Only

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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. Committee to Save the USA PO Box 183 ADDRESS (number and street) (Check if address is changed) Hudson 54016 WI 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) (Check if address is changed) DATE 2021 C00785220 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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] 07 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

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		OF COMMITTEE				
Car	ndidate	late Committee:				
(a)	Ш	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.)				
Nam Can	ne of didate					
	didate y Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
Nam Can	ne of didate					
Par	ty Con	nmittee:				
(d)			Democratic, Republican, etc.) Party.			
Poli	itical 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.	oosporavo			
(f)		_	areasted fund or porty			
(f) This committee supports/opposes more than one Federal candidate, and is I committee. (i.e., nonconnected committee)			gregated lund 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	nt 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 tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
	Com	Committees Participating in Joint Fundraiser				
	1.	Ashtabula County Republican Party - Federal Account FEC ID number C C007	'85212			
	2.	CITIZENS FOR JOSH MANDEL, INC. FEC ID number C C004	94930			
	3.	FEC ID number				
	4.					

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Write or Type Committee N	Name	
Committee to	Save the USA	
. Name of Any Connecte	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA	AC Sponsor
NONE		1 1 1 1 1
	<u> </u>	<u> </u>
Mailing Address		
]-[
	CITY STATE ZIP C	:ODE
Relationship: Conne	nected Organization Affiliated Committee Joint Fundraising Representative Leadersh	ip PAC Sponso
	·	
Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of the person in possessic	on of committe
Datwy Full Name	yyler, Thomas, , ,	·
Mailing Address	PO Box 183	
	Hudson WI 54016	
Title or Position	CITY STATE ZIP C	ODE
Treasurer	Telephone number 715 - 338	_ 8544
Treasurer: List the name any designated agent (e.	ne and address (phone number optional) of the treasurer of the committee; and the name an e.g., assistant treasurer).	d address of
any designated agent (e.	ne and address (phone number optional) of the treasurer of the committee; and the name an e.g., assistant treasurer). yler, Thomas, , ,	d address of
any designated agent (e.	e.g., assistant treasurer).	d address of
any designated agent (e. Full Name Datwy of Treasurer	e.g., assistant treasurer). yler, Thomas, , ,	d address of
any designated agent (e. Full Name Datwy of Treasurer	e.g., assistant treasurer). yler, Thomas, , ,	d address of
any designated agent (e. Full Name Datwy of Treasurer	e.g., assistant treasurer). yler, Thomas, , , PO Box 183	-

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Full Name of Designated Agent							
Mailing Address							
	CITY STATE ZI	P CODE					
Title or Position	Telephone number						
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							
Mailing Address	1445A Laughlin Avenue						
	McLean VA 22101						
	CITY STATE Z	IP CODE					
Name of Bank, Depository,	etc.						
Mailing Address							
	CITY STATE Z	IP CODE					