

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Collins for Congress

ADDRESS (number and street)

PO Box 1295

Check if different than previously reported. (ACC)

Gainesville

GA

30503

2. FEC IDENTIFICATION NUMBER ▼

C C00502039

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

GA

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brian Carroll

Signature of Treasurer Brian Carroll

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Collins for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	139418.20	459568.68
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	15000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	139418.20	444568.68
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	48109.07	195740.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	7245.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48109.07	188495.18
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	354711.37	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Collins for Congress**

Report Covering the Period: From:   /    To:   /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	64518.20	201813.68
(ii) Unitemized.....	1650.00	10455.00
(iii) TOTAL of contributions from individuals ▶	66168.20	212268.68
(b) Political Party Committees.....	0.00	500.00
(c) Other Political Committees (such as PACs).....	73250.00	246800.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	139418.20	459568.68
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	7245.20
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	139418.20	466813.88

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48109.07	195740.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	10000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	10000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	15000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	15000.00
21. OTHER DISBURSEMENTS .....	3000.00	10500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	51109.07	231240.38

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	266402.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	139418.20
25. SUBTOTAL (add Line 23 and Line 24).....	405820.44
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	51109.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	354711.37

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 77  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Breakfield**

Mailing Address **PO Box 361**

City **Flowery Branch** State **GA** Zip Code **30542-0007**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Breakfield & Associates Llc** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 08 / 2013**

**Transaction ID : AAAD23659F60B41B5BD4**

Amount of Each Receipt this Period  
**350.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kim Mansfield**

Mailing Address **1025 Airport Parkway**

City **Gainesville** State **GA** Zip Code **30501-6813**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 16 / 2013**

**Transaction ID : A815971D21C22417786F**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Bryan Kattelmann**

Mailing Address **4626 Montclair Cir**

City **Gainesville** State **GA** Zip Code **30506-5132**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Ampco Products** Occupation **Marketing**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 17 / 2013**

**Transaction ID : A9E9B897C6E394816966**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1850.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James C Weidner**

Mailing Address 208 Crestview Rd

City State Zip Code  
Demorest GA 30535-2500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2013

**Transaction ID : A2C201153232A4807919**

Amount of Each Receipt this Period  
1600.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew S. Wright**

Mailing Address PO Box 2584

City State Zip Code  
Alexandria VA 22301-0584

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Polsinelli Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 21 / 2013

**Transaction ID : A4D5DDDBCE4444DFCB89**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mitch Glazier**

Mailing Address 7313 Durbin Terrace

City State Zip Code  
Bethesda MD 20817-6127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Recording Industry Assn of America Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2013

**Transaction ID : A7A7A1996379A40998DA**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2850.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brandon Clark**

Mailing Address 112 N. Union Street

City State Zip Code  
Alexandria VA 22314-3245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Small Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : A005FC2A1C3D845D6BE9**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Martha Martin**

Mailing Address 405 Highway 60

City State Zip Code  
Hoschton GA 30548-1530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Phil-Mart Transportation Trucking

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 07 / 2013

**Transaction ID : A9C97A84799F7403AB00**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Laird Miller**

Mailing Address 4515 Arlington Ct

City State Zip Code  
Gainesville GA 30506-5130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Medical Park Pharmacy Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 03 / 2013

**Transaction ID : AF247C7621E244712974**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donald Stanley**

Mailing Address **PO Box 1345**

City **Cleveland** State **GA** Zip Code **30528-0025**

FEC ID number of contributing federal political committee. **C**

Name of Employer **City Of Cleveland** Occupation **Mayor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 19 / 2013**

**Transaction ID : AE84D896ECBEE4B42B8B**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Wendi Simpson**

Mailing Address **254 Sorrento Cir.**

City **Gainesville** State **GA** Zip Code **30506-1704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Simpson Cpmpany** Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 16 / 2013**

**Transaction ID : A46FB7FAC02004FE9B4D**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Lenard Collins**

Mailing Address **2402 Hawthorne PI**

City **Gainesville** State **GA** Zip Code **30506-1925**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 05 / 2013**

**Transaction ID : A2B548BEF2938456FB58**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Todd Thorpe**

Mailing Address 1101 16th St NW  
Ste 500

City Washington State DC Zip Code 20036-4815

FEC ID number of contributing federal political committee. **C**

Name of Employer Bockorny Group Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : AFB6DA04AB4044DAEBFB**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Tim Gilmer**

Mailing Address 5175 Clarks Bridge Rd

City Gainesville State GA Zip Code 30506-2955

FEC ID number of contributing federal political committee. **C**

Name of Employer Lamb, Britt, Gilmer & Assoc. Occupation Sales & Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : A8BB3193FBAF345A1B95**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Wilheit**

Mailing Address 1072 Farmhouse Rd

City Gainesville State GA Zip Code 30506-1724

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AB23B474838CC46EFA7F**

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1900.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tim Williams**

Mailing Address 3571 Todd Dr

City Douglasville State GA Zip Code 30135-2548

FEC ID number of contributing federal political committee. **C**

Name of Employer Greystone Power Corp. Occupation VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : A8DAA55CE235C461199E**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Tracy Vardeman**

Mailing Address 911 Chattahoochee Dr

City Gainesville State GA Zip Code 30501-2303

FEC ID number of contributing federal political committee. **C**

Name of Employer Northeast Georgia Health System Occupation Vice President of Strategic Planning

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AD9DB1389387642DBA20**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Marchman**

Mailing Address 4418 Wild Turkey Way

City Gainesville State GA Zip Code 30506-3194

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A6ECF14F209A54C8DB3C**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1450.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 77  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Trevor Hooper**

Mailing Address 4688 Manor Dr

City State Zip Code  
Gainesville GA 30506-7520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Gainesville Radiology Radiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A4B26AE7B7FA64D37957**

Amount of Each Receipt this Period  
1600.00

**B.** Full Name (Last, First, Middle Initial)  
**Gary Copeland**

Mailing Address PO Box 1878

City State Zip Code  
Gainesville GA 30503-1878

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Overdrive Logistics Inc. Trucker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A0F0398E6E4374267BB0**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Benny Cain**

Mailing Address PO Box 907010

City State Zip Code  
Gainesville GA 30501-0901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cain Electric Co., Inc. Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 31 / 2013

**Transaction ID : A954A24B7700B44B6B77**

Amount of Each Receipt this Period  
1600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4200.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 77  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Martin Ellard**

Mailing Address 1509 Berkeley Ct., NE

City Gainesville State GA Zip Code 30501-1260

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : A3BD062679E974B14816**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Jack Chapman**

