American Principles SuperPAC 610 S. Boulevard Tampa, FL 33606

"RECEIVED

2012 AUG 22 PM 4: 33 FEC MAIL CENTER

August 21, 2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization – Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures and, consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Nancy H) Watkins

Treasurer

FEC FORM 1

Office

Use

Only

STATEMENT OF **ORGANIZATION**

RECEIVET)
2012 AUG 22 PM 4: 33

FEC MAIL CENTER

1. NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) | S | u | p | e | r | P | A | C | ADDRESS (number and street) (Check if address is changed) FL 3,3,6,0,6 CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) $w_{|a|}t_{|k|}i_{|n|}s_{|e|}r_{|o|}b_{|e|}r_{|t|}w_{|a|}t_{|k|}i_{|n|}s_{|.|c|}o_{|m|}$ (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 0 DATE C **FEC IDENTIFICATION NUMBER** 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. Nancy H. Watkins Type or Print Name of Treasurer 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.

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

FEC FORM 1

(Revised 02/2009)

ı		1
۹		۰
r	4	٩
•		•
•	1	٠.
h	4	B
•	1	
ø	167	٠
L.		J
•	4	•
	٠	
Ç,	١,	,
-		•
ø	d	٠.
٤,	¢	,
۰		'n
١,	ů	ď
ŀ	1	π
,	ļ	Ħ
•		
٢		1
ŀ,	ijν	۰
r	٦	.O
٠	7	
۲		۲
•		•

	FEC Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE	-				
Car	Candidate Commitiae:						
(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.)					
Nam Can	ne of didate						
	didete y Affiliat	on Office Sought: House Senate President	State District				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	e of didate						
Par	ty Cor	nmittee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	itical <i>A</i>	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a				
		Corporation Wo 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 segregated fund or							
	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 Fun	draising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political				
	Con	nmittees Participating in Joint Fundraiser					
	1.		<u> </u>				
	2.						
	3.	FEC ID number					
	4.	TEC ID number [C]					

FFC Form 1 (Raylead)	12/2009)	Page 3					
FEC Form 1 (Revised 02/2009) Page 3 Write or Type Committee Name							
American Principles SuperPAC 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor							
The state of the s		, and appropri					
N o n e	<u> </u>						
Mailing Address							
	CITY STATE	ZIP CODE					
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Le	adership PAC Sponsor					
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. 							
Full Name	; y, H, ., W, a, t, k, i, n, s,						
	6,1,0, S,., B,o,u,1,e,v,a,r,d, , , , , , , , , , ,						
Mailing Address							
	T ₁ a ₁ m ₁ p ₁ a ₁	,0,6 - , , ,					
		لـــــــــــــــــــــــــــــــــــــ					
Title or Position	CITY STATE	ZIP CODE					
T, r, e, a, s, u, r, e, r,	Telephone number $\begin{bmatrix} 8 & 1 & 3 \end{bmatrix} - \begin{bmatrix} 2 & 1 & 3 \end{bmatrix}$	5 4 - 3 3 6 9					
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	E y H _. W a t k i n s						
Mailing Address	6,1,0, S,., B,0,u,1,e,v,a,r,d,						
•	T ₁ a ₁ m ₁ p ₁ a ₁ 3 ₁ 3 ₁ 6	0 6 -					
Title ar Position	CITY STATE	ZIP CODE					
T ₁ r ₁ e ₁ a ₁ s ₁ u ₁ r ₁ e ₁ r ₁	Telephone number	5 4 - 3 3 6 9					

9.

FEC Form 1 (Revise	d 0.2/2009)		Page 4			
· · · ·						
Full Name of Designated Agent	e r t I I . Wattkins I					
Mailing Address	6,1,0, S,., B,o,u,1,e,v,a,r,d,,,,	1 1 1 1				
	T a m p a CITY	F _L L STATE	ZIP CODE			
Title or Position						
A ₁ s ₁ s ₁ i ₁ s ₁ t ₁ a ₁ n ₁ t ₁	Telephone n	umber 8 1	3 - 2,5,4 - 3,3,6,9			
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.					
The	B,a,n,k, o,f, T,a,m,p,a, , , , , , , , , , , , , , , , , ,					
Mailing Address	6,0,1,B,a,y,s,h,o,r,e,B,1,v,d,.,					
	T a m p a	FL	3,3,6,0,6 -			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository,	etc.					
لبينا						
Mailing Address						
		لـــا	لــــا-لـــــا			
	CITY	STATE	ZIP CODE			

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark Shipping/Date Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): **DATE PREPARED**