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FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

SECRETARY OF THE SENATE
05 NOV 10
PM 2:22

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

12FE4M5

MAC COLLINS FOR SENATE

ADDRESS (number and street)

P.O. Box 315

(Check if address is changed)

Towson Ave

GA

30237

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

WANDA.TSCHUDY@FARTHINK.NAT

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

10 30 2005

3. FEC IDENTIFICATION NUMBER ▶

C00387340

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer

Wanda Tschudy

Signature of Treasurer

Wanda Tschudy

Date

10 30 2005

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only	Office Use Only	Office Use Only	Office Use Only
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For further information contact:
Federal Election Commission
Toll Free 800-424-9630
Local 202-894-1100

FEC FORM 1
(Revised 02/2003)

FEB20042P0F

25020510522

6. TYPE OF COMMITTEE (Check One)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Michael Allen Collins, Sr.

Candidate Party Affiliation: Office Sought: House Senate President State: GA District:

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

8. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

- Corporation Corporation with Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

25020510523

Write or Type Committee Name

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name Wanda Tschudy

Mailing Address P.O. Box 25

Jonesboro

GA 30237

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 770-477-9454

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Wanda Tschudy

Mailing Address 2651 Barnes Road

Jonesboro

GA 30236

Title or Position CITY STATE ZIP CODE

Telephone number 770-477-9454

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

B. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

MCINTOSH STATE BANK

Mailing Address

PO BOX 3818

JACKSON

GA

30233

CITY

STATE

ZIP CODE

25020510525

*Call 11.05
P.O. Box 35
Jonesboro, GA 30231*

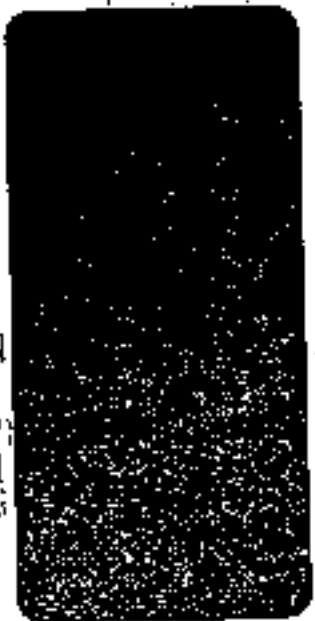
SECRETARY OF THE SENATE

05 NOV 14 PM 3:22

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

R-12

7005 0390 0003 8542 9598



RECEIVED
FEC MAIL
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NOV 10 A 10:03

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 237
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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11-03-05

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NEXT BUSINESS DAY DELIVERY

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25020510527

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