Mailing Address 2061 Beverly Rd

City Gainesville State GA Zip Code 30501-2034

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A95090AFE06004396AD8**

Amount of Each Receipt this Period  
 1600.00

**C.** Full Name (Last, First, Middle Initial)  
**John Addison Jr.**

Mailing Address 5816 Bethel Rd

City Clermont State GA Zip Code 30527-1925

FEC ID number of contributing federal political committee. **C**

Name of Employer Primerica Occupation CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : AB6C5BDACCE4849BEB41**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 13 OF 77

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Deborah Bailey**

Mailing Address 2019 Valley Rd NE

City Gainesville State GA Zip Code 30501-1240

FEC ID number of contributing federal political committee. **C**

Name of Employer Northeast Ga Medical Center Occupation Governmental Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 03 / 2013**

**Transaction ID : AD6913692B8B1456DA07**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Richard Locicero**

Mailing Address PO Box 658

City Gainesville State GA Zip Code 30503-0658

FEC ID number of contributing federal political committee. **C**

Name of Employer The Longstreet Clinic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 22 / 2013**

**Transaction ID : AFE907F5E3DED4529A9A**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Raleigh Robinson**

Mailing Address 197 Overlook Dr

City Gainesville State GA Zip Code 30506-1713

FEC ID number of contributing federal political committee. **C**

Name of Employer Walters Management Co. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 03 / 2013**

**Transaction ID : A3E9730C3A3B144F8873**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1450.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Phillip Wilheit Sr.**

Mailing Address 1072 Farmhouse Rd

City Gainesville State GA Zip Code 30506-1724

FEC ID number of contributing federal political committee. **C**

Name of Employer Wilheit Packaging Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A72D0304E3D894423B7D**

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
**Byron Kopman**

Mailing Address 650 Glenairy Dr. NE

City Atlanta State GA Zip Code 30328-4215

FEC ID number of contributing federal political committee. **C**

Name of Employer Schnitzer Southeast LLC Occupation Regional Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : A757973C5BFB54A29966**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**William Wade**

Mailing Address PO Box 1477

City Dawsonville State GA Zip Code 30534-0027

FEC ID number of contributing federal political committee. **C**

Name of Employer Alliance National Bank Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4206.48

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 25 / 2013

**Transaction ID : A0FAC954F8E564AA1BBC**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Walter Boomershine**

Mailing Address 4959 Habersham Walk

City Gainesville State GA Zip Code 30504-5145

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A7BF8C1494D30498AB54**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Margaret Williamson**

Mailing Address PO Box X

City Ellijay State GA Zip Code 30540-0061

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AA46CDDEA66F44C4FA1B**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jared Echols**

Mailing Address 7132 Sloan Stephens Rd

City Alto State GA Zip Code 30510-2323

FEC ID number of contributing federal political committee. **C**

Name of Employer Jaemor Farms Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AE50FBFAB3E7A4A52A43**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronnie Cain**

Mailing Address 7585 Lula Rd

City Lula State GA Zip Code 30554-2333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wauke Mountain Pharmacy Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 03 / 2013

**Transaction ID : AB13026BECFF347A2BEF**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Lee Martin**

Mailing Address 819 Honeysuckle Rd

City Gainesville State GA Zip Code 30501-1625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Gainesville Radiology Radiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 03 / 2013

**Transaction ID : A93868BC9CD7C44AD98E**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Kim Folger**

Mailing Address 1063 Trackside Ln.

City Blue Ridge State GA Zip Code 30513-8598

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Folger Gas, LLC

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 31 / 2013

**Transaction ID : A3405213294FA4A9AA7B**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Walters**

Mailing Address 2401 Island Dr

City Gainesville State GA Zip Code 30501-1252

FEC ID number of contributing federal political committee. **C**

Name of Employer Walters Management Co. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : AEDF7EDF9B1AD482BA8C**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Lane Jones**

Mailing Address PO Box 81

City Oakwood State GA Zip Code 30566-0002

FEC ID number of contributing federal political committee. **C**

Name of Employer Highland Beverage Service Occupation Distribution

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : ACEEF288B92F8485CAD8**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Alan Wayne**

Mailing Address 5763 Wayne Crest Dr.

City Flowery Branch State GA Zip Code 30542-3948

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AE3B02A98908A4474AEF**

Amount of Each Receipt this Period  
1600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3200.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Donald J. Campbell**

Mailing Address 1296 Sims St  
Ste B

City Gainesville State GA Zip Code 30501-3873

FEC ID number of contributing federal political committee. **C**

Name of Employer Negpsa Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 03 / 2013

**Transaction ID : A59DBA668CDB04D12B11**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Linda Clary Umberger**

Mailing Address 1157 Etowah River Rd.

City Dawsonville State GA Zip Code 30534-5420

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
680.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A46B224512E724892971**

Amount of Each Receipt this Period  
-250.00  
Returned Check

**C.** Full Name (Last, First, Middle Initial)  
**James Walters**

Mailing Address 2401 Island Dr

City Gainesville State GA Zip Code 30501-1252

FEC ID number of contributing federal political committee. **C**

Name of Employer Walters Management Co. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 05 / 2013

**Transaction ID : A74E6D152009043CBA45**

Amount of Each Receipt this Period  
1100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1850.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Pilgrim**

Mailing Address 4922 Glen Coe Pt

City Gainesville State GA Zip Code 30506-3102

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : ADBF9285510104B75A40**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Randall Frost**

Mailing Address PO Box 3280

City Gainesville State GA Zip Code 30503-3280

FEC ID number of contributing federal political committee. **C**

Name of Employer Stewart Melvin Frost Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : AD22190FA279040CF801**

Amount of Each Receipt this Period  
**1600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Stewart**

Mailing Address 101 Oakland Hills Ct

City Duluth State GA Zip Code 30097-2047

FEC ID number of contributing federal political committee. **C**

Name of Employer Honeywell Occupation Controller

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 25 / 2013

**Transaction ID : ACF00E404AB224DE8B1B**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2600.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas Ross**

Mailing Address 5765 Long Grove Dr

City Atlanta State GA Zip Code 30328-6209

FEC ID number of contributing federal political committee. **C**

Name of Employer Morgan Stanley Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : A51C34FB6E7BC4605A85**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jerry Boling**

Mailing Address 229 Wells Rd

City Homer State GA Zip Code 30547-1836

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : AD9260EA6CBCF42B9B1A**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Linda Clary Umberger**

Mailing Address 1157 Etowah River Rd.

