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STATEMENT OF ORGANIZATION

FORM 1		UKGANIZ/	ATION		
					Office Use Only
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
		<u> </u>			
ADDRESS (number a	nd street)	621 E 9th St			
(Check if a is changed					
		Des Moines CITY ▲		LIA 50 STATE ▲	0309 [] ZIP CODE▲
COMMITTEE'S E-MA	AIL ADDRES	S			
(Check if a is changed		tcdatwyler@gmail.com			
		Optional Second E-Mail Add	dress		1
COMMITTEE'S WEB	address	https://www.iowagop.org/			
2. DATE 08		D / Y Y Y Y 2024			
3. FEC IDENTIFIC	CATION NU	MBER ► C co	00014498		
4. IS THIS STATEM	MENT	NEW (N) OR	X AMENDED (A)		
I certify that I have e	examined thi	s Statement and to the best	of my knowledge and belief	it is true, correct ar	nd complete.
Type or Print Name	of Treasurer	Barker, David, , ,			
Signature of Treasure	er Barke	r, David, , ,		Date 08	/ D D / Y Y Y Y 20 2024
NOTE: Submission of	false, errone		may subject the person signing		e penalties of 52 U.S.C. §30109
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	contact:	FEC FORM 1 (Revised 06/2012)

FEC Form	1 (Revised 03/2022)	Page 2
5. TYPE	OF COMMITTEE:	
Candi	idate 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 th information below.)	le candidate
Name Cand	e of didate	
	didate Office President	State
Party	y Affiliation Sought: House Senate President	District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	me of ndidate	
Party ^(d) ×	Committee: (National, State REP (Democratic Republican, State) This committee is a STA or subordinate) committee of the REP Republican, State	c, , etc.) Party
Politic	cal Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
	Corporation Corporation w/o Capital Stock	Organization
	Membership Organization Trade Association Coopera	ative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate 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 P/	4C).
	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.

Relationship:

ļ			
	FEC Form 1 (Revised 02)2/2009)	Page 3
W	Vrite or Type Committee Name	1	
	REPUBLICAN P	PARTY OF IOWA	
6.	Name of Any Connected O	organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
	Republican National (
	Mailing Address	310 1st St SE	
		Washington DC 20003-1885	5
		CITY A STATE A ZI	P CODE 🔺

Connected Organization X Affiliated Organization 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.

Olsen, Cha	ıd, , ,			
Full Name				
Mailing Address	621 E 9th St			
	Des Moines			50309
		CITY 🔺	STATE 🔺	ZIP CODE
Title or Position ▼				
Custodian of Records			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	Barker, David, , ,
Mailing Address	621 E 9th St
	Des Moines IA 50309
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image: Telephone number 715 338 8544

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent	Datwyler, Thomas, , ,	
Mailing Address	PO Box 183	
	Hudson WI 54016	
		P CODE ▲
Title or Position	•	
Assistant Treasur	rer 715 _ 338	8 8544

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.

Chai	n Bridge Bank			
Mailing Address	1445-A Laughlin Ave			
	Mclean		VA 22101	
	CIT	TY 🔺	STATE A	ZIP CODE ▲
Name of Bank, Deposito				
Wells	s Fargo			
Mailing Address	450 Montgomery St			
	San Francisco		CA 94104	
	CIJ	TY 🔺	STATE ▲	ZIP CODE ▲

