PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) The Committee to Elect Syed Hasan PO Box 7289 ADDRESS (number and street) (Check if address is changed) Lowell 01852 MA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS tcdatwyler@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00832212 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. Datwyler, Thomas, , , Type or Print Name of Treasurer Datwyler, Thomas, , , [Electronically Filed] 01 2023 Signature of Treasurer Date 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

Toll Free 800-424-9530 Only

Local 202-694-1100

(Revised 06/2012)

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TYPE OF COMMITTEE:				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information below.)				
This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate Hasan, Syed, , ,				
Candidate Party Affiliation REP Office Sought: House Senate President	State MA District 03			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the Republicar	tic, n, etc.) Party			
Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a:			
Corporation Corporation w/o Capital Stock Labor	Organization			
Membership Organization Trade Association Cooper	_			
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 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 (Hybrid F	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political			
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				
1 C				

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٧	Vrite or Type Committee Name	(El (O III				
_	The Committee to Elect Syed Hasan					
6.	Name of Any Connected O NONE	rganization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor			
	Mailing Address					
		I				
		CITY ▲ STATE ▲	ZIP CODE ▲			
	🗖					
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	e Leadership PAC Sponso			
	Custodian of Passada Ident	if the name address (phone number antional) and position of the name in	passassian of committee			
7.	 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. 					
	Datwyler, T	homas, , ,				
	Full Name					
	Mailing Address	PO Box 183				
		Hudson WI	54016			
		CITY ▲ STATE ▲	ZIP CODE ▲			
	Title or Position ▼	SINIE -	ZII CODE =			
	Treasurer	715	338 8544			
		Telepriorie flumber				
8.	8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and addres any designated agent (e.g., assistant treasurer).					
	Full Name Datwyler, T	homas, , ,				
	of Treasurer					
	Mailing Address	PO Box 183				
		Hudson WI	54016			
	Till and Boots	CITY ▲ STATE ▲	ZIP CODE ▲			
	Title or Position ▼					
	Treasurer	715	- 338 - 8544			

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Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲			
	Tele	phone number	- - - -			
Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories in which the tains funds.	e committee deposits funds,	holds accounts, rents			
Name of Bank, Depository, e	etc.					
Chain Bridge Bank						
Mailing Address	1445A Laughlin Avenue					
	McLean	VA22	2101			
	CITY A	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY A	STATE ▲	ZIP CODE ▲			