City Dawsonville State GA Zip Code 30534-5420

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
930.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A33FF7C33C87141209A1**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Hirschmann**

Mailing Address 4052 Seminary Road

City Alexandria State VA Zip Code 22304-1646

FEC ID number of contributing federal political committee. **C**

Name of Employer William & Jensen Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : AB35BDD18E8604EDC922**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Bennett Jr.**

Mailing Address 1200 Sherwood Park Dr NE

City Gainesville State GA Zip Code 30501-3445

FEC ID number of contributing federal political committee. **C**

Name of Employer Bennett Family Dentistry Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A3B8F921BB5884BC38E2**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**June Stanford**

Mailing Address 165 Hemlock Dr

City Suches State GA Zip Code 30572-4209

FEC ID number of contributing federal political committee. **C**

Name of Employer Appalachian Judicial Circuit Occupation Legal Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : A8D2632C8EEDA4AF9B82**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Counte Cooley**

Mailing Address 2908 Club PI

City State Zip Code  
Gainesville GA 30506-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Electronic Sales Co Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 14 / 2013

**Transaction ID : AE5EB7B04292A4A519A3**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth Clary**

Mailing Address 5635 Whitner Dr. NW

City State Zip Code  
Atlanta GA 30327-4746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ken Clary and Company Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 03 / 2013

**Transaction ID : A75F99617C33A4616AD5**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Lawrence Lykins**

Mailing Address 2344 Island Dr

City State Zip Code  
Gainesville GA 30501-1255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1550.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 29 / 2013

**Transaction ID : A923390403F7E4E8C867**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sandra Borrow**

Mailing Address **PO Box 1225**

City **Cornelia** State **GA** Zip Code **30531-1020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JSB, Inc.** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 07 / 2013**

**Transaction ID : A2481765BEAF64C53A02**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**John Phillips**

Mailing Address **PO Box 1123**

City **Toccoa** State **GA** Zip Code **30577-1419**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Philips Group Inc.** Occupation **Security Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 05 / 2013**

**Transaction ID : A08362CDB07744061973**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Barry Kives**

Mailing Address **2289 Arbor Hill Rd**

City **Canton** State **GA** Zip Code **30115-7007**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Southern Polyurethanes** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 17 / 2013**

**Transaction ID : A281AB9E9F90A4378B52**

Amount of Each Receipt this Period  
**2600.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5700.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tommy Ford**

Mailing Address **PO Box 401**

City **Williamson** State **GA** Zip Code **30292-0401**

FEC ID number of contributing federal political committee. **C**

Name of Employer **24/7 One Call LLC** Occupation **Bail Bondsman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 03 / 2013**

**Transaction ID : A764A078DA4B24090A8E**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence Youhanaian**

Mailing Address **3386 Small Woods Ln**

City **Gainesville** State **GA** Zip Code **30506-1896**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 30 / 2013**

**Transaction ID : A5A5E0CAAB6D34A84A73**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Scott Echols**

Mailing Address **PO Box 3266**

City **Cumming** State **GA** Zip Code **30028-6518**

FEC ID number of contributing federal political committee. **C**

Name of Employer **One Call, Inc.** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 03 / 2013**

**Transaction ID : A018CEB1F2D4A4735ADB**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1200.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sheri Hooper**

Mailing Address 4688 Manor Dr

City Gainesville State GA Zip Code 30506-7520

FEC ID number of contributing federal political committee. **C**

Name of Employer Interactive Neighborhood for Kids Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AFCE0F3D4DCA14F6C986**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Larry Miller**

Mailing Address 720 Atlanta Country Club Dr SE

City Marietta State GA Zip Code 30067-4718

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A755A33BFA1664BB4919**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Hansard**

Mailing Address PO Box 1937

City Cumming State GA Zip Code 30028-1937

FEC ID number of contributing federal political committee. **C**

Name of Employer Hansard Insurance Agency Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : ADC011850CE8247BEBE2**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Hensley**

Mailing Address **PO Box 558**

City **Baldwin** State **GA** Zip Code **30511-0558**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Fieldale Farms** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 14 / 2013**

**Transaction ID : A432E03D828E94BCDA64**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Douglas McMahan**

Mailing Address **PO Box 1519**

City **Gainesville** State **GA** Zip Code **30503-1519**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 07 / 2013**

**Transaction ID : AA636329CF5BB458A857**

Amount of Each Receipt this Period  
**1600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Adam Malone**

Mailing Address **4509 Belvedere PI SE**

City **Marietta** State **GA** Zip Code **30067-4082**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 14 / 2013**

**Transaction ID : A2CED544E431E47F2A75**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3600.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eric Bennett**

Mailing Address 1920 Dr. Bramblett Rd.

City State Zip Code  
Cumming GA 30028-9120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 03 / 2013

**Transaction ID : A259BEE3C1430448591F**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jimmy Tallent**

Mailing Address PO Box 398

City State Zip Code  
Blairsville GA 30514-0398

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
United Community Bank Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 29 / 2013

**Transaction ID : ABCA79BE04D8548C0947**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Chip Koplín**

Mailing Address PO Box 28062

City State Zip Code  
Macon GA 31221-8062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
Schnitzer Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 07 / 2013

**Transaction ID : A829641670AEF4EFAB35**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carol Burrell**

Mailing Address 4672 Manor Dr

City Gainesville State GA Zip Code 30506-7520

FEC ID number of contributing federal political committee. **C**

Name of Employer Northeast Georgia Health System Occupation President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A9B60414485FA415285C**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jeffery Hunt**

Mailing Address 5385 Highway 254

City Cleveland State GA Zip Code 30528-6347

FEC ID number of contributing federal political committee. **C**

Name of Employer CBandT Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : ADD516ED1761461BB33**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**David Bentley**

Mailing Address 171 Mystic Ln.

City Winder State GA Zip Code 30680-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer Pfaff USA Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AD82C00666B6E488BBFD**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**950.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Howard Slaughter**

Mailing Address **PO Box 296**

City **Epworth** State **GA** Zip Code **30541-0296**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **468.20**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 01 / 2013**

**Transaction ID : A99787F6B96474C19B54**

Amount of Each Receipt this Period  
**468.20**

In-kind: **Event Catering**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Jennifer Wade**

Mailing Address **23 Nugget Lane**

City **Dawsonville** State **GA** Zip Code **30534-3182**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Lumpkin County Board of Education** Occupation **Educator**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 27 / 2013**

**Transaction ID : A2A5289D8FC91455DB99**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Richard Riley**

Mailing Address **230 Dixon Dr**

City **Gainesville** State **GA** Zip Code **30501-2902**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 14 / 2013**

**Transaction ID : A5ABA9E644EFE4B3DA97**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1218.20**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jordan Collins**

Mailing Address 4833 T Martin Rd

City Gainesville State GA Zip Code 30506-2805

FEC ID number of contributing federal political committee. **C**

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AB648428AF9934A8084D**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Steve Adams**

Mailing Address 2923 Club PI

City Gainesville State GA Zip Code 30506-1719

FEC ID number of contributing federal political committee. **C**

Name of Employer Lawrence Pharmacy Occupation Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : AC1779045835A4B5DB88**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Cobb**

Mailing Address 4639 Montclair Cir.

