STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Chris Stewart Freedom Fund 610 S. Boulevard ADDRESS (number and street) (Check if address is changed) Tampa FL 33606 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS nwatkins@robertwatkins.com (Check if address is changed) Optional Second E-Mail Address kblanchard@robertwatkins.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 06 2017 C00663260 FEC IDENTIFICATION NUMBER > 3. X 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. Watkins, Nancy, H.,, Type or Print Name of Treasurer Watkins, Nancy, H.,, [Electronically Filed] 12 13 2017 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2				
		OF COMMITTEE					
Car	ndidate	lidate Committee:					
(a)	Ш	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						
	didate y Affiliatio	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
Nam Cand	e of didate						
Par	ty Con	ty Committee:					
(d)			(Democratic, Republican, etc.) Party.				
Poli	itical A	ction 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				
		In addition, this committee is a Lobbyist/Registrant PAC.	•				
(f)	П	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated 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.)					
Join	t Fund	raising Representative:					
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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				
	Committees Participating in Joint Fundraiser						
	1.	FRIENDS FOR CHRIS STEWART INC	506931				
	2.	FREEDOM 21: FIGHTING FOR FREEDOM IN THE 21ST CENTURY	571521				
	3.	NRCC FEC ID number C C000	075820				
	4.						

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Write or Type Committee N		9
Chris Stewart	t Freedom Fund	
	ed Organization, Affiliated Committee, Joint Fundraising Represent	ative, or Leadership PAC Sponsor
NONE		
Mailing Address		
Ü		
	CITY STA	TE ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of	the person in possession of committee
Watkii Full Name	ns, Nancy, H., ,	
Mailing Address	610 S. Boulevard	
	Tampa	33606
Title or Position	CITY STAT	E ZIP CODE
Treasurer	Telephone number	813 - 254 - 3369
B. Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the comn g., assistant treasurer).	nittee; and the name and address of
Full Name Watkin of Treasurer	ns, Nancy, H., ,	
Mailing Address	610 S. Boulevard	
	Tampa	_ 33606
Title or Position	CITY STATI	
Treasurer	Telephone number	813 254 3369

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Full Name of Designated Agent	Watkins, Robert, I., ,					
Mailing Address	610 S. Boulevard					
	Tampa FL 33606 CITY STATE ZIF	P CODE				
Title or Position Assistant Treast	urer Telephone number 813 254	1 - 3369				
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	601 Bayshore Blvd.					
	Tampa FL 33606					
	CITY STATE ZIF	P CODE				
Name of Bank, [Depository, etc.					
Mailing Address						
	CITY STATE ZIF	P CODE				