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

1) or (h).	Joint Fundraisin	g Participant:			
2.	1.			FEC I	D number	С
4. FEC ID number C PEC ID number Mailing Address 228 S Washington St Mailing Address Ste 115 Mailing Address Ste 115 Connected Organization Affiliated Committee VA 22314-5404 Mailing Address CiTY ▲ State A ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number – optional) E Full Name	2.			FEC I	D number	С
**	3.			FEC I	D number	С
NRSC Targeted State Victory Committee Mailing Address 228 S Washington St Ste 115	4.			FEC I	D number	С
NRSC Targeted State Victory Committee Mailing Address 228 S Washington St Ste 115						
Mailing Address 228 SWashington St Site 115				draising Re	presentativ	e, or Leadership PAC Sponsor
Mailing Address Site 115 Alexandria Alexandria Alexandria CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ TITLE OR POSITION ▼						
Mailing Address Site 115 Alexandria Alexandria Alexandria CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ TITLE OR POSITION ▼						
Alexandria Alexandria Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Telephone Number Mailing Address Mailing Address 1909 K St NW	1	Mailing Address	228 S Washington St			
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso Designated Agent: Identify by name, address (phone number – optional) Full Name			Ste 115			<u> </u>
Connected Organization Affiliated Committee ✓ Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number – optional) Full Name			Alexandria		VA	22314-5404
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address ITTLE OR POSITION CITY ▲ STATE ▲ ZIP CODE ▲ ITTLE OR POSITION Eanks 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, BB&T Depository, etc. 1909 K St NW Mailing Address 1909 K St NW	F	Relationship:	CITY A		STATE 🔺	ZIP CODE
Mailing Address						
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safety deposit boxes or maintains funds. Name of Bank, BB&T Depository, etc. 1909 K St NW 1909 K St NW	Fu Ma	nated Agent: Identify				· · · · · · · · · · · · · · · · · · ·
Name of Bank, Depository, etc. BB&T Mailing Address 1909 K St NW Image: Imag	Fu Ma	nated Agent: Identify				
Depository, etc. 1909 K St NW Mailing Address 1909 K St NW	Fu Ma TI 	nated Agent: Identify II Name ailing Address ITLE OR POSITION		-	Number	
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CITY

STATE **A**

ZIP CODE

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5(g) or (h).	Joint Fundraising	Participant:			
1			FEC I	D number	С
2	2.		FEC I	D number	С
3	3.		FEC	D number	С
4	1		FEC I	D number	С
		rganization, Affiliated Committee, AN SENATORIAL COMMITTEE		presentative	e, or Leadership PAC Sponsor
	Mailing Address	425 2nd St NE			
		Washington	1		20002-4914
	Relationship:	CITY A		STATE A	
	Connected	Drganization × Affiliated Committee	Joint Fundraisir	ng Representa	ative Leadership PAC Sponsor
8. Desi	gnated Agent: Identify I	by name, address (phone number –	optional)		
F	Full Name				
	Full Name				
		<u> </u>			
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Ν					
N 	Mailing Address			Number	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	_	reiepno	ne Number			
		<pre></pre>	Telephon			CITY ▲ STATE ▲ ZIP C

CITY

STATE **A**

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or(h).		g Participant:				
1.				FEC	ID number	C
2.				FEC	ID number	С
з. [FEC	ID number	С
4. [FEC	ID number	С
Name	of Any Connected	Organization, Aff	iliated Committee, Join	t Fundraising F	Representativ	e, or Leadership PAC Sponsor
Erns	st Victory Iowa					
N	lailing Address	PO Box 93441				
		Des Moines				50393-3441
F	Relationship:		CITY 🔺		STATE 🔺	ZIP CODE
Design	ated Agent: Identify	by name addres	s (phone number – opti	onal)		
		by name, addres	s (phone number – opti	onal)		
Full	ated Agent: Identify I Name	by name, addres	s (phone number – opti	onal)		
Full	I Name	by name, addres	s (phone number – opti	onal)		
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4.				FEC ID	number	С			
lame of Any Connected (Organization, Af	filiated Committee,	Joint Fundrais	sing Repre	esentative	, or Le	adershij	D PAC S	ponso
Hawkeye Fund									
Mailing Address	PO Box 156								
	Des Moines				IA	50	301-015	6 _	
	200								
Relationship:		CITY A		:	STATE 🔺		ZIF	, CODE	
Connected Designated Agent: Identify	Organization	Affiliated Committee	_			itive		P CODE	
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2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponsor
The Founders Com	nittee		
	1305 W 11th St		
Mailing Address			
	# 213		
			77008-6501
Relationship:		STATE A	ZIP CODE
Designated Agent: Ident	ed Organization Affiliated Committee X Joir	nt Fundraising Represent	ative Leadership PAC Spons
		t Fundraising Represent	
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Designated Agent: Ident	ify by name, address (phone number – optional)		

