Only

STATEMENT OF

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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. Nehls for Congress 15500 VOSS RD ADDRESS (number and street) **STE 518** (Check if address is changed) SUGAR LAND 77498 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) www.nehlsforcongress.com (Check if address is changed) DATE 2023 C00730150 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. 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 information below.)	e candidate
Name of Candidate NEHLS, TROY, , ,	
Candidate Party Affiliation REP Office Sought: House Senate President	State TX District 22
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Diotriot EE
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republican,	•
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connecte	d organization is a:
Corporation Corporation w/o Capital Stock Labor O	rganization
Membership Organization Trade Association Coopera	itive
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)	d 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 PA	AC).
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 o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
Committees Participating in Joint Fundraiser	
1	

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VV	Nehls for Congre	28	
 S.		ganization, Affiliated Committee, Joint Fundraising Representative, or Leadersl	nip PAC Sponsor
	TAKE BACK THE HO		
	Mailing Address	PO BOX 30844	
		BETHESDA MD 20824-08	844
		CITY ▲ STATE ▲	ZIP CODE ▲
	Dalatianahin. Canacatad		
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative L	eadership PAC Sponso
7.	Custodian of Records: Identi books and records.	y by name, address (phone number optional) and position of the person in possession	on of committee
	books and records.		
	Datwyler, T	nomas, , ,	
	Full Name	DO Doy 493	
	Mailing Address	PO Box 183	
		Hudson	.
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	•	. 745	338 9544
	Treasurer	Telephone number	338 - 8544
3.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the nai ssistant treasurer).	me and address of
	Full Name Datwyler, T	nomas, , ,	
	of Treasurer	70 P. 400	
	Mailing Address	PO Box 183	
		Hudson WI 54016	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		338 - 8544

Full Name of Designated 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 ▼	Mailing Address		
Title or Position ▼			
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. Chain Bridge Bank Mailing Address 1445A Laughlin Avenue CITY A STATE A ZIP CODE A Name of Bank, Depository, etc. First Resource Bank Mailing Address 1946 Washington Ave S			ZIP CODE ▲
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 Indicean CITY A STATE A ZIP CODE A Name of Bank, Depository, etc. First Resource Bank Mailing Address Indicean STATE A STATE A	Title or Position ▼	,	
Name of Bank, Depository, etc. Chain Bridge Bank Mailing Address Chain Bridge Bank McLean CITY ▲ STATE ▲ ZIP CODE ▲ Name of Bank, Depository, etc. First Resource Bank Mailing Address 1946 Washington Ave S Stillwater			
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Name of Bank, Depository, etc. First Resource Bank Mailing Address 1946 Washington Ave S Stillwater MN 55082 —		Chain Bridge Bank	
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Mailing Address 1946 Washington Ave S		CITY ▲ STATE ▲	ZIP CODE ▲
Mailing Address 1946 Washington Ave S Stillwater MN 55082	Name of Bank, D	epository, etc.	
Stillwater MN 55082		First Resource Bank	
	Mailing Address	1946 Washington Ave S	
CITY ▲ STATE ▲ ZIP CODE ▲		Stillwater 55082	
		CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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2. FEC ID number C 3. FEC ID number C			Participant:				
A. STATE ▲ Title OR POSITION ▼ CITY ▲ STATE ▲ Telephone Number CITY ▲ STATE ▲ Telephone Number CITY ▲ STATE ▲ Telephone Number Title OR Positories: List all banks or other depositories in which the committee deposits further address funds. James of Bank, Pepository, etc.	1.				FEC ID	number	C
A. FEC ID number C	2.	<u> </u>			FEC ID	number	C
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
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Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	HUDSON		1	WI	54016
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