FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)	ION	Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Friends of Nan	Hayworth		
	1 1 1 1 1 1 1 1 1 1		
ADDRESS (number and s	treet)		
(Check if address X is changed)	Carmel		NY 10512
	Cl	ТУ▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI (Check if address is changed)	ADDRESS (Please provide only one e-mail nwatkins@robertwatkin		
COMMITTEE'S WEB I	PAGE ADDRESS (URL)		
(Check if address is changed)	www.nanhayworth.com		
2. DATE 09	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICATION	TION NUMBER C	C00466490	
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)	
I certify that I have examine Type or Print Name of	ned this Statement and to the best of my knowled Freasurer Nancy H. Watkins	lge and belief it is true, correct an	d complete
Signature of Treasurer	Electronically Filed by Nancy H. Wa	tkins	Date 09 / DD / YYYYY
NOTE: Submission of fals	se, erroneous, or incomplete information may sul		
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530	

	ı	FEC F	Form 1 (Revised 02/2009)	Page 2	
5.			DMMITTEE (Check One)		
	(a)	X	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.)	lete the candidate	
	Name Candi		Nan Hayworth		
	Candi Party	idate Affiliati	on REP Office X House Senate Presid	ent State	NY 19
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District	
	Name Candi				
	Party	Comm			
	(d)		(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) P	arty.
	Politic	cal Act	ion 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	
	(f)		In addition, this committee is a Lobbyist/Registrant PAC. This committee supports/opposes more than one Federal candidate, and is NOT a separate segrence of the committee of t	egated 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.)		
	Joint F	Fundra	ising 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.	two or more political	
	(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	
		Com	mittees Participating in Joint Fundraiser		_
			1. FEC ID number		
			2. FEC ID number		
			3. FEC ID number		
			4. FEC ID number		

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Write or Type Committee Name				
Friends of Nan Haywort	th			
6. Name of Any Connected Org	ganization, Affiliated Committee,	Joint Fundraising Represent	ative, or Le	adership PAC Sponsor
U S House Victory Comm	nittee 2010			
Mailing Address	228 S. Washing	on St., Ste. 115		
	Alexandria		VΑ	22314 _
	CITY▲	\$	STATE A	ZIP CODE
Relationship:				
Connected Organization	Affiliated Committee	X Joint Fundraising Repre	sentative	Leadership PAC Sponsor
possession of Committee	entify by name, address, (phone books and records. H. Watkins	e number optional), and	position o	f the person in
Mailing Address	610 S. Boulevar	d		
	Tampa		FL	33606
Title or Position ▼ Treasurer	CITY A	Telephone numb	STATE & er <u>813</u>	ZIP CODE 14 - 254 - 3369
name and address of any	and address (phone number v designated agent (e.g., assiste H. Watkins		of the com	mittee; and the
Mailing Address	610 S. Boulevar	d		
	Татра		FL	33606
Title or Position ♥	CITY A		STATE	ZIP CODE A
Treasurer		Telephone numb	813 per	3 254 3369

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Full Name of Designated Agent	Robert I. Watkins		
Mailing Address	610 S. Boulevard		
	Tampa	FL	33606 –
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A
Assista	nt Treasurer Tel	ephone number 813	254 3369
Banks or Other Deposit safety deposit boxes or m Name of Bank, Depository	aintains funds. y, etc.	committee deposits funds, h	olds accounts, rents
safety deposit boxes or m. Name of Bank, Depository Wa	aintains funds.	committee deposits funds, h	olds accounts, rents
safety deposit boxes or m. Name of Bank, Depository	aintains funds. y, etc. achovia Bank	committee deposits funds, h	olds accounts, rents
safety deposit boxes or m. Name of Bank, Depository Wa	aintains funds. y, etc. achovia Bank	committee deposits funds, h	olds accounts, rents
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safety deposit boxes or maintair Name of Bank, Depository, etc.	is rurius.		[ADDITIONAL]
BB&T			
Mailing Address	1909 K Street, N.W.		
	Washington	DC	20006
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	anization, Affiliated Committee, Joint Fundraising Repre	esentative, or Leade	[ADDITIONAL rship PAC Sponsor
New York House Victory	Fund		
Mailing Address	228 S. Washington Street, #115		
	Alexandria	J LVA L	22314
ationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee X Joint Fundraising Repre	esentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Mailing Address			
Mailing Address			_
Mailing Address Title or Position ▼	CITY A		
			ZIP CODE A
		STATE ∆ ne number	ZIP CODE &

Banks or Other Depositories safety deposit boxes or mainta		mmittee deposits funds, hold	ds accounts, rents
Name of Bank, Depository, etc			[ADDITIONAL]
SunTr	ust Bank		
	D.O. D 1410		
Mailing Address	P. O. Box 4418		
	Atlanta	GA L	30302
	CITY 🛕	STATE. △	ZIP CODE 🛕
Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising	Representative or Leader	[ADDITIONAL
NY-19 Congressional V		nepresentative, or Leader	Silip PAC Spolisor
NT-19 Congressional V	ictory Committee		
			<u> </u>
	264 N, Lumpkin Street, #202		
Mailing Address			
	Athens	I GA I	30601
lation delice	CITY▲	STATE A	ZIP CODE
lationship:			
Connected Organization	X Affiliated Committee Joint Fundraising	Representative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
1			
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE ∆	ZIP CODE A
Title of Position \	CIT A	SIAIL	ZIP CODE 14
	Tel	ephone number	
		•	[ADDITIONAL]
			IADDITIONALI
Joint Fundraiser Participant	l .		[]