City Gainesville State GA Zip Code 30506-5133

FEC ID number of contributing federal political committee. **C**

Name of Employer Gainesville Neurology Group Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AD0675872A1AD41AD879**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 77  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joe Wood**

Mailing Address **PO Box 1058**

City **Gainesville** State **GA** Zip Code **30503-1058**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Turner, Wood, Smith** Occupation **Insurance Agent**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 07 / 2013**

**Transaction ID : A0C4A7A07EBC54402B6B**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Patsy Cohen**

Mailing Address **210 Mandalay Rd.**

City **Gainesville** State **GA** Zip Code **30501-1439**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Bella Realty** Occupation **Realtor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 03 / 2013**

**Transaction ID : ADF0D7436C9724EDF82F**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**William Bagwell Jr.**

Mailing Address **PO Box 872**

City **Gainesville** State **GA** Zip Code **30503-0872**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Homestead Investments Llc** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 07 / 2013**

**Transaction ID : A031EE146DE9A43E685F**

Amount of Each Receipt this Period  
**1100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2350.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony Herdener**

Mailing Address 2729 Longstreet Way

City Gainesville State GA Zip Code 30506-1865

FEC ID number of contributing federal political committee. **C**

Name of Employer Northeast Georgia Health System Occupation CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A693FDB2784EC4BCA1A**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Leigh Joya**

Mailing Address 3292 Thompson Bridge Rd.  
Ste. 320

City Gainesville State GA Zip Code 30506-1561

FEC ID number of contributing federal political committee. **C**

Name of Employer White Oaks at Lanier Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AF3E45865E8EF442F8C3**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Sandra Borrow**

Mailing Address PO Box 1225

City Cornelia State GA Zip Code 30531-1020

FEC ID number of contributing federal political committee. **C**

Name of Employer JSB, Inc. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : A69587DD6236A493D9C8**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1200.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Bagwell Jr.**

Mailing Address **PO Box 872**

City **Gainesville** State **GA** Zip Code **30503-0872**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Homestead Investments Llc** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 03 / 2013**

**Transaction ID : AB5E7486003F5430C890**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**David Chester**

Mailing Address **PO Box 111**

City **Gainesville** State **GA** Zip Code **30503-0111**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Wilheit Packaging** Occupation **VP**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 17 / 2013**

**Transaction ID : A7185470059784567A2E**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Woodys Land Co., Llc**

Mailing Address **PO Box 439**

City **Clermont** State **GA** Zip Code **30527-0439**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 14 / 2013**

**Transaction ID : A160E308A0E80405BAE7**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin Woody**

Mailing Address **PO Box 439**

City **Clermont** State **GA** Zip Code **30527-0439**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Woodys Land Co Llc** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 14 / 2013**

**Transaction ID : AEA39460CCA46440985C**

Amount of Each Receipt this Period  
**1000.00**

**[MEMO ITEM]**  
Partnership: Woodys Land Co., Llc

**B.** Full Name (Last, First, Middle Initial)  
**The Law Office Of Ryan M Reid Llc**

Mailing Address **615 Green St NW**

City **Gainesville** State **GA** Zip Code **30501-3378**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 16 / 2013**

**Transaction ID : AD68A14D6DA3D4535AB6**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ryan Reid**

Mailing Address **815 Green St NW**

City **Gainesville** State **GA** Zip Code **30501-0000**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 16 / 2013**

**Transaction ID : ADD8F030AA8054187B0B**

Amount of Each Receipt this Period  
**500.00**

**[MEMO ITEM]**  
Partnership: The Law Office Of Ryan M Reid Llc

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**

**500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**S&B Leasing and Rental, LLC**

Mailing Address 2145 Dawsonville Hwy.

City Gainesville State GA Zip Code 30501-1005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : A4D2D52DCF3E845FFA98**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Philip Burton**

Mailing Address 2145 Dawsonville Hwy.

City Gainesville State GA Zip Code 30501-1005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**S&B Leasing and Rental, LLC**  
 Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : A9D6E0B2C1C80414FB4F**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
 Partnership: S&B Leasing and Rental, LLC

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

64518.20

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**

Mailing Address 100 DAINGERFIELD ROAD

City Alexandria State VA Zip Code 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A99E90A3C8F8D4127845**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1891 PRESTON WHITE DRIVE

City Reston State VA Zip Code 20191-4326

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : ACC1E0861B2D94C378BD**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dunagan for Gainesville**

Mailing Address 1865 Thompson Bridge Rd

City Gainesville State GA Zip Code 30501-1184

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A7EE8ADEB59794CA6B7C**

Amount of Each Receipt this Period  
 250.00

Permissible Funds

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

A. Full Name (Last, First, Middle Initial)  
**THE RECORDING INDUSTRY ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address **1025 F STREET NW  
10TH FLOOR**  
City **Washington** State **DC** Zip Code **20004-1433**

FEC ID number of contributing federal political committee. **C C00009357**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**12 / 12 / 2013**

Transaction ID : **A95CD13F35EFC440CA47**

Amount of Each Receipt this Period  
**1000.00**

B. Full Name (Last, First, Middle Initial)  
**Credit Union National Assoc. PAC**

Mailing Address **601 Pennsylvania Ave NW Ste 600**  
City **Washington** State **DC** Zip Code **20004-2601**

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **3000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**12 / 05 / 2013**

Transaction ID : **A11677B8C24D44B639A3**

Amount of Each Receipt this Period  
**1000.00**

C. Full Name (Last, First, Middle Initial)  
**MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **2111 MCDONALDS DR  
DEPT 213**  
City **Oak Brook** State **IL** Zip Code **60523-5500**

FEC ID number of contributing federal political committee. **C C00063164**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **2500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**12 / 03 / 2013**

Transaction ID : **A4F9DB47C3D524CECA2A**

Amount of Each Receipt this Period  
**2500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**4500.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A. AAJ PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 777 6th St NW Ste 200  
 City Washington State DC Zip Code 20001-3707  
 FEC ID number of contributing federal political committee. **C C00024521**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 04 / 2013  
**Transaction ID : A142FA16807054EE6B11**  
 Amount of Each Receipt this Period  
 1000.00

