FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	1	(See instructio						
		(See instructio				Office us	se only	
1. NAME OF COMMITTEE (ii	n full)	(Check if name is changed)	Example: If ty over the lines		12FE4N	/ 15		
Jerry Weller	for Congress, Inc							لبب
		11111						
ADDRESS (number and	d street)	S. Boulevard						
(Check if add	dress							ш
is changed)	Tam	ipa 			FL	3	3606	шШ
COMMITTEE'S F M	All ADDDECC		CITY▲		STATE		ZIP CODE	•
COMMITTEE'S E-M.								
ilwatkins@ro	bertwatkins.com							لــــــــــــــــــــــــــــــــــــــ
				ш		шш		
COMMITTEE'S WEE	B PAGE ADDRESS (l	JRL)						
								لــــــــــــــــــــــــــــــــــــــ
								шШ
COMMITTEE'S FAX 8132533280 2. DATE	M / D D / \							
0	7 15 ATION NUMBER	2008	00000404		7			
3. FEC IDENTIFIC	ATION NUMBER	L	C C0036434	9				
4. IS THIS STATE	MENT NEV	V (N) OR	X AM	ENDED (A)				
I certify that I have exar	nined this Statement an	d to the best of my kno	wledge and belief it	is true, correct ar	nd complete			
Type or Print Name o	f Treasurer	Nancy H. Watkin	s					
Signature of Treasure	er Electronically File	ed by Nancy H. '	Watkins		Date	0 7 / D	15 / Y	2008
NOTE: Submission of t	alse, erroneous, or inco	mplete information ma	•				U.S.C. S437g	
Office Use Only			Federal Toll Free	ner information of Election Commiss 800-424-9530 2-694-1100			EC FORN	

FE3AN042.PDF

	FEC	C Form 1 (Revised 12/2007)	Page 2	
5.		COMMITTEE (Check One) The Committee:		
	(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. (Complete the information below.)	ne candidate	
	Name of Candidate	Gerald C. Jerry Weller		_
	Candidate Party Affili	RED V V	State IL District 11	_
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name of Candidate	e [
	Party Cor			_
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.	
	Political A	Action Committee (PAC):		_
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:	
		Corporation Corporation w/o Capital Stock Lal	bor Organization	
		Membership Organization Trade Association Co	poperative	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d fund or party	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		_
	Joint Fund	draising Representative:		
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political	
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political	
	Co	ommittees Participating in Joint Fundraiser		
		1. FEC ID number C		
		2 FEC ID number C		
		3. FEC ID number		
		4. FEC ID number		
		FEC ID number		

FEC Form 1 (Revised	12/2007)			Page 3
Write or Type Committee Name				
Jerry Weller for Cong	ress, Inc.			
6. Name of Any Connected C	Organization, Affiliated Committee,	, Leadership PAC Sponsor or Jo	int Fundrai	sing Representative
NONE				
			<u> </u>	
Mailing Address				
			L L	
	CITY	ST	ATE 🛕	ZIP CODE
Relationship:				
Connected Organizatio	n Affiliated Committee	Leadership PAC Sponsor	Joir	nt Fundraising Representative
possession of Committee Full Name Mailing Address	y H. Watkins 610 S. Bouleva	ırd		
	Татра		FL	33606 _
Title or Position ▼ Treasure	CITY A	ST Telephone number	ATE & 813	ZIP CODE <u>A</u> - 254 - 3369
	e and address (phone number - ny designated agent (e.g., assis		the comm	ittee; and the
Full Name of Treasurer Nanc	ey H. Watkins			
Mailing Address	610 S. Bouleva	ard		
	Татра		FL _	33606
Title or Position ♥	CITY A	ST	ATE A	ZIP CODE A
Treasure	er	_ Telephone number	813	254 3369

FEC Form 1 (Revise	ed 12/2007)		Page 4
Full Name of Designated Agent	Robert I. Watkins		
Mailing Address	610 S. Boulevard		
	Татра	FL	33606 –
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A
Assista	nt Treasurer	Telephone number	254 3369
Banks or Other Deposite		the committee deposits funds, h	olds accounts, rents
safety deposit boxes or ma Name of Bank, Depository	aintains funds. , etc. undy County National Bank 201 Liberty Street		
safety deposit boxes or ma Name of Bank, Depository Gru	aintains funds. , etc. undy County National Bank	the committee deposits funds, h	olds accounts, rents
safety deposit boxes or ma Name of Bank, Depository Gru	aintains funds. , etc. undy County National Bank 201 Liberty Street		
safety deposit boxes or ma Name of Bank, Depository Gru	intains funds. , etc. undy County National Bank 201 Liberty Street Morris CITY CITY		60450
safety deposit boxes or ma Name of Bank, Depository Gru Mailing Address	intains funds. , etc. undy County National Bank 201 Liberty Street Morris CITY CITY		60450
safety deposit boxes or ma Name of Bank, Depository Gru Mailing Address	intains funds. , etc. undy County National Bank 201 Liberty Street Morris CITY CITY	JIL STATE △	60450 ZIP CODE
Safety deposit boxes or ma Name of Bank, Depository Gru Mailing Address Name of Bank, Depository	intains funds. , etc. undy County National Bank 201 Liberty Street Morris CITY , etc.	JIL STATE △	60450 ZIP CODE
Safety deposit boxes or ma Name of Bank, Depository Gru Mailing Address Name of Bank, Depository	intains funds. , etc. undy County National Bank 201 Liberty Street Morris CITY , etc.	JIL STATE △	60450 ZIP CODE