Image# 12951887522 PAGE 1 / 4

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		ORGANIZ	ATION		Office Use Only
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
WATKINS ASSOC	IATED IN	DUSTRIES INC EMPLO	YEES FOR GOOD GOV	ERNMENT COM	MMITTEE (WATKINS-PAC)
ADDRESS (number an	d street)	P O BOX 1738			
(Check if ad is changed)	dress	ATLANTA		GA	30301
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MAI (Check if a is changed	address	S (Please provide only one e worshamd@watkinsind.co			
COMMITTEE'S WEB	PAGE ADD	RESS (URL)			
(Check if a is changed					
2. DATE 05	23	2012			
3. FEC IDENTIFIC	ation nu	MBER C C	00142307		
4. IS THIS STATEM	IENT X	NEW (N) OR	AMENDED (A)	
I certify that I have ex	f Treasurer	T.R. WADE	t of my knowledge and beli	ef it is true, correct	t and complete.
Signature of Treasure	T.R. WAI	DE	[Electronically Filed	Date 05	23 2012
NOTE: Submission of fa			may subject the person signi	_	the penalties of 2 U.S.C. §437g.
Office Use Only			For further informatic Federal Election Comm Toll Free 800-424-953 Local 202-694-1100	mission	FEC FORM 1 (Revised 02/2009)

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		om 1 (Revised 02/2009) OMMITTEE	raye Z
Car	ndidate	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. (Con information below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		X Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Name		. 230 2
	INDUSTRIES INC EMPLOYEES FOR GOOD GOVERNMENT CO	OMMITTEE (WATKINS-PAC)
	Organization, Affiliated Committee, Joint Fundraising Representative, o	·
		or Economic Title Sportson
Watkins Associated In	idustries, Inc.	
Mailing Address	P.O. Box 1738	
	Atlanta GA	30301
	CITY STATE	ZIP CODE
	ad Organization Affiliated Committee Joint Fundraising Representate Intify by name, address (phone number optional) and position of the pe	
books and records.	nuty by frame, address (phone number optional) and position of the pe	rsorr in possession of committee
ERIC S W	/AHLEN	
Mailing Address	P.O. BOX 1738	
	ATLANTA GA	30301
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
3. Treasurer: List the name an any designated agent (e.g., a	nd address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name ERIC S W.	AHLEN	1
of Treasurer	IP.O. BOX 1738	
Mailing Address	1.0.500 1730	
	ATLANTA	30301
Title or Position , Treasurer	CITY STATE	ZIP CODE
<u> </u>	Telephone number	

I		
FEC For n	n 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit bo Name of Bank, I		noids accounts, Tents
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA P O BOX 34602	itolius accounts, Tents
safety deposit bo	Depository, etc. BANK OF AMERICA P O BOX 34602	inolas accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA P O BOX 34602	
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA P O BOX 34602	
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA P O BOX 34602	
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA P O BOX 34602 CHARLOTTE CITY STATE	54
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BANK OF AMERICA P O BOX 34602 CHARLOTTE CITY STATE	54
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BANK OF AMERICA P O BOX 34602 CHARLOTTE CITY STATE	54 ZIP CODE
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BANK OF AMERICA P O BOX 34602 CHARLOTTE CITY STATE Depository, etc.	54 ZIP CODE
Safety deposit be Name of Bank, I Mailing Address	Depository, etc. BANK OF AMERICA P O BOX 34602 CHARLOTTE CITY STATE Depository, etc.	54 ZIP CODE
safety deposit be Name of Bank, I Mailing Address	Depository, etc. BANK OF AMERICA P O BOX 34602 CHARLOTTE CITY STATE Depository, etc.	54 ZIP CODE