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(g) or (h).	Joint Fundraising	g Participant:				
1.				FEC	ID number	С
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4.				FEC	ID number	С
	-	-	iated Committee, Joir	nt Fundraising I	Representativ	e, or Leadership PAC Sponsor
Ern	st Victory Team lo	wa				
Ν	Mailing Address	PO Box 93441				
	C					
		Des Moines				50393-3441
F	Relationship:		CITY A		STATE	
	Connected	Organization	Affiliated Committee	× Joint Fundrai	sina Represent	ative Leadership PAC Sponso
Design	nated Agent: Identify	by name, address	; (phone number – opti	ional)		
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=EC	Form	1S	(Revised	02/2017)
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1.		FEC	ID number	С		
2.		FEC	ID number	С		
3.		FEC	ID number	С		
4.		FEC	ID number	С		
Name of Any Connected	Organization, Affiliated Committee, J e 2022	loint Fundraising Re	epresentative	e, or Leader	ship PAC S	Sponsor
Mailing Address	PO Box 30844					
	Bethesda	1	MD	20824-	0844	1 1 1
Relationship:	CITY A		STATE A		ZIP CODE	
Connecto	d Organization X Affiliated Committee	Joint Fundraisi	na Poproconto		eadership PA	C Spon
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		g Participant:				
1.				FE	C ID number	С
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4.				FE	C ID number	С
Name o	of Any Connected	Organization, Affilia	ated Committee, Joint	Fundraising	Representativ	e, or Leadership PAC Sponsor
Feer	nstra Victory Fund	l 				
М	lailing Address	641 2nd Street				
		Hull				51239
R	elationship:		CITY A		STATE	
	Connected	Organization	Affiliated Committee		ising Represent	ative Leadership PAC Spons
j	aleu Agent. Identity	by name, address	(phone number – optio	nal)		
			(phone number – optic	nal)		
Full			(phone number – optic	nal)		
Full	Name		(phone number — optic	nal)		
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i(g) or (h).	Joint Fundraising	Participant:		
1.	. [FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
S. Name	e of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representativ	e, or Leadership PAC Sponsor
M		DRY FUND		
	Mailing Address	PO BOX 183		
				54016
	Relationship:		STATE A	
	Connected	Drganization Affiliated Committee X Joint Fu	undraising Represent	ative Leadership PAC Sponso
F	ull Name			
N	lailing Address			
	TITLE OR POSITION	CITY A	STATE	ZIP CODE
L		Tele	phone Number	
	s or Other Depositorie y deposit boxes or main	es: List all banks or other depositories in which the tains funds.	e committee deposi	ts funds, holds accounts, rents
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	901 N Washingto	on St, Ste 700						
	Alexandria				VA	22314	_	
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(g) or (h).	Joint Fundraising	Participant:				
1.				FEC	ID number	С
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3.				FEC	ID number	С
4.				FEC	ID number	С
			ted Committee, Joint	Fundraising	Representativ	e, or Leadership PAC Sponsor
	NI'S ROAST AND					
	Mailing Address	PO BOX 93441				
		DES MOINES			IA	50393
	Relationship:		CITY A		STATE 🔺	ZIP CODE
	Connected	Organization A	ffiliated Committee	 Joint Fundrai 	sing Represent	ative Leadership PAC Sponsor
. Desig	nated Agent: Identify	by name, address (phone number – optio	nal)		
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2.								FEC	ID r	number	С)					
3.								FEC	ID r	number	С						1
4.							_	FEC	ID r	number	С						7
											_						_
Name of <i>I</i>	Any Connected (Organization	, Affiliate	ed Com	mittee, 、	loint F	undra	ising F	Repre	esentativ	ve, c	or Lea	aders	hip F	PAC S	spon	ISO
PROTE	ECT THE HOUS	SE 2024		1 1		1 1								I		1	
Maili	ng Address	PO Box 30)844														
		Bethesda										20	824	I	-	I	
									ç				-		ODE		
	tionship: Connected d Agent: Identify	Organization	-		ommittee	_		Fundrais		Represer	ntative	e		aders			pc
	Connected	_	-	filiated Co	ommittee	_					ntative	e					po
Designate Full Na	Connected	_	-	filiated Co	ommittee	_		Fundrais				e [po
Designate Full Na	Connected	_	-	filiated Co	ommittee	_						e					po
Designate Full Na	Connected	_	-	filiated Co	ommittee	_						e					
Designate Full Na Mailing	Connected	by name, ac	-	filiated Co		_		-undrais	sing F			e				AC S	
Designate Full Na Mailing	Connected	by name, ac	-	hone nu		_	I)		ST	Represer		e		aders		AC S	

