

**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 6491



Check if different than previously reported. (ACC)

ATHENS

GA

30604-6491

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00544684

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

GA

10

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
06 / 21 / 2022

in the State of

GA

(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
05 / 05 / 2022

through

M M / D D / Y Y Y Y
06 / 01 / 2022

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

BROWN, MEGAN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

BROWN, MEGAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
06 / 09 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 26

Write or Type Committee Name
COLLINS FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
05 05 2022

To:

M M / D D / Y Y Y Y
06 01 2022

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	18853.19	605146.18
(b) Total Contribution Refunds (from Line 20(d))	0.00	3400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	18853.19	601746.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	57891.06	513789.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	57891.06	513789.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	618807.17	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	686941.43	

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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

COLLINS FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
05 05 2022

To:

M M / D D / Y Y Y Y
06 01 2022

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).....**

17160.00

573150.87

(ii) Unitemized.....

1693.19

24995.31

(iii) TOTAL of contributions from individuals ▶

18853.19

598146.18

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

7000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

18853.19

605146.18

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

531000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

531000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

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)..... ▶

18853.19

1136146.18

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 26

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	57891.06	513789.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3400.00
21. OTHER DISBURSEMENTS	0.00	150.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	57891.06	517339.01

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	657845.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18853.19
25. SUBTOTAL (add Line 23 and Line 24).....	676698.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	57891.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	618807.17

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 26

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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)
ALLEN, MARION, A., ,

Mailing Address 115 HARRIS DR

City FORT VALLEY	State GA	Zip Code 31030-3584
---------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
8600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : A4770796F7A414456AF3

Amount of Each Receipt this Period

2800.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
BARROWS, TERRY, , ,

Mailing Address 786 CHESTERFIELD DR

City LAWRENCEVILLE	State GA	Zip Code 30044-5626
-----------------------	-------------	------------------------

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

Name of Employer NEXTRAN CORPORATION	Occupation MANAGER
---	-----------------------

Receipt For: 2022
☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼
3400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2022

Transaction ID : A3FF1E66A87E1499FA8E

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
GARLAND, BYRD, , ,

Mailing Address 246 E COLLEGE ST

City JACKSON	State GA	Zip Code 30233-2006
-----------------	-------------	------------------------

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

Name of Employer SMITH WELCH WEBB & WHITE	Occupation LAWYER
--	----------------------

Receipt For: 2022
☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2022

Transaction ID : AF2965B1D2B094C9680E

Amount of Each Receipt this Period

500.00

☐ Memo Item

3800.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
COLLINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GARLAND, TYLER, W., MRS.,

Mailing Address 246 E COLLEGE ST

City JACKSON	State GA	Zip Code 30233-2006
-----------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMITH WELCH WOBB & WHITEOccupation
TITLE ABTRACTOR

Receipt For: 2022

☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : AABAE9825D034A64A51

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
HARDEN, AMREY, , ,

Mailing Address 1100 BRIAR LAKES CT

City WATKINSVILLE	State GA	Zip Code 30677-4523
----------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2022

☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2022

Transaction ID : AB0CE5DB358634AC0A4C

Amount of Each Receipt this Period

250.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
JONES, JASON, , ,

Mailing Address 114 NORTHLAKE TRL

City CANTON	State GA	Zip Code 30114-8182
----------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2022

☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : A0C8CA0766805406FAC3

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

1250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
COLLINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LANIER, DENA, , MS.,

Mailing Address 472 S MAIN ST

City MADISON	State GA	Zip Code 30650-1639
-----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2022
☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2022

Transaction ID : A276F7473D8774B5E92F

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
MCWATERS, DARRELL, , ,

Mailing Address PO BOX 2655

City LOGANVILLE	State GA	Zip Code 30052-1963
--------------------	-------------	------------------------

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

Name of Employer RELIANT HOMES	Occupation BUILDER
-----------------------------------	-----------------------

Receipt For: 2022
☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼
3900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : A9C64E3EF14104A75AB3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
MORRIS, GENE, E., MR., JR.

Mailing Address 228 SHOREWOOD CT

City MCDONOUGH	State GA	Zip Code 30252-3618
-------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2022
☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : A55BEE82F2FD5401CAF8

Amount of Each Receipt this Period

2000.00

☐ Memo Item

3500.00

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

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☒ 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)
SELLERS, LARRY, , ,

Mailing Address 2261 PLUNKETT RD NW

City CONYERS	State GA	Zip Code 30012-3433
-----------------	-------------	------------------------

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

Name of Employer VOLUME TRANSPORTATION INC.	Occupation PRESIDENT
--	-------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2022

Transaction ID : A471BCD4803754F86988

Amount of Each Receipt this Period

2900.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
SISTRUNK, KEITH, , ,

Mailing Address 182 CREEKSIDE BLUFF WAY

City AUBURN	State GA	Zip Code 30011-4511
----------------	-------------	------------------------

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

Name of Employer COLLINS TRUCKING CO, INC.	Occupation VP, TECHNOLOGY
---	------------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2022

