FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Defense Now PAC 610 S. Boulevard ADDRESS (number and street) (Check if address is changed) Tampa 33606 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address nwatkins@robertwatkins.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00863050 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. Type or Print Name of Treasurer Watkins, Nancy, H., Watkins, Nancy, H.,, Date 12 20 2023 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

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	TYPE OF COMMITTEE:					
	Candidate Committee:					
	(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						
	Candidate Party Affiliation Office Sought: House Senate President	State				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
	Party Committee:					
	(d) This committee is a (National, State or subordinate) committee of the Republican,					
Political 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 Labor Or	ganization				
	Membership Organization Trade Association Cooperat	iive				
	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 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.)					
	(g) This committee is an independent expenditure-only political committee (Super PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	(h) X This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	C).				
	In addition, this committee is a Lobbyist/Registrant PAC.					
	Joint Fundraising Representative:					
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political				
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
Committees Participating in Joint Fundraiser						
	1 C					
	C					

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٧	rite or Type Committee Name				
	Defense Now PA	AC			
6 .	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NONE	<u> </u>			
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representation	ve Leadership PAC Sponso		
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of books and records. 					
	Watkins, Na	ancy, H., ,			
	Full Name				
	Mailing Address	610 S. Boulevard			
		Tampa FL	33606		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number 81	3369		
S.	. 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 Watkins, Note of Treasurer				
	Mailing Address	610 S. Boulevard			
		Tampa FL	33606		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼		054		
	Treasurer	81 Telephone number	3		

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Full Name of Designated Agent	Watkins, Robert, I., ,		
Mailing Address	610 S. Boulevard		
	Tampa	J FL L	33606
Title or Decition	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position Assistant Treasu		number 813	
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the comres or maintains funds.	mittee deposits fund	s, holds accounts, rents
Name of Bank, D	epository, etc.		
	The Bank of Tampa		
Mailing Address	601 Bayshore Blvd.		
	Tampa	FL L	33606
	CITY A	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY A	STATE ▲	ZIP CODE ▲