**B. Altria Group, Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 Constitution Ave NW Ste 400W  
 City Washington State DC Zip Code 20001-2155  
 FEC ID number of contributing federal political committee. **C C00089136**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013  
**Transaction ID : AF7971A9F07E94BDBBD5**  
 Amount of Each Receipt this Period  
 1000.00

**C. National Chicken Council PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 15th St. NW #930  
 City Washington State DC Zip Code 20005-2622  
 FEC ID number of contributing federal political committee. **C C00034272**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013  
**Transaction ID : A8794D9CE05CA42BBBB4**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A. MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 2111 MCDONALDS DR  
DEPT 213

City State Zip Code  
Oak Brook IL 60523-5500

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 19 / 2013

**Transaction ID : AF8AD82DA0654416D81E**

Amount of Each Receipt this Period  
2500.00

**B. AMERICAN CABLE ASSOCIATION INC PAC (ACA PAC)**

Full Name (Last, First, Middle Initial)  
AMERICAN CABLE ASSOCIATION INC PAC (ACA PAC)

Mailing Address ONE PARKWAY CENTER, SUITE 212

City State Zip Code  
PITTSBURGH PA 15220

FEC ID number of contributing federal political committee. **C** C00364109

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 30 / 2013

**Transaction ID : A116D70B520EC4518979**

Amount of Each Receipt this Period  
1000.00

**C. National Cable & Telecommunications PAC**

Full Name (Last, First, Middle Initial)  
National Cable & Telecommunications PAC

Mailing Address 25 Massachusetts Ave NW Ste 100

City State Zip Code  
Washington DC 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 05 / 2013

**Transaction ID : A31057E278FE44304847**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Society of Ind. Gas Marketers PAC**

Mailing Address 3930 Pender Dr Ste 340

City State Zip Code  
Fairfax VA 22030-0986

FEC ID number of contributing federal political committee. **C** C00120030

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : A1ADB175C42A84BB9A70**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**

Mailing Address 1771 N STREET NW

City State Zip Code  
Washington DC 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A165F45515E9947D88ED**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Academy of Ophthalmology PAC**

Mailing Address 655 Beach Street

City State Zip Code  
San Francisco CA 94109-1342

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 08 / 2013

**Transaction ID : AE8CF5E4BE27F4123911**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial)  
EYEPAC POLITICAL ACTION COMMITTEE FOR AMERICAN SOCIETY OF CATARACT AND REFRACTIVE SURGERY

**A.** Mailing Address 4000 LEGATO ROAD, SUITE 700

City	State	Zip Code
Fairfax	VA	22033-4055

FEC ID number of contributing federal political committee. **C** C00171504

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : AA419E64147CF4483A29**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Full Name (Last, First, Middle Initial)  
**KochPAC**

**B.** Mailing Address 600 14th St NE Ste 800

City	State	Zip Code
Washington	DC	20002-5414

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A516BFDC04DC747B5BFC**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Full Name (Last, First, Middle Initial)  
**ERIC PAC**

**C.** Mailing Address 25 E Main St Ste 200

City	State	Zip Code
Richmond	VA	23219-2109

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : AC7087746DBEA40B0B79**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_ 7000.00

\_\_\_\_\_

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**General Electric PAC**

Mailing Address 1299 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2400

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : AE7CA320DE8464294B87**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
ECHOSTAR CORPORATION AND DISH NETWORK CORPORATION PAC (ECHOSTAR DISH NETWORK PAC)

Mailing Address 1110 VERMONT AVENUE NW SUITE 750

City Washington State DC Zip Code 20005-6322

FEC ID number of contributing federal political committee. **C C00330647**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : A6F156A89CD1A455F84F**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**National Apartment Association PAC**

Mailing Address 4300 Wilson Blvd Ste 400

City Arlington State VA Zip Code 22203-4168

FEC ID number of contributing federal political committee. **C C00113241**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A66211A719D2649EEBD7**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CLEAR CHANNEL COMMUNICATIONS INC. PAC**

Mailing Address 200 E. BASSE ROAD

City State Zip Code  
SAN ANTONIO TX 78209

FEC ID number of contributing federal political committee. **C C00279216**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A7AC859A12EF642B2883**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Equifax PAC**

Mailing Address PO Box 4081

City State Zip Code  
Atlanta GA 30302-4081

FEC ID number of contributing federal political committee. **C C00143867**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A2DB77E5D361C4CF4B37**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 51 MADISON AVENUE  
ROOM 1109

City State Zip Code  
New York NY 10010-1603

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A1D8A64E017C84CA984F**

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial)  
SECURITY FINANCE CORPORATION OF SPARTANBURG AND AFFILIATES POLITICAL ACTION COMMITTEE

A. Mailing Address PO BOX 811

City State Zip Code  
Spartanburg SC 29304-0811

FEC ID number of contributing federal political committee. **C C00387753**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

Transaction ID : **A1D43593686374482B3F**

Amount of Each Receipt this Period  
 1000.00

B. Full Name (Last, First, Middle Initial)  
**Tencate PAC**

Mailing Address 101 Constitution Ave NW  
9-C08E

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C C00523605**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

Transaction ID : **ABF7A079C87BA40C6BFD**

Amount of Each Receipt this Period  
 500.00

C. Full Name (Last, First, Middle Initial)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

Mailing Address 11921 FREEDOM DRIVE  
SUITE 1100

City State Zip Code  
Reston VA 20190-5634

FEC ID number of contributing federal political committee. **C C00447565**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 09 / 2013

Transaction ID : **A97BA16ED708846DFAC2**

Amount of Each Receipt this Period  
 2000.00

**SUBTOTAL** of Receipts This Page (optional).....

3500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PFIZER INC. PAC**

Mailing Address **235 EAST 42ND STREET**

City **New York** State **NY** Zip Code **10017-5703**

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

**Transaction ID : A447583C10129477DB88**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Troutman Sanders LLP PAC**

Mailing Address **600 Peachtree St NE Ste 5200**

City **Atlanta** State **GA** Zip Code **30308-2231**

FEC ID number of contributing federal political committee. **C C00311142**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 05 / 2013**

**Transaction ID : ADD1F86A3A6DC4711A6E**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Aflac, Inc. PAC**

Mailing Address **1932 Wynnton Rd**

City **Columbus** State **GA** Zip Code **31999-0001**

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : A677F93EBC0834E20B69**

Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE RECORDING INDUSTRY ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 1025 F STREET NW  
10TH FLOOR

