

**BAKER
DONELSON**
BEARMAN, CALDWELL
& BERKOWITZ, PC

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2008 APR - 2 AM 10: 21

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BRADLEY S. CLANTON
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E-Mail Address: bclanton@bakerdonelson.com

April 1, 2008

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

VIA FEDERAL EXPRESS

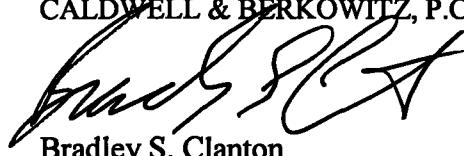
Re: Statement of Organization for McAlister's Corporation Political Action Committee

Dear Commissioners:

Please find enclosed for filing FEC Form 1, Statement of Organization, for the McAlister's Corporation Political Action Committee. Thank you for your attention to this matter.

Sincerely,

BAKER, DONELSON, BEARMAN,
CALDWELL & BERKOWITZ, P.C.



Bradley S. Clanton

Enclosure

28039664447

FEC
FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

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

McAlister's Corporation Political Action Committee

McAlister's Deli PAC (abbreviated name)

ADDRESS (number and street) 731 S. Pear Orchard Road

(Check if address is changed)

Suite 51

Ridgeland

MS

3.9.15.7

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

pfriedmann@mcalistersdeli.com

pwalls@mcalistersdeli.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

6 0 1 - 9 5 2 - 1 1 3 8

2. DATE 03 24 2008

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 Philip Friedman

Signature of Treasurer

Date 03 24 2008

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 12/2007)
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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

Candidate Party Affiliation	Office Sought:	House	Senate	President	State
					District

(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:

<input checked="" type="checkbox"/> Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organization	Trade Association	Cooperative

(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 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**
5. FEC ID number **C**

Write or Type Committee Name

McAlister's Corporation PAC

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

McAlister's Corporation

Mailing Address

731 S. Pear Orchard RoadSuite 51RidgelandMS39157

CITY

STATE

ZIP CODE

Relationship:

 Connected Organization Affiliated Committee Leadership PAC Sponsor Joint Fundraising Representative

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

Patrick K. Walls

Mailing Address

731 S. Pear Orchard Road, Suite 51RidgelandMS39157

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

601-952-1108

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 TreasurerPhilip Friedman

Mailing Address

731 S. Pear Orchard RoadSuite 51RidgelandMS39157

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

601-952-1103

Full Name of
Designated
Agent

Patrick K. Walls

Mailing Address

731 S. Pear Orchard Road

Suite 51

Ridgeland

CITY

MS

39157

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number 601-952-1108

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.

Regions Bank

Mailing Address

210 East Capitol Street

4th Floor Plaza

Jackson

MS

39215

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 FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date Fed Ex 4/1/08
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
	4/2/08
PREPARER (3/2005)	DATE PREPARED

28059664452