FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. OUR FREEDOM, OUR FUTURE 2140 S. Dupont Highway ADDRESS (number and street) (Check if address is changed) Camden 19934 DE CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address tcdatwyler@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00693713 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. Type or Print Name of Treasurer Datwyler, Thomas, , Date 06 02 2025 Signature of Treasurer Datwyler, Thomas, , , 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2				
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 Office House Senate President	State				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate					
Party Committee:					
(d) This committee is a	ocratic, blican, etc.) Party				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected organization is a:				
Corporation Corporation w/o Capital Stock La	abor Organization				
Membership Organization Trade Association Co	ooperative				
In addition, this committee is a Lobbyist/Registrant PAC.					
(f) X 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 (Hybridian Committee)	orid 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 committees/organizations, at least one of which is an authorized committee of a federal candidate	· ·				
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					
C					

-	FEC Form 1 (Revised 0	2/2009)	Page 3
٧	Vrite or Type Committee Name	_	
	OUR FREEDOM		
6.	-	ganization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
	NONE		
	Mailing Address		
		CITY ▲ STA	TE ▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Rep	resentative Leadership PAC Sponso
7.	Custodian of Records: Identifution books and records.	y by name, address (phone number optional) and position of the	person in possession of committee
	Datwyler, T	nomas, , ,	
	Mailing Address	PO Box 183	
		Hudson	T 54016
		CITY ▲ STA	TE ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	715 - 338 - 8544
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the comssistant treasurer).	mittee; and the name and address of
	Full Name Datwyler, T	nomas, , ,	
	Mailing Address	PO Box 183	
		Hudson	VI 54016
		CITY ▲ STA	TE ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	715 - 338 - 8544

Full Name of Dasignated Agent Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Telephone number Telep	FEC Form 1	(Revised 02/2009)	Page 4
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Telephone number	Designated		
Title or Position ▼ 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. BANK OF HAWAII	Mailing Address		
Title or Position ▼ 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. BANK OF HAWAII			
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Name of Bank, Depository, etc. BANK OF HAWAII Mailing Address 91-590 FARRINGTON HIGHWAY CITY ▲ STATE ▲ ZIP CODE ▲ Name of Bank, Depository, etc. First Resource Bank Mailing Address 1946 Washington Ave S Stillwater	Title or Position		
Mailing Address 91-590 FARRINGTON HIGHWAY	Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, hold xes or maintains funds.	ls accounts, rents
Mailing Address 91-590 FARRINGTON HIGHWAY KAPOLEI CITY ▲ STATE ▲ ZIP CODE ▲ Name of Bank, Depository, etc. First Resource Bank Mailing Address 1946 Washington Ave S Stillwater MN 555082	Name of Bank, D	Depository, etc.	
Name of Bank, Depository, etc. First Resource Bank Mailing Address 1946 Washington Ave S Stillwater MN 555082	Mailing Address		
Name of Bank, Depository, etc. First Resource Bank Mailing Address Stillwater MN 55082			ZIP CODE A
Mailing Address 1946 Washington Ave S Stillwater MN 55082	Name of Bank, D		
Stillwater MN 55082		First Resource Bank	
	Mailing Address	1946 Washington Ave S	
CITY ▲ STATE ▲ ZIP CODE ▲		Stillwater MN 55082	
		CITY ▲ STATE ▲	ZIP CODE ▲