City Washington State DC Zip Code 20004-1433

FEC ID number of contributing federal political committee. **C C00009357**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A775F058390F54F6FA5B**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Majority Committee PAC**

Mailing Address PO Box 10134

City Bakersfield State CA Zip Code 93389-0134

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : A340F556357584FAEBF5**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**General Electric PAC**

Mailing Address 1299 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2400

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A63A855CD4C354A8A964**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC**

Mailing Address 25 Massachusetts Ave NW Ste 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : A68589437821840BDB73**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Society Anesthesiologists PAC**

Mailing Address 520 N Northwest Hwy

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : AAD98430F3E4D4AE8EA**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Comcast Corporation PAC**

Mailing Address 1701 John F Kennedy Blvd

City Philadelphia State PA Zip Code 19103-2833

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : A3CFD87496611450C973**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Bankers Association PAC**

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A73C15DC08521494485C**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE**

Mailing Address 469 HOSPITAL DR. SUITE C

City Gastonia State NC Zip Code 28054-4779

FEC ID number of contributing federal political committee. **C C00405555**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A64AAE3CC702240A481B**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Balch & Bingham LLP Federal PAC**

Mailing Address 1901 6th Ave N Ste 1800 Ste 1800

City Birmingham State AL Zip Code 35203-2623

FEC ID number of contributing federal political committee. **C C00358440**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : AC2605EED29DD428EB15**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A. National Marine Manufacturers Assoc. Boat PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 444 North Capitol Street NW  
Suite 645

City Washington State DC Zip Code 20001-1559

FEC ID number of contributing federal political committee. **C C00245548**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : A89882FE133E6451F855**

Amount of Each Receipt this Period  
5000.00

**B. AMERICAN ACADEMY OF NEUROLOGY BRAINPAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 401 C ST NE

City Washington State DC Zip Code 20002-5817

FEC ID number of contributing federal political committee. **C C00435933**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : A51A8E578D65C4F30B1A**

Amount of Each Receipt this Period  
1000.00

**C. American Optometric Assoc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1505 Prince St Ste 300

City Alexandria State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : AC1E1E47D958142C8990**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tencate PAC**

Mailing Address 101 Constitution Ave NW  
9-C08E

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00523605**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : AE69DF38B31F342948E8**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Action Comm. for Rural Electrification**

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A85B2E923FCB74514A2D**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F STREET, NW  
SUITE 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A80D6DF119F3141F880D**

Amount of Each Receipt this Period  
**2000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UNITED TECHNOLOGIES CORP PAC**

Mailing Address 1101 Pennsylvania Ave. NW 10th Flo

City Washington State DC Zip Code 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : A920D6CE4322549AC9AA**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**VOICE FOR FREEDOM**

Mailing Address 2700 CUMBERLAND PARKWAY, SUITE 150

City ATLANTA State GA Zip Code 30339

FEC ID number of contributing federal political committee. **C** C00409805

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A86A1A15DD10245188C4**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**EBAY INC-COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE**

Mailing Address 228 S. WASHINGTON ST.  
STE. 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : A286A7630730A427C95F**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Aaron's, Inc. PAC**

Mailing Address 1015 Cobb Place Blvd.

City Kennesaw State GA Zip Code 30144-3672

FEC ID number of contributing federal political committee. **C C00459933**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : AA3759A42AA904AB6A76**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Franchising PAC**

Mailing Address 1501 K St NW Ste 350

City Washington State DC Zip Code 20005-1412

FEC ID number of contributing federal political committee. **C C00084491**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : AD9E16DCE846F4FDA89E**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**INTERCONTINENTALEXCHANGE INC PAC**

Mailing Address 2100 RIVEREDGE PARKWAY, SUITE 500

City Atlanta State GA Zip Code 30328-4676

FEC ID number of contributing federal political committee. **C C00443168**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : A579509963AC642E8B5A**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 77  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**InsurPAC**

Mailing Address 412 1st St SE Ste 300

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : ABDD76A8081674736B10**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

