

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

Mac Collins for Congress

ADDRESS (Number and street) P.O. Box 35

(Check if address is changed) Jonesboro GA 30237

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

wandatschudy@earthlink.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

maccollinsforcongress.org

2. DATE 01 / 27 / 2003

3. FEC IDENTIFICATION NUMBER C00265942

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 Wanda Tschudy

Signature of Treasurer Electronically Filed by Wanda Tschudy Date 01 / 27 / 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

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 Michael A. Collins

Candidate	Office					State	GA
Party Affiliation	Sought:	<input checked="" type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President		District	08

- (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

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

- | | | |
|-------------------------|-------------------------------|--------------------|
| Corporation | Corporation w/o Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

Mac Collins for Congress

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 Wanda Tschudy

Mailing Address P.O. Box 35
149 S. McDonough Street
Jonesboro, GA 3023

Title or Position ▼ Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 770 - 471 - 0048

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 Wanda Tschudy

Mailing Address P.O. Box 35
Jonesboro STATE ▲ ZIP CODE ▲
GA 30237

Title or Position ▼ Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 770 - 471 - 0048

Full Name of Designated Agent _____

Mailing Address _____

Title or Position ▼ _____ CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number _____ - _____ - _____

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.

McIntosh State Bank

Mailing Address

P.O. Box 3818

Jackson

GA

30233 -

CITY Δ

STATE Δ

ZIP CODE Δ