Only

PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Florida Conservatives Protecting American Values 610 S. Boulevard ADDRESS (number and street) (Check if address is changed) 33606 FL 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 COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00726026 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] 10 15 2020 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 Local 202-694-1100

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	orm 1 (Revised 02/2009)  COMMITTEE	Page <b>2</b>		
	date 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. (Compinformation below.)	plete the candidate		
Name of Candidate				
Candidate Party Affiliat	ion Office Sought: House Senate President	State District		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Cor		_		
(d)		Democratic, Republican, etc.) Party		
Political A	Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is		
	Corporation Corporation w/o Capital Stock	Labor Organization		
	Membership Organization Trade Association	Cooperative		
	In addition, this committee is a Lobbyist/Registrant PAC.			
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party		
	In addition, this committee is a Lobbyist/Registrant PAC.			
	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 tw 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		
Com	nmittees Participating in Joint Fundraiser			
1.	FEC ID number			
2.	FEC ID number			
3.	FEC ID number			
4.				

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V	/rite or Type Comi		. ago u
	_	onservatives Protecting American Values	
6.		Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
N	ONE		
Ľ			
	Mailing Address		
		CITY STATE 2	ZIP CODE
	Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Lear	dership PAC Sponsor
'.	Custodian of Rebooks and record	<b>ecords:</b> Identify by name, address (phone number optional) and position of the person in posseds.	session of committee
	Full Massa	Watkins, Nancy, H., ,	1
	Full Name	610 S. Boulevard	
	Mailing Address		
		Tampa , FL , 33606	
	Title or Position	CITY STATE 2	ZIP CODE
	Treasurer		254
3.	Treasurer: List the any designated a	he name and address (phone number optional) of the treasurer of the committee; and the nan agent (e.g., assistant treasurer).	ne and address of
	Full Name	Watkins, Nancy, H., ,	I
	of Treasurer	610 S. Boulevard	
	Mailing Address		
		. Tana	
		Tampa FL 33606	ZID CODE
_	Title or Position Treasurer		ZIP CODE 3369

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Full Name of Designated Agent	Watkins, Robert, I., ,	
Mailing Address	610 S. Boulevard	
	Tampa FL 33606  CITY STATE ZI	IP CODE
Title or Position Assistant Treasu	urer Telephone number	64   -   3369
Banks or Other safety deposit bo Name of Bank, D		accounts, rents
	The Bank of Tampa	
Mailing Address	The Bank of Tampa  601 Bayshore Blvd.	
Mailing Address		
Mailing Address	Tampa FL 33606	IP CODE
Mailing Address  Name of Bank, D	Tampa FL 33606  CITY STATE Z	IP CODE
	Tampa FL 33606  CITY STATE Z	IP CODE
	Tampa FL 33606  CITY STATE Z	IP CODE
Name of Bank, D	Tampa FL 33606  CITY STATE Z	IP CODE
Name of Bank, D	Tampa FL 33606  CITY STATE Z	IP CODE