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5(g) or ((h). Joint Fundraising	Participant:	
	1.		FEC ID number
	2.		FEC ID number
	3.		FEC ID number
	4.		FEC ID number
6. N	Name of Any Connected C	Drganization, Affiliated Committee, Joint Fund	aising Representative, or Leadership PAC Sponsor
		ΓΥ 	
	Mailing Address	228 S. Washington Street	
		Ste. 115	
		Alexandria	VA 22314 –
	Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Join	EFundraising Representative Leadership PAC Sponsor
8. D	Designated Agent: Identify	by name, address (phone number - optional)	
	Full Name		
	Full Name		
		<u> </u>	
	Mailing Address		
		•	
_	Mailing Address	•	
9. B	Mailing Address	ies: List all banks or other depositories in which	
s	Mailing Address	ies: List all banks or other depositories in which	elephone Number
s	Mailing Address TITLE OR POSITION TITLE OR POSITION Composite of Bank,	ies: List all banks or other depositories in which	elephone Number
s	Mailing Address TITLE OR POSITION Banks or Other Depositori afety deposit boxes or main ame of Bank, Depository, etc.	ies: List all banks or other depositories in which	elephone Number
s	Mailing Address TITLE OR POSITION Banks or Other Depositori afety deposit boxes or main ame of Bank, Depository, etc.	ies: List all banks or other depositories in which	elephone Number

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

ZIP CODE

5(g)	or (h). Joint Fundraising	y Participant:					
	1.			FEC ID	number	С	
	2.			FEC ID	number	С	
	3.			FEC ID	number	С	
	4.			FEC ID	number	C	
6.	Name of Any Connected of NRSC VICTORY	Organization, Aff	iliated Committee, Joint F	Fundraising Rep	resentative	e, or Leadership PAC Sponsor	r L
	Mailing Address	228 S WASHIN	IGTON ST				
	Deletionshin						
	Relationship:	_	CITY A		STATE 🔺	ZIP CODE	
8.	Designated Agent: Identify	by name, addres	ss (phone number – optiona	al)			
	Mailing Address						
	Mailing Address						
	Mailing Address						
	Mailing Address			Telephone Nu			
9.		ies: List all banks		Telephone Nu	umber	ZIP CODE ▲	
9.	TITLE OR POSITION	ies: List all banks	s or other depositories in w	Telephone Nu	umber		

STATE 🔺

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1 2 3					
			FEC	ID number	С
2			FEC	ID number	С
3.			FEC	ID number	С
4.			FEC	ID number	C
Name of Any Connected	Organization, Affil	ated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Sponsor
	TEE 				
Mailing Address	P.O. BOX 509				
Ŭ					
	ARLINGTON		1		22216
Relationship:					
Connecto	d Organization	Affiliated Committee	Joint Fundraisi	a Poprocont	ative
1					
Full Name					
Full Name					
Mailing Address		· · · · · · · · · · · · · · · · · · ·			<pre></pre>
Mailing Address		CITY	Telephone		

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) or (h).	Joint Fundraising	Participant:							
1.					FEC ID numb	er C			
2.					FEC ID numb	er C			
3.					FEC ID numb	er C			
4.					FEC ID numb	er C			
Name	of Any Connected C	Drganization, Affilia	ted Committee, Join	nt Fundraisi	ng Represent	ative, or	Leadershi	p PAC Sp	oonsor
IOV		D 2024							
1	Mailing Address	320 FIRST STREE	ET SE						<u> </u>
		WASHINGTON				;	20003	-	
F	Relationship:		CITY A	· · · · · ·	STATI		ZIF	P CODE	
Desigr	nated Agent: Identify	by name, address	íphone number – opti	onal)					
		by name, address	íphone number – opti	onal)					
Fu	II Name	by name, address	(phone number – opti	onal)					
Fu		by name, address	'phone number – opti	onal)					
Fu	II Name	by name, address ('phone number – opti	onal)				· · · ·	
Fu Ma	II Name		(phone number – opti	onal)				└	
Fu Ma	II Name				STATE				
Fu Ma Ti Banks safety Name Deposi	II Name			Telepl	none Number				<pre></pre>
Fu Ma Ti Banks safety Name Deposi	II Name			Telepl	none Number				rents
Fu Ma Ti Banks safety Name Deposi	II Name			Telepl	none Number		ds, holds a		rents