73250.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Howard Slaughter</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 296		Amount of Each Disbursement this Period 468.20 <b>Transaction ID : B99787F6B96474C19B54</b>
City Epworth	State GA	
Zip Code 30541-0296	Purpose of Disbursement In-kind:Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 937.88 <b>Transaction ID : B9625090C6D844A52AA1</b>
City Gainesville	State GA	
Zip Code 30501-2074	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 301 N Walnut St Ste 1002		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : BE9DEA1BDC4C347D590B</b>
City Wilmington	State DE	
Zip Code 19801-2917	Purpose of Disbursement Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1414.03
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Red Pledge</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>02</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		02		2013
M M	/	D D	/	Y Y Y Y									
10		02		2013									
Mailing Address 53 Lake Morton Dr Ste 110		Amount of Each Disbursement this Period											
City Lakeland State FL Zip Code 33801-5344		<table border="1"> <tr> <td colspan="4">3100.18</td> </tr> </table>		3100.18									
3100.18													
Purpose of Disbursement Transaction Fees		Transaction ID : B8A6FFE5AC99B467F903											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Red Pledge</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		03		2013
M M	/	D D	/	Y Y Y Y									
10		03		2013									
Mailing Address 53 Lake Morton Dr Ste 110		Amount of Each Disbursement this Period											
City Lakeland State FL Zip Code 33801-5344		<table border="1"> <tr> <td colspan="4">15.19</td> </tr> </table>		15.19									
15.19													
Purpose of Disbursement Transaction Fees		Transaction ID : BBC6853BBC3A44B6E84F											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. Professional Data Services</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		03		2013
M M	/	D D	/	Y Y Y Y									
10		03		2013									
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period											
City Athens State GA Zip Code 30606-6191		<table border="1"> <tr> <td colspan="4">3063.64</td> </tr> </table>		3063.64									
3063.64													
Purpose of Disbursement Compliance Consulting		Transaction ID : BF69261C4DEED4D9E87C											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>3100.18</td> </tr> </table>	3100.18
3100.18		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Theodore Company LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2013</b>
Mailing Address <b>PO Box 320412</b>		Amount of Each Disbursement this Period <b>1373.38</b> Transaction ID : <b>B88F00C7AD51C4786B95</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22320-4412</b>	Purpose of Disbursement <b>Fundraising Consulting</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mclaughlin &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2013</b>
Mailing Address <b>919 Prince St</b>		Amount of Each Disbursement this Period <b>11900.00</b> Transaction ID : <b>B8A184EF342D44DF1A19</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22314-3008</b>	Purpose of Disbursement <b>Polling</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 04 / 2013</b>
Mailing Address <b>400 W Covina Blvd</b>		Amount of Each Disbursement this Period <b>46.20</b> Transaction ID : <b>B3BC56507922941ED97B</b>
City <b>San Dimas</b>	State <b>CA</b>	
Zip Code <b>91773-2954</b>	Purpose of Disbursement <b>Payroll Expenses</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>13319.58</b>
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 301 N Walnut St Ste 1002		Amount of Each Disbursement this Period 3.04 <b>Transaction ID : BD15329F084E146A08BD</b>
City Wilmington	State DE	
Zip Code 19801-2917	Purpose of Disbursement Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 140 West St		Amount of Each Disbursement this Period 71.61 <b>Transaction ID : BADC1BEBBDCE94B039A6</b>
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Cell Phone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 448.99 <b>Transaction ID : B1F2AE31CC7D24325AAB</b>
City San Dimas	State CA	
Zip Code 91773-2954	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	523.64
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 937.89 Transaction ID : BE97840F2DA1D44E1AAB
City Gainesville	State GA	
Zip Code 30501-2074	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 Transaction ID : B855A47E06E6E4242B11
City San Dimas	State CA	
Zip Code 91773-2954	Purpose of Disbursement Payroll Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2250.00 Transaction ID : BF5095E5FA2EA41C1B7C
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Software	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3234.09
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mule Camp Springs LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2013</b>
Mailing Address 3509 Tanners Mill Cir.		Amount of Each Disbursement this Period <b>1450.00</b> Transaction ID : <b>B9EC02B9EC147436D9FC</b>
City Gainesville	State GA	
Zip Code 30507-8839	Purpose of Disbursement Event Facility Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2013</b>
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period <b>447.50</b> Transaction ID : <b>B4C2264218FF74F3C8FB</b>
City San Dimas	State CA	
Zip Code 91773-2954	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2013</b>
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period <b>937.88</b> Transaction ID : <b>B33E66B41635A4B00919</b>
City Gainesville	State GA	
Zip Code 30501-2074	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2835.38</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 77			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : B637B4FEBE61846CC8B6</b>
City Athens State GA Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Red Pledge</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 53 Lake Morton Dr Ste 110		Amount of Each Disbursement this Period 36.68 <b>Transaction ID : BE38BC5BDD7B9443E8D3</b>
City Lakeland State FL Zip Code 33801-5344	Purpose of Disbursement CC Transaction Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 140 West St		Amount of Each Disbursement this Period 71.66 <b>Transaction ID : B4CB0C28EDDD042C0946</b>
City New York State NY Zip Code 10007-2141	Purpose of Disbursement Cell Phone	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1608.34
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement
Mailing Address 400 W Covina Blvd		M M / D D / Y Y Y Y 11 / 08 / 2013
City San Dimas State CA Zip Code 91773-2954	Purpose of Disbursement Payroll Expenses	Amount of Each Disbursement this Period 46.20
Candidate Name	Category/Type	<b>Transaction ID : BCC03BF251CD64C2B903</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement
Mailing Address 400 W Covina Blvd		M M / D D / Y Y Y Y 11 / 14 / 2013
City San Dimas State CA Zip Code 91773-2954	Purpose of Disbursement Payroll Taxes	Amount of Each Disbursement this Period 441.49
Candidate Name	Category/Type	<b>Transaction ID : B5C20A20D9F674C17B75</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Loree Anne Thompson</b>		Date of Disbursement
Mailing Address 909 Brenau Point Dr		M M / D D / Y Y Y Y 11 / 15 / 2013
City Gainesville State GA Zip Code 30501-2074	Purpose of Disbursement Salary	Amount of Each Disbursement this Period 937.89
Candidate Name	Category/Type	<b>Transaction ID : BAEE54A46A33A4340873</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1425.89
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lunas Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 200 Main St SW		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : BC291610C545E49A3B0F</b>
City Gainesville	State GA	
Zip Code 30501-3774	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mule Camp Springs LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 3509 Tanners Mill Cir.		Amount of Each Disbursement this Period 431.00 <b>Transaction ID : BCC4A4E8EB1D34CD49B9</b>
City Gainesville	State GA	
Zip Code 30507-8839	Purpose of Disbursement Event Facility Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 <b>Transaction ID : B2DC90627F8DF41ADA33</b>
City San Dimas	State CA	
Zip Code 91773-2954	Purpose of Disbursement Payroll Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1977.20
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Theodore Company LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 3185.99 <b>Transaction ID : B8AA36DBDD34D453EBA5</b>
City Alexandria	State VA	
Zip Code 22320-4412	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1519.66 <b>Transaction ID : B450F53CB205E47F7B89</b>
City Athens	State GA	
Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 434.75 <b>Transaction ID : BE4105572285B48449F5</b>
City San Dimas	State CA	
Zip Code 91773-2954	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5140.40
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 <b>Transaction ID : BFDA0A1B7F4B245BE9B8</b>
City San Dimas State CA Zip Code 91773-2954	Purpose of Disbursement Payroll Expenses	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 937.88 <b>Transaction ID : B05090C43EB2D4FD9952</b>
City Gainesville State GA Zip Code 30501-2074	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Red Pledge</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 53 Lake Morton Dr Ste 110		Amount of Each Disbursement this Period 142.85 <b>Transaction ID : B70D8C88E9F524880AE4</b>
City Lakeland State FL Zip Code 33801-5344	Purpose of Disbursement CC Transaction Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1126.93
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 77			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mule Camp Springs LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 3509 Tanners Mill Cir.		Amount of Each Disbursement this Period 114.36 <b>Transaction ID : B49E86DDEF9D44E24870</b>
