Position ▼					
	Treasurer	Telephor	ne number	715 - 338 - 8544		
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 Datwyler, To	iomas, , ,				
		PO Box 183				
	Mailing Address					
		Hudson	WI	54016		
		CITY A	STATE	▲ ZIP CODE ▲		
	Title or Position ▼					
	Treasurer	Telepho	ne number	715 - 338 - 8544		

F	FEC Form 1	(Revised 02/2009)		Page 4				
Full 1	Name of gnated	(101000 02200)						
Agen								
Mailii	ng Address							
Title	or Position •	CITY ▲	STATE ▲	ZIP CODE ▲				
		Telephone	e number					
		Depositories: List all banks or other depositories in which the cones or maintains funds.	nmittee deposits fu	unds, holds accounts, rents				
Name	Name of Bank, Depository, etc.							
		Chain Bridge Bank						
Mailir	ng Address	1445A Laughlin Avenue						
		McLean	VA	22101				
		CITY ▲	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.								
Mailir	ng Address							
		CITY ▲	STATE ▲	ZIP CODE ▲				