Only

STATEMENT OF

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FEC FORM 1		0	RGAN		ION	I											
												Offic	e Use	Only			
NAME OF COMMITTEE (ir	n full)		(Check if names shared)		Example over the	:If typin lines.	g, type		12I	7E4	M5		_				
Irene for Co	ongres	SS															
ADDRESS (number a	nd street)	PO Box	183								1 1						
(Check if a	address													· · · · · ·			
is changed	d)	Hudson						1	ı WI			54016	3				
		C	ITY 🛦					_	STAT	 E ▲	L			ZIP	COI	DE 🛦	
COMMITTEE'S E-MA	AIL ADDRE	SS															
(Check if a is changed		tcdatw	yler@gmail	.com													
		Optional	Second E-Ma	ail Address	;												
COMMITTEE'S WEB (Check if a is changed)	address	,	RL) nearmendarizja 	ckson.com													
2. DATE 1:	M / D 3		y y y 2021														
3. FEC IDENTIFIC	CATION N	UMBER)	C	C00714	4378												
4. IS THIS STATEM	MENT	NEW	(N) O	R	x	AMENI	DED (A	.)									
I certify that I have e	examined to	his Stateme	ent and to the	best of m	ny know	ledge a	nd belie	ef it is	true	corr	ect a	ınd c	ompl	ete.			
Type or Print Name	of Treasure	er Datwyle	r, Thomas, , ,														
Signature of Treasure	er <i>Datw</i>	yler, Thomas	,,,		[Elec	ctronicall	y Filed]	[Date	N	11 11	′	29	D /	Y	2022	YYY
NOTE: Submission of	false, erron		complete inform	-			_	_					enaltie	es of	52 L	J.S.C.	§30109
Office Use					Fede	further in eral Electi Free 800-	on Comr	mission					EC (Revi				

Local 202-694-1100

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	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 Armendariz-Jackson, Irene, , ,								
	Candidate Party Affiliation REP Office Sought: House Senate President	State TX District 16							
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	10							
Name of Candidate									
	Party Committee:								
	(d) This committee is a (National, State or subordinate) committee of the Republican, expension of the Committee of the Commi	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 Org	ganization							
	Membership Organization Trade Association Cooperati	ve							
	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)	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political							
	(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								
	1C								

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٧	Vrite or Type Committee Name	· · · · · · · · · · · · · · · · · · ·	. wgv -					
	Irene for Cong	ess						
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 Representation	esentative Leadership PAC Sponso					
7.	Custodian of Records: Iden books and records.	ify by name, address (phone number optional) and position of the p	person in possession of committee					
	Datwyler, ⁻	homas, , ,						
	Full Name							
	Mailing Address	PO Box 183						
		Hudson WI	54016					
		CITY ▲ STAT	E ▲ ZIP CODE ▲					
	Title or Position ▼							
	Treasurer	Telephone number	715 - 338 - 8544					
8.	Treasurer: List the name ar any designated agent (e.g.,	d address (phone number optional) of the treasurer of the commassistant treasurer).	mittee; and the name and address of					
	Full Name Datwyler,	homas, , ,						
	of Treasurer							
	Mailing Address	PO Box 183						
		Hudson W	/1 54016					
		CITY ▲ STAT	ZIP CODE ▲					
	Title or Position ▼							
	Treasurer	Telephone number	715 338 - 8544					

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Full Name of Designated Agent									
Mailing Address									
Title or Position ▼	CITY ▲ STAT	TE ▲ ZIP CODE ▲							
	Telephone number								
Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories in which the committee depositains funds.	posits funds, holds accounts, rents							
Name of Bank, Depository, e	etc.								
United	United Bank of El Paso								
Mailing Address	9801 Gateway West								
	El Paso TX	X 79925							
	CITY ▲ STAT	ZIP CODE ▲							
Name of Bank, Depository, e	etc.								
Mailing Address									
	CITY ▲ STAT	E ▲ ZIP CODE ▲							