

**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

REACH TO ACHIEVE

ADDRESS (number and street)

PO BOX 9891

☐ (Check if address is changed)

ARLINGTON

CITY ▲

VA

STATE ▲

22219

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

BEN@CROSBYOTT.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2017

3. FEC IDENTIFICATION NUMBER ►

C C00637348

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

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2017

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  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

1.  FEC ID number

2.  FEC ID number

3.  FEC ID number

4.  FEC ID number

Write or Type Committee Name

REACH TO ACHIEVE

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ 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.

Full Name

OTTENHOFF, BENJAMIN, , ,

Mailing Address

PO BOX 9891

ARLINGTON

VA

22219

Title or Position

CITY

STATE

ZIP CODE

TREASURER

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).

Full Name  
of Treasurer

OTTENHOFF, BENJAMIN, , ,

Mailing Address

PO BOX 9891

ARLINGTON

VA

22219

Title or Position  
TREASURER

CITY

STATE

ZIP CODE

Telephone number

Full Name of  
Designated  
Agent

Mailing Address

Title or Position

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.

PINNACLE BANK

Mailing Address

150 THIRD AVE SOUTH

STE 900

NASHVILLE

TN

37201

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F1N

Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule:

Transaction ID: