

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED

2011 AUG 30 AM 8:14

FEC MAIL CENTER

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Citizens to Elect Frederick Collins

ADDRESS (number and street)

PO Box 12389

(Check if address  
is changed)

Chicago

IL

60612

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address  
is changed)

Frederick@CollinsforCongress2012.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

www.collinsforcongress2012.com

2. DATE 08 15 2011

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

Mary White

Signature of Treasurer

Date

16 AUG. 2011

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 02/2009)

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5. 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 **Frederick Collins**

Candidate Party Affiliation **REP** Office Sought:  House  Senate  President State **IL** District **01**

- (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 \_\_\_\_\_ (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - 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 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.)

**Joint Fundraising Representative:**

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

- 1. \_\_\_\_\_ FEC ID number **C**
- 2. \_\_\_\_\_ FEC ID number **C**
- 3. \_\_\_\_\_ FEC ID number **C**
- 4. \_\_\_\_\_ FEC ID number **C**

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Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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 *Caitlin Huxley*

Mailing Address *3930 N Pine Grove Ave*

Title or Position *Campaign Finance Director*

CITY *Chicago*

STATE *IL*

ZIP CODE *60613*

Telephone number

X 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 *Mary White*

Mailing Address *4111 S Federal*

Title or Position *Treasurer*

CITY *Chicago*

STATE *IL*

ZIP CODE *60609*

Telephone number

11030655086

Full Name of Designated Agent

Mailing Address

- Foreign... protection
- The right to make... arrangements and control disposition of remains
- The right to share a nursing home or hospital room and hospital visitation rights
- Domestic violence protections
- Clear procedures and laws for committed couples

CITY STATE ZIP CODE

Title or Position

These include the rights to dissolution of the civil union, maintenance, and disposition of property... Passage of House Bill 1826 would allow couples to bring civil action dependent on spousal status... including wrongful death actions and emotional distress claims.

How would seniors apply and become eligible?

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.
- Applicants would have to obtain a civil union license and register with the state. All current... and rules applicable dissolution and property division would apply to each partner.

Name of Bank, Depository, etc.

The Chicago Patrolmen's Federal Credit Union

Mailing Address

1407 W Washington Blvd

CITY Chicago STATE IL ZIP CODE 60607

Name of Bank, Depository, etc.


Mailing Address

CITY STATE ZIP CODE

11030855007

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked  


USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
PREPARER

8/30/11  
DATE PREPARED

1103065500