

FEC
FORM 1

STATEMENT OF
ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL ROOM

2001 FEB 21 AM 47

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

COLLINS FOR CONGRESS

ADDRESS (number and street)

51 CHAPMAN MILL POND ROAD

(Check if address
is changed)

WESTBROOK

CT

06498

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

INFO@COLLINSFORCONGRESS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.COLLINSFORCONGRESS.COM

2. DATE

02 20 2001

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

Michael F. Salvin

Signature of Treasurer

Michael F. Salvin

Date

02 20 2001

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 800-424-9830
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

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

GARY COLLINS

Candidate

Party Affiliation

DEM

Office Sought

☒

House

Senate

President

State

CT

District

02

- (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

FRIENDS OF GARY, INC.

51 CHAPMAN MILL POND ROAD

Mailing Address

51 CHAPMAN MILL POND ROAD

WESTBROOK

CT

06498

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

AFFILIATED COMMITTEE

Type of Connected Organization:

Corporation

☒

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

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 RICHARD ALAN ROCHLIN, ESQ.

Mailing Address 239 A FARMINGTON AVENUE

HARTFORD CT 06105

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

CAMPAIGN MANAGER Telephone number 860 - 524 - 8217

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 MICHAEL SALVIN

Mailing Address 51 CHAPMAN MILL POND ROAD

WESTBROOK CT 06498

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER Telephone number 860 - 794 - 9121

Full Name of Designated Agent AMY SALVIN COLLINS

Mailing Address 28 JULIA COURT

BROAD BROOK CT 06016

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

ASSISTANT TREASURER Telephone number 860 - 794 - 9121

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.

FLEET NATIONAL BANK

Mailing Address

777 MAIN STREET

HARTFORD

CT

06115

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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 2-21-01
☐ First Class Mail	POSTMARKED
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☐ No Postmark	
☐ Postmark Illegible	
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☐ Other (Specify):	Postmarked and/or Date of Receipt
☐ Electronic Filing	
 PREPARER	2-21-01 DATE PREPARED

(6/2000)