Image# 202406219652476548				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ	-		
		Franklauf turing turing		Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
SAVE URBAN MIS	SOURI VICTORY	' FUND		
	PO BOX 183			
ADDRESS (number and street)				
 (Check if address is changed) 				
			WI 54	4016
	CITY ▲		STATE ▲	ZIP CODE▲
OMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)				
is changed)	Optional Second E-Mail Ad			
	TCDATWYLER@GMAIL.COM			
COMMITTEE'S WEB PAGE AD				
	D / Y Y Y Y 2024			
. FEC IDENTIFICATION N	UMBER ► C C	00881664		
. IS THIS STATEMENT	K NEW (N) OR	AMENDED (A)		
certify that I have examined t	his Statement and to the best	of my knowledge and belie	f it is true, correct an	d complete.
ype or Print Name of Treasure	Pr DATWYLER, THOMAS, , ,			
ignature of Treasurer DAT	WYLER, THOMAS, , ,		Date 06	/ D D / Y Y Y Y 21 2024
OTE: Submission of false, error	eous, or incomplete information ANY CHANGE IN INFORMA	may subject the person signin TION SHOULD BE REPORTI	-	e penalties of 52 U.S.C. §3010
Office Use Only		For further information Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100	ission	FEC FORM 1 (Revised 06/2012)

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5. 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 Party Affiliation Sought: House Senate Preside	State				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate					
Party Committee: (National, State (De	emocratic,				
(d) This committee is a	publican, 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 Organization				
Membership Organization Trade Association	Cooperative				
In addition, this committee is a Lobbyist/Registrant PAC.					
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated 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) X 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 (H	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 more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (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
 2.

•	EEC Earm 1 (Pavisad 0	2/2000)							Paga 2
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v	Vrite or Type Committee Name								
	SAVE URBAN M	IISSOU	RI VI	СТО	RY F	UND			
6.	Name of Any Connected Or	rganization, A	Affiliated	Commi	ittee, Joir	nt Fundraisi	ing Representative,	or Leadership	PAC Sponsor
	Mailing Address								
				CITY	A		STATE 🔺	ZIF	CODE ▲
	Relationship: Connected	Organization	Affilia	ated Orga	anization	Joint F	undraising Represental	ive Lead	dership PAC Spons

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

DATWYLE	R, THOMAS, , ,
Full Name	
Mailing Address	502 6TH STREET
	HUDSON
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
	Telephone number 202 - 866 - 8229

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	DATWYLER, THOMAS, , ,		
Mailing Address	502 6TH STREET		
		WI 54016	
	CITY 🔺	STATE A	ZIP CODE
Title or Position	•		
		Telephone number	866 8229

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Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A	ZIP CODE
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.

Mailing Address	1445A LAUGHLIN AVE		
		VA	22101
	CITY ▲	STATE 🔺	ZIP CODE
Name of Bank, [epository, etc.		
Mailing Address			
	CITY 🔺	STATE 🔺	ZIP CODE