FEC

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Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Friends of Dave Joyce 9856 Archer Ln ADDRESS (number and street) (Check if address is changed) Dublin 43017-8914 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS natalie@nkbaurassociates.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.joyceforcongress.com (Check if address is changed) DATE 2018 C00527457 FEC IDENTIFICATION NUMBER > 3. 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. Baur, Natalie, , , Type or Print Name of Treasurer Baur, Natalie, , , [Electronically Filed] 12 06 2019 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	550 5	4 (7)	5 0
		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Con information below.)	nplete the candidate
Nam Cand	e of didate	Joyce, David, P., ,	
	didate / Affiliati	on Office Sought: House Senate President	State OH District 14
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction 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	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 scommittee. (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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	4.		

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Write or Type Committee Na		, ago c
Friends of Day		
	d Organization, Affiliated Committee, Joint Fundraising Represental	tive, or Leadership PAC Sponsor
Joyce Victory Comm		
Joyce victory Comm		
Mailing Address	228 W. Washington St. #115	
	Alexandria VA	22314-
	CITY STATI	E ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee James Joint Fundraising Repres	sentative Leadership PAC Sponsor
Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of th	ne person in possession of committee
	latalie, , ,	
Full Name	9856 Archer Lane	
Mailing Address		
	Dublin , OH	, 43017-8914
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		614 - 563 - 1583
Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the commit., assistant treasurer).	ttee; and the name and address of
	atalie, , ,	
of Treasurer	19856 Archer Lane	
Mailing Address		
	Dublin OH	
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Agent	aur, Natalie, , ,	
Mailing Address	9856 Archer Lane	
	Dublin OH 43017-8914 CITY STATE ZIP	- CODE
Title or Position Treasurer		
safety deposit boxes Name of Bank, Dep		counts, rents
F	ifth Third	
Mailing Address		
	CITY STATE ZIP	CODE
Name of Bank, Dep	ository, etc.	
Mailing Address	1909 K St NW	
	Washington DC 20006	
	CITY STATE ZIP	CODE

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

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5(a)	or(h). Joint Fundraisi n	o Participant:		
· (9)	1.	<u> </u>	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4			
6.		Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
	Take Back the Ho	ouse 2020		
	Mailing Address	PO Box 30844		
		1		
		Bethesda	MD	20824-0844
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
			1 1 . 1	1 1_1 1
		CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•	1	
		le	lephone Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which taintains funds.	the committee deposit	s funds, holds accounts, rents
		2234 W. Broad Street		
	Mailing Address			
		Athens	OH	30606
		CITY A	STATE ▲	ZIP CODE ▲

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

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g) or (h). Joint Fundraisi	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected Problem Solvers	I Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	824 S Milledge Ave		
	Athens	ı GA ı	30605-1332
Relationship:	CITY A	STATE A	ZIP CODE ▲
		Fundraising Representa	
Designated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional)		
	1		
			1
TITLE OD DOCITION	CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	I	ephone Number	
safety deposit boxes or m	pries: List all banks or other depositories in which the laintains funds. Third Bank 6280 Perimeter Loop	ne committee deposit	s funds, holds accounts, rents
Name of Bank, Fifth 7 Depository, etc.	aintains funds. Third Bank	ne committee deposit	s funds, holds accounts, rents

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

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(h). Joint Fundraisi r	g Participant:			
1.		FEC ID nur	mber C	
2.		FEC ID nur	mber C	
3.		FEC ID nur	mber C	
4.		FEC ID nur	mber C	
ame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Represe	entative, or Leadership F	PAC Spon
Mailing Address				
Relationship:	CITY ▲	STA	ATE ▲ ZIP C	ODE 🛦
Connecte	d Organization Affiliated Committee	Joint Fundraising Rep	presentative Leaders	nip PAC S _l
	Affiliated Committee y by name, address (phone number – option		presentative Leaders	nip PAC Sp
esignated Agent: Identif			Diresentative Leaders	nip PAC Sp
esignated Agent: Identif			Diresentative Leaders	nip PAC S
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optio	nal)		
esignated Agent: Identif	y by name, address (phone number – optio	nal)	E A ZIP CC	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and the state of Bank, Key Banks, Ke	y by name, address (phone number – option of the control of the co	snal) STAT Telephone Number	ZIP CC	-
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and the state of Bank, Key Banks, Ke	y by name, address (phone number – option of the control of the co	snal) STAT Telephone Number	ZIP CC	-
Full Name Mailing Address TITLE OR POSITION Janks or Other Depositor defety deposit boxes or mail depository, etc. Key Barry	y by name, address (phone number – option of the control of the co	snal) STAT Telephone Number	ZIP CC	DDE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Depositor defety deposit boxes or mail depository, etc. Key Barry	y by name, address (phone number – option of the control of the co	STAT Telephone Number	ZIP CC	-