

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Americans for Common Sense Government

ADDRESS (number and street)

610 S. Boulevard

(Check if address is changed)

Tampa FL 33606

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

n.watkins@robertwatkins.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

None

COMMITTEE'S FAX NUMBER

813-253-3280

2. DATE

05 / 01 / 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 H. Watkins

Signature of Treasurer

*Nancy H. Watkins*

Date

05 / 01 / 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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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 \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State  District

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

Name of Candidate \_\_\_\_\_

- (d)  This committee is a  (National, State or subordinate) committee of the  (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

N, o, n, e \_\_\_\_\_  
\_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship \_\_\_\_\_

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

Americans for Common Sense Government

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 | N a n c y H . W a t k i n s |

Mailing Address | 6 1 0 S . B o u l e v a r d |

| |

| T a m p a | | F L | | 3 3 6 0 6 | - | |

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

| T r e a s u r e r | Telephone number | 8 1 3 | - | 2 5 4 | - | 3 3 6 9 |

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 | N a n c y H . W a t k i n s |

Mailing Address | 6 1 0 S . B o u l e v a r d |

| |

| T a m p a | | F L | | 3 3 6 0 6 | - | |

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

| T r e a s u r e r | Telephone number | 8 1 3 | - | 2 5 4 | - | 3 3 6 9 |

Full Name of Designated Agent | J a m i e U n d e r c u f f l e r |

Mailing Address | 6 1 0 S . B o u l e v a r d |

| |

| T a m p a | | F L | | 3 3 6 0 6 | - | |

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

| A s s i s t a n t T r e a s u r e r | Telephone number | 8 1 3 | - | 2 5 4 | - | 3 3 6 9 |

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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.

The 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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Federal Election Commission  
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*JAO*  
 PREPARER  
 (3/2005)

5/7/08  
 DATE PREPARED

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