

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

TARGETED STATE VICTORY

ADDRESS (number and street) 310 1ST ST SE

(Check if address is changed)

WASHINGTON DC 20003
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

COMPLIANCE@CROSBYOTT.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 08 / 26 / 2022

3. FEC IDENTIFICATION NUMBER C C00823799

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 OTTENHOFF, BENJAMIN, , ,

Signature of Treasurer OTTENHOFF, BENJAMIN, , , [Electronically Filed] Date 08 / 26 / 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.

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 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 (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. REPUBLICAN PARTY OF ARIZONA, LLC

2. CALIFORNIA REPUBLICAN PARTY FEDERAL ACCT.

C C00008227

C C00140590

Write or Type Committee Name

TARGETED STATE VICTORY

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

NONE

Grid lines for organization name

Mailing Address

Grid lines for mailing address

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.

OTTENHOFF, BENJAMIN, , ,

Full Name

Grid lines for full name

Mailing Address

310 1ST ST SE

Grid lines for mailing address

WASHINGTON

DC

20003

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

TREASURER

Grid lines for title or position

Telephone number

202

670

8650

Grid lines for 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).

OTTENHOFF, BENJAMIN, , ,

Full Name of Treasurer

Grid lines for full name of treasurer

Mailing Address

310 1ST ST SE

Grid lines for mailing address

WASHINGTON

DC

20003

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

TREASURER

Grid lines for title or position

Telephone number

202

670

8650

Grid lines for telephone number

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

[Grid for Title or Position]

Telephone number

[Grid for 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.

CHAIN BRIDGE BANK, NA

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1: 1445-A LAUGHLIN AVE]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3: MCLEAN VA 22101]

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY ▲

STATE ▲

ZIP CODE ▲

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

5(g) or (h).

Joint Fundraising Participant:

1.	REPUBLICAN PARTY OF FLORIDA	FEC ID number	C C00099259
2.	GEORGIA REPUBLICAN PARTY INC.	FEC ID number	C C00150672
3.	NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE	FEC ID number	C C00136457
4.	NEVADA REPUBLICAN CENTRAL COMMITTEE	FEC ID number	C C00082925

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

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

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

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

5(g) or (h).

Joint Fundraising Participant:

- 1. NORTH CAROLINA REPUBLICAN PARTY
- 2. OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE
- 3. REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA
- 4. REPUBLICAN PARTY OF WISCONSIN

FEC ID number	C00038505
FEC ID number	C00162339
FEC ID number	C00044842
FEC ID number	C00074450

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

[Empty text input fields for organization name]

Mailing Address [Empty text input fields]

Relationship: CITY STATE ZIP CODE [Empty dropdowns and checkboxes for Connected Organization, Affiliated Committee, Joint Fundraising Representative, Leadership PAC Sponsor]

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

Full Name [Empty text input field]
Mailing Address [Empty text input fields]
TITLE OR POSITION CITY STATE ZIP CODE Telephone Number [Empty dropdowns and text input fields]

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. [Empty text input field]
Mailing Address [Empty text input fields]
CITY STATE ZIP CODE [Empty dropdowns]

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

FEC Form 1S (Revised 02/2017)

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

- 1. REPUBLICAN NATIONAL COMMITTEE
- 2.
- 3.
- 4.

- FEC ID number C C00003418
- FEC ID number C
- FEC ID number C
- FEC ID number C

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 _____-_____-_____

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 ▲