Transaction ID : A8E11CA4C54E84518BF7

Amount of Each Receipt this Period

60.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
STEPHENS, MITCHELL, , MR.,

Mailing Address 4351 PLEASANTDALE RD

City ATLANTA	State GA	Zip Code 30340-3524
-----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2022

Transaction ID : A820D9816C31B44278B7

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

4960.00

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)

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☒ 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)
TARBUTTON, BEN, , MR., III

Mailing Address 228 N HARRIS ST

City SANDERSVILLE	State GA	Zip Code 31082-1741
----------------------	-------------	------------------------

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

Name of Employer SANDERSVILLE RAILROAD	Occupation TRANSPORTATION
---	------------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 21 2022

Transaction ID : A9ED4D30700DB4D1FB2A

Amount of Each Receipt this Period

2900.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
TARBUTTON, BEN, , MR., III

Mailing Address 228 N HARRIS ST

City SANDERSVILLE	State GA	Zip Code 31082-1741
----------------------	-------------	------------------------

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

Name of Employer SANDERSVILLE RAILROAD	Occupation TRANSPORTATION
---	------------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 23 2022

Transaction ID : A9F220BBE638D4803B4C

Amount of Each Receipt this Period

- 1000.00

☒ Memo Item
REDESIGNATION FROM

C. Full Name (Last, First, Middle Initial)
TARBUTTON, BEN, , MR., III

Mailing Address 228 N HARRIS ST

City SANDERSVILLE	State GA	Zip Code 31082-1741
----------------------	-------------	------------------------

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

Name of Employer SANDERSVILLE RAILROAD	Occupation TRANSPORTATION
---	------------------------------

Receipt For: 2022
☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼
3900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 23 2022

Transaction ID : ACF66EFFCBC794FBFA0F

Amount of Each Receipt this Period

1000.00

☒ Memo Item
REDESIGNATION TO

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

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

2900.00

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 26

☒ 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)
TATE, VINCENT, L., MR.,

Mailing Address 103 FREEDOM DR

City FORSYTH	State GA	Zip Code 31029-5506
-----------------	-------------	------------------------

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

Name of Employer ROCK SPRINGS CHURCH	Occupation PASTOR
---	----------------------

Receipt For: 2022
☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2022

Transaction ID : A4CD50E4CEFA547D5AC9

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
WHITE, STEVEN, , ,

Mailing Address 143 LEGUIN FOREST DR

City LOCUST GROVE	State GA	Zip Code 30248-6600
----------------------	-------------	------------------------

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

Name of Employer CLARKDIETRICH BUILDING SYSTEMS	Occupation TRANSPORTATION MANAGER
--	--------------------------------------

Receipt For: 2022
☐ Primary ☐ General
☒ Other (specify) ▼ PRIMARY RUNOFF

Election Cycle-to-Date ▼
1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2022

Transaction ID : A5DC6356D1C6546098E7

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

☐ Memo Item

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

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

750.00

17160.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

23.59

Transaction ID : BBABE0279CF494321B2B

☐ Memo Item**B. ANEDOT**Mailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

2.70

Transaction ID : B49A5FBB592964DC7989

☐ Memo Item**C. ANEDOT**Mailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

116.30

Transaction ID : B86300A3D771D483D964

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

142.59

TOTAL 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 PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

116.30

Transaction ID : B64DC434DBE01491CBA5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

16.00

Transaction ID : BDF7867D5AAFA435EB02

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

27.00

Transaction ID : B14BB01EDDA5446FA943

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

159.30

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

35.14

Transaction ID : B13FF584EDCC84A59A84

☐ Memo Item**B. ANEDOT**Mailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

88.70

Transaction ID : BDA43BF7B454C4EA6B8B

☐ Memo Item**C. BATTLEGROUND STRATEGIES**

Mailing Address 1913 SKYFALL CIR

City
BROOKHAVENState
GAZip Code
30319-3776Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : B606F71BD1ABF4B018AA

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3123.84

TOTAL 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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025-1456Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : BC2FE978CFB6A4601871

☐ Memo Item**B. LAKESIDE COMMUNICATIONS**

Mailing Address 90 HALLIGAN AVE

City
WORTHINGTONState
OHZip Code
43085-2614Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

8746.00

Transaction ID : B9FF68200CEB4406F85D

☐ Memo Item**C. LAKESIDE COMMUNICATIONS**

Mailing Address 90 HALLIGAN AVE

City
WORTHINGTONState
OHZip Code
43085-2614Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

2075.00

Transaction ID : BDCEF6B6C3D414958B25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10836.00

TOTAL 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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LAKESIDE COMMUNICATIONS

Mailing Address 90 HALLIGAN AVE

City
WORTHINGTONState
OHZip Code
43085-2614Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

20520.00

Transaction ID : BE99CAE6F46A84158B25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LGM CONSULTING GROUP

Mailing Address 519 HARVILLE RD

City
STATESBOROState
GAZip Code
30458-9257Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

240.47

Transaction ID : B19D53C20A4A64A1E8F9

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LGM CONSULTING GROUP

Mailing Address 519 HARVILLE RD

City
STATESBOROState
GAZip Code
30458-9257Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

