Only

STATEMENT OF

PAGE 1/6

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. PATRIOT DAY IV 2018 PO BOX 9891 ADDRESS (number and street) (Check if address is changed) ARLINGTON 22219 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS BEN@CROSBYOTT.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00681577 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. OTTENHOFF, BENJAMIN, , , Type or Print Name of Treasurer OTTENHOFF, BENJAMIN, , , [Electronically Filed] 06 26 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

Local 202-694-1100

F	EC For	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	alaate	Committee:	
(a)	H	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	olete the candidate
Name Cand			
Cand Party	lidate Affiliatio	Office Sought: House Senate President	State
			District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Com	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se	gregated fund or party
(1)	ш	committee. (i.e., nonconnected committee)	gregated 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	raising 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.	o 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.	o or more political
	Comi	mittees Participating in Joint Fundraiser	
	1.	MIKE BISHOP FOR CONGRESS	561001
	2.	MIKE BOST FOR CONGRESS COMMITTEE FEC ID number C COOS	546499
	3.	COFFMAN FOR CONGRESS 2018 FEC ID number C C006	529287
	4.	CULBERSON FOR CONGRESS FEC ID number C C003	43236

FEC Form 1 (Revised 0)	2/2009)	Page 3
Write or Type Committee Name		<u> </u>
PATRIOT DAY	IV 2018	
	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
NONE		
Mailing Address		
	CITY STATE ZI	P CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Leader	ership PAC Sponsoi
 Custodian of Records: Ident books and records. 	ify by name, address (phone number optional) and position of the person in posse	ssion of committee
	FF, BENJAMIN, , ,	
Full Name	PO BOX 9891	
Mailing Address		
	ARLINGTON VA 22219	
Title or Position	CITY STATE ZI	P CODE
TREASURER	Telephone number	
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).	and address of
Full Name OTTENHOR of Treasurer	F, BENJAMIN, , ,	
Mailing Address	PO BOX 9891	
	ARLINGTON VA 22219	
Title or Position	CITY STATE ZII	CODE
TREASURER	Telephone number	

FEC Forr	n 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent	1	
Mailing Address		
	CITY STATE 2	ZIP CODE
Title or Position		1 1
	Telephone number	
Name of Bank, I		
	Depository, etc. CHAIN BRIDGE BANK, NA 1445-A LAUGHLIN AVE MCLEAN VA 22101	
Name of Bank, I	CHAIN BRIDGE BANK, NA 1445-A LAUGHLIN AVE MCLEAN VA 22101	ZIP CODF
Name of Bank, I	CHAIN BRIDGE BANK, NA 1445-A LAUGHLIN AVE MCLEAN CITY STATE	ZIP CODE
Name of Bank, I	CHAIN BRIDGE BANK, NA 1445-A LAUGHLIN AVE MCLEAN CITY STATE	ZIP CODE
Name of Bank, I	CHAIN BRIDGE BANK, NA 1445-A LAUGHLIN AVE MCLEAN CITY STATE	ZIP CODE
Name of Bank, I	CHAIN BRIDGE BANK, NA 1445-A LAUGHLIN AVE MCLEAN CITY STATE	ZIP CODE
Name of Bank, I	CHAIN BRIDGE BANK, NA 1445-A LAUGHLIN AVE MCLEAN CITY STATE	ZIP CODE

FEC Form 1S (Revised 02/2017)

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

Page ____ **of** ____

Mailing Address Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Besignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —	5(g)	or(h). Joint Fundraisi n	g Participant:		
STEVE KNIGHT FOR CONGRESS 3. STEVE KNIGHT FOR CONGRESS, INC. STEC ID number C C coossa234 4. JASON LEWIS FOR CONGRESS, INC. 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 Sponso Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number			NGRESS	FEC ID number	C C00580415
Alling Address Alling Address		HURD FOR CO	DNGRESS	FEC ID number	C C00545467
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 Sponso Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — Telephone Number — Telephone Number — Telephone Number — Mailing Address 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		3. STEVE KNIGH	T FOR CONGRESS	FEC ID number	C C00554014
Mailing Address Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Built Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Tolephone Number Title OR POSITION ▼ Tolephone Number Title OR POSITION ▼ Tolephone Number Tolephone Number Mailing Address Mailing Address Mailing Address Mailing Address		4. JASON LEWIS	FOR CONGRESS, INC.	FEC ID number	C C00589234
Mailing Address Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Built Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Tolephone Number Title OR POSITION ▼ Tolephone Number Title OR POSITION ▼ Tolephone Number Tolephone Number Mailing Address Mailing Address Mailing Address Mailing Address					
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Besignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —	6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Besignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —					
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Besignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —					
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Besignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —		Mailing Address			
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TiTLE OR POSITION ▼ CITY ▲ Telephone Number Telephone Number Telephone Number Telephone Number Mailing Address Name of Bank, Depository, etc. Mailing Address		Ü			
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TiTLE OR POSITION ▼ CITY ▲ Telephone Number Telephone Number Telephone Number Telephone Number Mailing Address Name of Bank, Depository, etc. Mailing Address				1 1 1	
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		Relationship:	CITY A	STATE A	ZIP CODE ▲
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		Connected	d Organization Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sponsor
TITLE OR POSITION CITY STATE ZIP CODE Telephone Number Telephone Number Telephone Number Mailing Address CITY STATE A ZIP CODE Telephone Number Telephone Number Mailing Address					
TITLE OR POSITION CITY Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Mailing Address Telephone Number	8.		y by name, address (phone number – optional)		
TITLE OR POSITION CITY Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Mailing Address Telephone Number	8.	Full Name	by name, address (phone number – optional)		
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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 Mailing Address	8.	Full Name			
safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address	8.	Full Name	CITY	STATE A	
CITY A STATE A ZID CODE A	8.	Full Name	CITY A	ı	
CITY A STATE A ZID CODE A	8.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which	elephone Number	ZIP CODE A
		Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which	elephone Number	ZIP CODE A

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

FEC Form 1S (Revised 02/2017)

Page ___ **of** ___

h). Joint Fundraising	•		
1. ROTHFUS FOR		FEC ID number	C C00497115
2.	IEY FOR CONGRESS	FEC ID number	C C00632828
3. NRCC		FEC ID number	C C00075820
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fu	undraining Danyacantativ	o ar Landarchin DAC Spana
	organization, Anniated Committee, Joint Ft	indiaising nepresentativ	e, or Leadership FAC Spons
Mailing Address			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
acionated Assault Identify		Joint Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identify Full Name	by name, address (phone number – optional		Leadership PAC Spo
			Leadership PAC Spo
Full Name			Leadership PAC Spo
Full Name			Leadership PAC Spo
Full Name	by name, address (phone number – optional		
Full Name	by name, address (phone number – optional		
Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional CITY ies: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	by name, address (phone number – optional CITY ies: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main arms of Bank,	by name, address (phone number – optional CITY ies: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional CITY ies: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional CITY ies: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A