STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL ☐ (Check if name is changed)
WACHOVIA BANK OF GEORGIA, N.A. FUND FOR BETTER GOVERNMENT

(b) Number and Street Address ☐ (Check if address is changed)
C/O GOVERNMENT DIVISION MC GA 700 191 PEACHTREE ST. N.E.

(c) City, State and ZIP Code
ATLANTA, GA 30303

2. DATE
APRIL 14, 1994

3. FEC IDENTIFICATION NUMBER
C00011710

4. IS THIS STATEMENT AN AMENDMENT?
☒ YES ☐ NO

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	State/District

☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)

☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)

☒ (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 a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
SEE ATTACHED		

Type of Connected Organization
☒ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

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	Mailing Address	Title or Position
Shawn P. McGrath	MAIL CODE GA-902 P.O. BOX 4148 ATLANTA, GA 30302	Assistant Treasurer

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	Mailing Address	Title or Position
Robert C. Osborne	MAIL CODE GA-700 P.O. BOX 4148	Treasurer
Shawn P. McGrath	ATLANTA, GA 30302	Assistant Treasurer

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.	Mailing Address and ZIP Code

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	SIGNATURE OF TREASURER	DATE
Robert C. Osborne	Shawn P. McGrath For Robert C. Osborne	4/15/94

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.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-376-3120

FEC FORM 1
(revised 4/87)

9 4 0 3 8 9 5 3 9 1 0

Attachment to Statement of Organization

Name of Committee: Wachovia Bank of Georgia, N.A. Fund For Better Government

FEC Identification Number: C00011718

Name & Address of Any Connected Organization or Affiliated Committee	Relationship
Wachovia Bank of Georgia, N.A. P.O. Box 4148 Atlanta, Georgia 30302	Sponsoring Corporation
Wachovia Bank of North Carolina, NA Employees for Good Government ("Wachovia Bank of NC Employees for Good Government) Wachovia Bank of North Carolina, N.A. 227 Fayetteville Street Mall P.O. Box 27886 Raleigh, North Carolina 27611	Affiliated
South Carolina National Bank Political Action Committee ("SCN PAC") South Carolina National Bank 1426 Main Street Columbia, South Carolina 29226	Affiliated

94038953916

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 4-15-94
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

JMK
PREPARER

4-21-94
DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 8 9 5 3 9 1 7