164.25

Transaction ID : B2E42239096FE4A5CBA7

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

20924.72

TOTAL 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 PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LGM CONSULTING GROUP

Mailing Address 519 HARVILLE RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		25		2022

City
STATESBOROState
GAZip Code
30458-9257Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

270.00

Transaction ID : B46A9833A6D7145C0AB5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LGM CONSULTING GROUP

Mailing Address 519 HARVILLE RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2022

City
STATESBOROState
GAZip Code
30458-9257Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

27.00

Transaction ID : B75971F75BA024A63B3D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LGM CONSULTING GROUP

Mailing Address 519 HARVILLE RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2022

City
STATESBOROState
GAZip Code
30458-9257Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

733.50

Transaction ID : B3C46C98BF3814D03898

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1030.50

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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PAGE 17 OF 26

☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAIL CHIMP

Mailing Address 675 PONCE DE LEON AVE NE SUITE 500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2022

City
ATLANTAState
GAZip Code
30308-2172Purpose of Disbursement
SOFTWARE

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

87.00

Transaction ID : BB43E779EB3D3443289C

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. MASON, KEVIN, , ,Mailing Address 1125 HAMMOND DR
UNIT 257

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2022

City
ATLANTAState
GAZip Code
30328-6801Purpose of Disbursement
FIELD CONSULTING

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4500.00

Transaction ID : B9C7352BD1E35487A8AD

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2022

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
CC TRANSACTION FEES

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

0.99

Transaction ID : B9DBE53B27509469DB9A

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

4587.99

TOTAL 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 PageFOR LINE NUMBER:
(check only one)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

Date of Disbursement

M M	D D	Y Y Y Y
05	31	2022

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : B6C89F925069542A2A5A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

Date of Disbursement

M M	D D	Y Y Y Y
05	31	2022

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

3.94

Transaction ID : B0B1FA082ECAD4631899

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

Date of Disbursement

M M	D D	Y Y Y Y
06	01	2022

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1.19

Transaction ID : B3F907F496FB14D60809

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6.12

TOTAL 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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

COLLINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WIREGRASS STRATEGY GROUPMailing Address 1563 CAPITAL CIR SE
186City
TALLAHASSEEState
FLZip Code
32301-5115Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

17000.00

Transaction ID : BEEE8B01728B64CDD98F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

17000.00

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

57811.06

SCHEDULE C (FEC Form 3)
LOANS

PAGE 20 OF 26

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CDEFB3F89E0704FB398A

COLLINS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

COLLINS, MICHAEL, A, , JR.

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 6491

City

ATHENS

State

GA

ZIP Code

30604-6491

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M /

D 27 D /

Y 2013 Y

M 12 M /

D 31 D /

Y 2014 Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 21 OF 26

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C080922AACE50425EBAE

COLLINS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

COLLINS, MICHAEL, A, , JR.

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 6491

City

ATHENS

State

GA

ZIP Code

30604-6491

☒ Personal Funds of the Candidate

Original Amount of Loan

66000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

66000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 31 D

Y 2022 Y

M M

D D

Y NONE Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

66000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 22 OF 26

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C0A0C842C5BE0486CA96

COLLINS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

COLLINS, MICHAEL, A, , JR.

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 6491

City

ATHENS

State

GA

ZIP Code

30604-6491

☒ Personal Funds of the Candidate

Original Amount of Loan

400000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

400000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 30 D

Y 2021 Y

M M

D D

Y NONE Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

400000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 23 OF 26

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CC93512DDC2494BF384C

COLLINS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

COLLINS, MICHAEL, A, , JR.

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 6491

City

ATHENS

State

GA

ZIP Code

30604-6491

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

19058.57

Balance Outstanding at Close of This Period

5941.43

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

/ D 22 D

/ Y 2013 Y

M M

/ D D

/ Y NONE Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5941.43

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 24 OF 26

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C29682BD78E0E4EBDB92

COLLINS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

COLLINS, MICHAEL, A, , JR.

Election: 2014

☐ Primary☐ General☒ Other (specify) ▼
RUNOFFMailing Address
PO BOX 6491

City

ATHENS

State

GA

ZIP Code

30604-6491

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 19 D

Y 2014 Y

M M

D D

Y NONE Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 25 OF 26

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C7A80EBE9A508445AA92

COLLINS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

COLLINS, MICHAEL, A, , JR.

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 6491

City

ATHENS

State

GA

ZIP Code

30604-6491

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^M/ D 31^D

/ Y 2013 Y

M M

/ D D

/ Y NONE Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 26 OF 26

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CB6F350009384495B804

COLLINS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

COLLINS, MICHAEL, A, , JR.

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 6491

City

ATHENS

State

GA

ZIP Code

30604-6491

☒ Personal Funds of the Candidate

Original Amount of Loan

65000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

65000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^M/ D 31^D

/ Y 2021 Y

M M

/ D D

/ Y NONE Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

65000.00

TOTALS This Period (last page in this line only).....▶

686941.43

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.