## 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. America Strong PO Box 9891 ADDRESS (number and street) (Check if address is changed) Arlington 22219 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance@crosbyott.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00806364 FEC IDENTIFICATION NUMBER > 3. X 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. Ottenhoff, Benjamin, , , Type or Print Name of Treasurer Ottenhoff, Benjamin, , , [Electronically Filed] 02 23 2022 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 Only

Local 202-694-1100

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		OMMITTEE	
Cai	ndidate	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. (Com information below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	ty Con	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se	gregated 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.)	
Joir	nt Fund	raising Representative:	
(g)	×	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.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	BICE FOR CONGRESS FEC ID number C C00	703843
	2.	JERRY CARL FOR CONGRESS FEC ID number C C006	697789
	3.	FALLON FOR CONGRESS FEC ID number C C007	750307
	4.	SCOTT FRANKLIN FOR CONGRESS       FEC ID number C C007	42247

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Write or Type Committee	Name	
America Stro	ong	
6. Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundraising Represe	entative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY	STATE ZIP CODE
Custodian of Records books and records.	: Identify by name, address (phone number optional) and position	of the person in possession of committee
Otter	nhoff, Benjamin, , ,	
Full Name	,PO Box 9891	
Mailing Address		
	Arlington	VA , ,22219
	Allington	<u> </u>
Title or Position	CITY ST.	TATE ZIP CODE
Treasurer	Telephone number	r 202 - 670 - 8650
	ne and address (phone number optional) of the treasurer of the core.g., assistant treasurer).	mmittee; and the name and address of
Full Name Otten of Treasurer	nhoff, Benjamin, , ,	
Mailing Address	PO Box 9891	
		VA   22219   -     -
Title or Position Treasurer		202 670 8650

FEC <b>For</b> n	n 1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , . I
Agent	1	
Mailing Address		
	CITY STATE ZIF	P CODE
Title or Position		1.1.
	Telephone number	
Name of Bank, I	Chain Bridge Bank  1445-A Laughlin Ave  McLean  VA 22101	
	CITY STATE ZI	P CODE
Name of Bank, I		
Mailing Address		
	CITY STATE ZI	P CODE

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

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	ng Participant: N FOR CONGRESS		
1.		FEC ID number	-1 1 1 1 1 1 1
2.	RONNY JACKSON	FEC ID number	C C00730531
3. MIKE JOHNSO	ON FOR LOUISIANA	FEC ID number	C C00608695
4. LISA MCCLAIN	N FOR CONGRESS	FEC ID number	C C00726042
Name of Any Connected	l Organization, Affiliated Committee, Joi	nt Fundraising Representati	ve, or Leadership PAC Spons
Mailing Address			
Relationship:	CITY ▲	STATE 4	ZIP CODE A
rielationship.	CITY	SIAIE	ZIP CODE A
Full Name			
Mailing Address			
TITLE OR POSITION	CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION	CITY ▲	STATE A Telephone Number	ZIP CODE A
	ories: List all banks or other depositories naintains funds.	Telephone Number	
Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories naintains funds.	Telephone Numberin which the committee depos	

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

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5(g)	or(h). <b>Joint Fundraisin</b> BLAKE MOOR	g Participant: E FOR CONGRESS	FEC ID number	C C00738872
	AMERICAN SE	CURITY PAC	FEC ID number	C C00439521
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
	Mailing Address			
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
_				
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
8.	Pull Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
	Full Name      Mailing Address  TITLE OR POSITION	CITY ▲  ries: List all banks or other depositories in which	Telephone Number	
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail.	CITY ▲  ries: List all banks or other depositories in which	Telephone Number	
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY ▲  ries: List all banks or other depositories in which	Telephone Number	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY ▲  ries: List all banks or other depositories in which	Telephone Number	