City Gainesville	State GA	
Zip Code 30507-8839	Purpose of Disbursement Event Facility Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 407.74 <b>Transaction ID : B366066254C8C4AC5B63</b>
City San Dimas	State CA	
Zip Code 91773-2954	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 140 West St		Amount of Each Disbursement this Period 71.43 <b>Transaction ID : BAD9883174DA340D2979</b>
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Cell Phone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	593.53
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 937.89 Transaction ID : <b>BF6A1ADF372184FF99C1</b>
City Gainesville	State GA	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 Transaction ID : <b>B982F10F3DA294373B20</b>
City San Dimas	State CA	
Purpose of Disbursement Payroll Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 Transaction ID : <b>BBE6EACB72FB34BB7BED</b>
City San Dimas	State CA	
Purpose of Disbursement Payroll Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1030.29
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ma Gooch's Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 318 Main St. PO Box 3335		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : B6D0AEB4873F6454DA2D</b>
City Cleveland State GA Zip Code 30528-0058	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 937.88 <b>Transaction ID : BC29FEFD58EA542D5932</b>
City Gainesville State GA Zip Code 30501-2074	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 407.75 <b>Transaction ID : BB95770C29AD340B7844</b>
City San Dimas State CA Zip Code 91773-2954	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3345.63
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chattahoochee Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period 802.59 <b>Transaction ID : BEB320DC861C34E28A48</b>
City Lawrenceville State GA Zip Code 30043-8154	Purpose of Disbursement See Below	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 717.51 <b>Transaction ID : B964CF6D7C21D491490E</b> <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chattahoochee Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period 1767.34 <b>Transaction ID : B3932DFF8172D4D918DA</b>
City Lawrenceville State GA Zip Code 30043-8154	Purpose of Disbursement See Below	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2569.93
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chick-fil-A</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 400 Pearl Nix Pkwy		Amount of Each Disbursement this Period 76.80
City Gainesville	State GA	
Zip Code 30501-3554	Purpose of Disbursement Meeting Expense	Transaction ID : <b>B4AF2E5ADDE614B5781B</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 140 West St		Amount of Each Disbursement this Period 415.72
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Cell Phone	Transaction ID : <b>B8C48982051184A66B4C</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Atlas Pizza</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 104 Washington St NW		Amount of Each Disbursement this Period 92.43
City Gainesville	State GA	
Zip Code 30501-3623	Purpose of Disbursement Meeting Expense	Transaction ID : <b>BF552ED47986C41B6B25</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 364 Green St NE		Amount of Each Disbursement this Period 92.00
City Gainesville	State GA	
Zip Code 30501-3310	Purpose of Disbursement Postage	Transaction ID : <b>BB5F13D813C254920A59</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Createsend.com</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address Suite 11 Co. Clare, Ireland		Amount of Each Disbursement this Period 975.00
City	State	
Zip Code 0000	Purpose of Disbursement E-Marketing	Transaction ID : <b>B4BC8D3516F324EAF9C2</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chattahoochee Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period 1173.01
City Lawrenceville	State GA	
Zip Code 30043-8154	Purpose of Disbursement See Below	Transaction ID : <b>BB34C6C0C768148E8A9B</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1173.01
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Georgia Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 3110 Maple Dr NE Ste 150		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B70B63C02BE79414A9A7</b>
City Atlanta State GA Zip Code 30305-2650	Purpose of Disbursement Event Tickets	
Candidate Name <b>Georgia Republican Party</b>		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Createsend.com</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address Suite 11 Co. Clare, Ireland		Amount of Each Disbursement this Period 325.00 <b>Transaction ID : B3593C786A3934F40AB6</b>
City State Zip Code 0000	Purpose of Disbursement E-Marketing	
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hill Country BBQ</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 410 7th St. NW		Amount of Each Disbursement this Period 256.05 <b>Transaction ID : B9E5724A3B9434D92AB1</b>
City Washington State DC Zip Code 20004-2217	Purpose of Disbursement Event Catering	
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bullfeathers</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 410 1st St SE 410 First Stree SE		Amount of Each Disbursement this Period 72.28
City Washington State DC Zip Code 20003-0000	Purpose of Disbursement Meeting Expense	
Candidate Name		Transaction ID : B26F2E2FA25FC4AFCA25 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chattahoochee Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period 178.12
City Lawrenceville State GA Zip Code 30043-8154	Purpose of Disbursement See Below	
Candidate Name		Transaction ID : B597539E21EF846219A9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 178.12
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meeting Expense	
Candidate Name		Transaction ID : B0BE2CFFB17AC4AB693C <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	178.12
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chattahoochee Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period 781.19 <b>Transaction ID : BC567E2E386A04C9084D</b>
City Lawrenceville	State GA Zip Code 30043-8154	
Purpose of Disbursement See Below	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 781.19 <b>Transaction ID : B73F010A04A664599BD1</b> <b>[MEMO ITEM]</b>
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Business Card</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address PO Box 15469		Amount of Each Disbursement this Period 2036.50 <b>Transaction ID : BBE460180F62546B3B3E</b>
City Wilmington	State DE Zip Code 19886-5469	
Purpose of Disbursement See Below	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2817.69
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Marriott Hotels</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 10400 Fernwood Rd		Amount of Each Disbursement this Period 305.90
City Bethesda	State MD	
Zip Code 20817-1102	Purpose of Disbursement Lodging	Transaction ID : <b>BD2BECD471A13449D922</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 1730.60
City Atlanta	State GA	
Zip Code 30354-1989	Purpose of Disbursement Airfare	Transaction ID : <b>BF830DDF5ABBE45F39AF</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 290.87
City Gainesville	State GA	
Zip Code 30501-2074	Purpose of Disbursement See Below	Transaction ID : <b>BAE101CFE33194F10BF5</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	290.87
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Holiday Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 400 EE Butler Pkwy		Amount of Each Disbursement this Period 239.05
City Gainesville	State GA	
Zip Code 30501-4525	Purpose of Disbursement Event Facility Rental & Catering	Transaction ID : B161010C08FEB45B28EB
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 115.00
City Gainesville	State GA	
Zip Code 30501-2074	Purpose of Disbursement See Below	Transaction ID : B643E83506BA943AE816
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 364 Green St NE		Amount of Each Disbursement this Period 115.00
City Gainesville	State GA	
Zip Code 30501-3310	Purpose of Disbursement Postage	Transaction ID : B9962104A4A794DCCBF0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	115.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chattahoochee Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period 138.65 <b>Transaction ID : B470247BFFF564FC5860</b>
City Lawrenceville	State GA Zip Code 30043-8154	
Purpose of Disbursement See Below	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 140 West St		Amount of Each Disbursement this Period 138.65 <b>Transaction ID : B907A3AF0A1B54D2D841</b> <b>[MEMO ITEM]</b>
City New York	State NY Zip Code 10007-2141	
Purpose of Disbursement Cell Phone	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	138.65
<b>TOTAL</b> This Period (last page this line number only).....	47958.07

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 77			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Collins for Congress**

Full Name (Last, First, Middle Initial) <b>A. FL-13 Nominee Fund</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013		
Mailing Address 320 1st Street SE					
City Washington	State DC	Zip Code 20003-1838	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : B822710F6E11B4AFB963		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Steve Daines for Montana</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013		
Mailing Address PO Box 1598					
City Helena	State MT	Zip Code 59624-1598	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : BFA5116EDF4F34A7F814		
Candidate Name Steven Daines					
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: MT	District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	3000.00