Image# 202111079468442983			_	PAGE 1 / 4 -
FEC FORM 1	STATEMEN ORGANIZ	_		
1. NAME OF	(Chack if nome	Example: If tuning, tune		e Use Only
COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Creating A Secur	e Economy PAC	;		
	PO Box 183			
ADDRESS (number and street)				
 (Check if address is changed) 				
	Hudson		WI 54016	6 ⊥
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
 (Check if address is changed) 	tcdatwyler@gmail.com			
	Optional Second E-Mail Add	dress		
(Check if address is changed)				
2. DATE 11 0				
3. FEC IDENTIFICATION N	UMBER ► C C	00793588		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
certify that I have examined th	his Statement and to the best	of my knowledge and belief it	is true, correct and c	omplete.
-				
Type or Print Name of Treasure	Thomas, , ,			
Signature of Treasurer	yler, Thomas, , ,	[Electronically Filed]	Date 11	07 / Y Y Y Y 2021
NOTE: Submission of false, erron		may subject the person signing t ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g
Office		For further information co		EC FORM 1
Use Only		Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	JN	(Revised 06/2012)

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TYPE OF (COMMITTEE	
Candidat	e 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. (Compinformation below.)	blete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		
(d)		Democratic, Republican, etc.) Part
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its com	nected organization is
	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 see committee. (i.e., nonconnected committee)	gregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Creating A Secure Economy PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

	Y,,, 													
Mailing Address	PO BOX 690													
	HUNTSVILLE					AL		3580)4		_			
		CIT	Y			STATE	Ξ			ZIP	COD	ε		
 Relationship: Connect 7. Custodian of Records: Id books and records. 	ted Organization	Affiliated C				Represe on of th			_		ion c			
Datwyle	r, Thomas, , ,													
Full Name														
Mailing Address	PO Box 183													
	Hudson				I	WI	I	540	16			1	I	I
Title or Position		CIT	Y			STATE				ZIP		E		

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	Datwyler, Thomas, , ,	
Mailing Address	PO Box 183	
-		
	Hudson	
	CITY STATE ZIP CODE	
Title or Position Treasurer	Telephone number	

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent				1				1																	1		
Mailing Address																											
						1											L			L			1			1	
								CIT	Y								ST	ATE				ZI	р С	COD	θE		
Title or Position																											
												Tele	eph	ione	e ni	uml	ber										

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.

Chain	Bridge Bank		
Mailing Address	1445A Laughlin Avenue		
	McLean 	VA 22101	
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE