



Certified Public Accountants

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610 S. Boulevard, Suite 100 • Tampa, Florida 33606 • Ph 813 254-3369 Fax 813 253-3280

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FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Miller-Florida Victory Committee

ADDRESS (number and street)

810 South Blvd.



(Check if address is changed)

Tampa

FL

33606

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

nwatkins@robertwatkins.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

8132533280

2. DATE

MM / DD / YYYY
04 / 09 / 2008

3. FEC IDENTIFICATION NUMBER

C

4. 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

Type or Print Name of Treasurer

Nancy Watkins

Signature of Treasurer

Nancy D. Watkins

Date

MM / DD / YYYY
04 / 09 / 2008

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 Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

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FEC Form 1 (Revised 02/2003)

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5. TYPE OF COMMITTEE (Check One)

- (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

[Empty grid for candidate name]

Candidate Party Affiliation

[Empty box for party affiliation]

Office Sought:

House

Senate

President

State

[Empty box for state]

District

[Empty box for district]

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

[Empty grid for candidate name]

- (d) This committee is a [Empty box] (National, State (or subordinate) committee of the [Empty box] (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

[Empty grid for organization name]

Mailing Address

320 FIRST STREET

[Empty grid for address line 2]

WASHINGTON DC 20003

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmt Participant

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

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Write or Type Committee Name

Miller-Florida Victory Committee

7. Custodian of Records: Identify by name, address, (phone number - optional), and position of the person in possession of Committee books and records.

Full Name Nancy Watkins

Mailing Address 610 South Blvd.

Tampa FL 33606

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 813 254 3369

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 Nancy Watkins

Mailing Address 610 South Blvd.

Tampa FL 33606

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 813 254 3369

Full Name of Designated Agent Jamle Undercuffler

Mailing Address 610 South Blvd.

Tampa FL 33606

Title or Position CITY STATE ZIP CODE

Assistant Treasurer Telephone number 813 254 3369

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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.

Bank of Tampa

Mailing Address

P.O. Box 1

Tampa

FL

33601

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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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.

[ADDITIONAL]

Mailing Address

_____-____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

JEFF MILLER FOR CONGRESS

Mailing Address

P. O. Box 126 _____

Pensacola _____

FL _____

32591 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmt Participant _____

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

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Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY A

STATE A

ZIP CODE A

Telephone number

____ - ____ - _____

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Federal Election Commission
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