

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

11 OCT 18 AM 11:44

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

COLONEL MIKE MCCALISTER FOR SENATE

ADDRESS (number and street)

117 WEST ALEXANDER STREET #385



(Check if address
is changed)

PLANT CITY

FL

33565

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

capitolhillcompliance@gmail.com



(Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://www.mikemccalisterforsenate.com/



(Check if address
is changed)

2. DATE

07

14

2011

3. FEC IDENTIFICATION NUMBER



C00493056

4. IS THIS STATEMENT



NEW (N)

OR



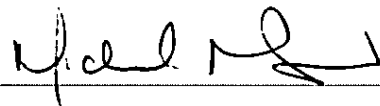
AMENDED (A)

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 Michael Goode

Signature of Treasurer

Michael Goode



Date

10

14

2011

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

11020414599

5. TYPE OF COMMITTEE

Candidate Committee:

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

Name of Candidate **COLONEL MICHAEL E MCCALISTER**

Candidate Party Affiliation **REP** Office Sought: ☐ House ☒ Senate ☐ President State **FL** District **00**

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

Name of Candidate

Party Committee:

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

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

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

☐ In addition, this committee is a Lobbyist/Registrant PAC.

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

☐ In addition, this committee is a Lobbyist/Registrant PAC.

☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.		FEC ID number	
2.		FEC ID number	
3.		FEC ID number	
4.		FEC ID number	

11020414600

Write or Type Committee Name

COLONEL MIKE MCCALISTER FOR SENATE

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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

Mailing Address

117 West Alexander Street #385

Plant City

CITY

FL

STATE

33565

ZIP CODE

Title or Position
Treasurer

Telephone number

706 - 850 - 0815

11020414601

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

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

Name of Bank, Depository, etc.

Wachovia

Mailing Address

301 S. College St.

Charlotte

NC

28288

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

First Virginia Community Bank

Mailing Address

11325 Random Hills Rd

Fairfax

VA

22030

CITY

STATE

ZIP CODE

11020414802

WILLIS BRIDGE RD 572 121
30606



7011 0110 0001 6460 8952

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BY THE SENATE
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22301

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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AIRBORNE EXPRESS	_____	☐

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Date of Receipt

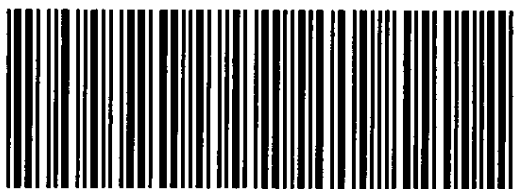
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PREPARER RD DATE PREPARED 10-18-11

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