Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Ben Sasse for U.S. Senate, Inc. 700 R Street ADDRESS (number and street) Unit 83978 (Check if address is changed) Lincoln 68501 ΝE CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS tcdatwyler@gmail.com (Check if address is changed) Optional Second E-Mail Address tyler@teamsasse.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.teamsasse.com (Check if address is changed) DATE 2022 C00547976 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. Grassmeyer, Tyler, , , Type or Print Name of Treasurer Grassmeyer, Tyler, , , [Electronically Filed] 08 2022 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 (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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	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 Sasse, Benjamin, E., ,					
	Candidate Party Affiliation REP Sought: House Senate President	State NE District 00				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	218.1181 00				
	Name of Candidate					
	Party Committee:					
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	etc.) Party				
	Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization						
	Corporation Corporation w/o Capital Stock Labor Org	ganization				
	Membership Organization Trade Association Cooperati	ve				
	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 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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	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					
	1C					
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٧	Vrite or Type Committee Name				
	Ben Sasse for	U.S. Senate, Inc.			
6.	Name of Any Connected On Sasse Leadership Co	rganization, Affiliated Committee, Joint Fundraising Representative, ommittee	or Leadership PAC Sponsor		
	Mailing Address	PO Box 183			
		Hudson	54016		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representation	tive Leadership PAC Sponso		
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Grassmeye	r, Tyler, , ,			
	Full Name				
	Mailing Address	PO Box 183			
		Hudson	54016		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	15 338 8544		
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 Grassmeye	r, Tyler, , ,			
	of Treasurer				
	Mailing Address	PO Box 183			
		Hudson WI	54016		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	15 - 338 - 8544		

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Full Name of Designated Agent	Datwyler, Thomas, , ,	1 1 1 1 1 1 1		
Mailing Address	PO Box 183			
	Hudson	WI	54016	
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲	
Treasurer	1	one number 715		
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the c ses or maintains funds.	committee deposits fun	ds, holds accounts, rents	
Name of Bank, D	epository, etc.			
	Fremont National Bank			
Mailing Address	152 E 6th Street			
	Fremont	NE	68025	
	CITY ▲	STATE ▲	ZIP CODE ▲	
Name of Bank, Depository, etc.				
	Wells Fargo	1 1 1 1 1 1 1 1		
Mailing Address	47040 Community Plaza			
	Sterling	VA	20164	
	CITY ▲	STATE ▲	ZIP CODE ▲	