

# 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 Carroll Brian Daniel

Signature of Treasurer Carroll Brian Daniel

[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
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	119335.37	578904.05
(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)).....	119335.37	563904.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	65129.33	260869.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	400.00	7645.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	64729.33	253224.51
8. Cash on Hand at Close of Reporting Period (from Line 27).....	370819.41	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	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:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	44037.50	245851.18
(ii) Unitemized.....	10020.00	20475.00
(iii) TOTAL of contributions from individuals ▶	54057.50	266326.18
(b) Political Party Committees.....	0.00	500.00
(c) Other Political Committees (such as PACs).....	65277.87	312077.87
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	119335.37	578904.05
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	400.00	7645.20
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	2.00	2.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	119737.37	586551.25

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	65129.33	260869.71
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 .....	38500.00	49000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	103629.33	334869.71

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	354711.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	119737.37
25. SUBTOTAL (add Line 23 and Line 24).....	474448.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	103629.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	370819.41

**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 5 OF 73
	<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	

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)  
**Jana Falic**

Mailing Address 6100 Hollywood Blvd.  
7th Floor

City Hollywood State FL Zip Code 33024-7983

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  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 29 / 2014

**Transaction ID : A789FBB0A84354C1F830**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 6208 Elmer Truelove Rd

City Clermont State GA Zip Code 30527-1238

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

Name of Employer Truelove Dairy Inc. 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  
 03 / 25 / 2014

**Transaction ID : AAADB57C148324FC4845**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 255 Legendary Dr.

City Hoschton State GA Zip Code 30548-3119

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  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A955AF8C10ED34697A2E**

Amount of Each Receipt this Period  
50.00

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

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

3150.00

**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 73
	<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)  
**Doris Tipton**

Mailing Address 3996 Camden Ct

City Gainesville State GA Zip Code 30506-2258

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 **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : AE9FB673495444A6985A**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 6022 Hubert Stephens Road

City Gainesville State GA Zip Code 30506-7324

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

Name of Employer IOA Occupation Regional President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : A56E6967FA6E44BAE92B**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 4404 White Birch Pt

City Gainesville State GA Zip Code 30506-4312

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 **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : A18548AB1D37746BF95F**

Amount of Each Receipt this Period  
**250.00**

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

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

**550.00**

**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 73
	<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)  
**Edmund Schweitzer**

Mailing Address 330 NW Brandon Dr.

City Pullman State WA Zip Code 99163-3674

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A63724E5DE3AF4324889**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address PO Box 477

City Gainesville State GA Zip Code 30503-0477

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

Name of Employer Information Requested Occupation Information Requested  
 Gainesville Milling Company Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A1FEF97BB96C348A98E6**

Amount of Each Receipt this Period  
 200.00

**C.** 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 Information Requested Occupation Information Requested  
 City Of Cleveland Mayor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A18E96BD369E94C36B17**

Amount of Each Receipt this Period  
 250.00

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

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

2450.00

**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 73
	<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 **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : A3026E0345EFC4CA6B13**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 633 Ellen Wilson Pl. SE

City Washington State DC Zip Code 20003-4238

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

Name of Employer Troutman Sanders Strategies Occupation Senior Manager

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  
**03 / 05 / 2014**

**Transaction ID : A656D2453BEED42CF82D**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 156 Thundering Waters Dr.

City Cornelia State GA Zip Code 30531-6906

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 **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : A6F67BA71BCD3486E85A**

Amount of Each Receipt this Period  
**100.00**

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

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

**600.00**



**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 73
	<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)  
**Henry Plaster**

Mailing Address 5407 Albemarle St.

City: Bethesda State: MD Zip Code: 20816-1824

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

Name of Employer: Plaster and Associates Occupation: Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 05 / 2014

**Transaction ID : A3C1662CA55C446A287F**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 8020 Windsor Hill Psg

City: Suwanee State: GA Zip Code: 30024-5506

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: 1000.00

Date of Receipt: 01 / 07 / 2014

**Transaction ID : AEF0C24AD5A874586B9D**

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 156 Thundering Waters Dr.

City: Cornelia State: GA Zip Code: 30531-6906

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: 02 / 07 / 2014

**Transaction ID : AF10A757A32F749908D6**

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 10 OF 73
	<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)  
**Suzanne Hudgens**

Mailing Address 6509 Highway 106 S

City Hull State GA Zip Code 30646-2702

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : A7396740A1DEC445E899**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1420 Key Dr.

City Alexandria State VA Zip Code 22302-3412

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

Name of Employer The Capital Group Occupation Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : A0A29BE9CD0BE401DA03**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 255 Legendary Dr.

City Hoschton State GA Zip Code 30548-3119

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A1BA1D1F5AE294F3B928**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

**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 11 OF 73
	<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)  
**Jerry Rylee**

Mailing Address 8016 County Line Rd

City Gillsville State GA Zip Code 30543-4226

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 Y  
 03 / 25 / 2014

**Transaction ID : A5AD698806F634933BB3**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 8116 Kerry Ln.

City Chevy Chase State MD Zip Code 20815-4812

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

Name of Employer Thorsen French Advocacy, LLC Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AB87EB535B9D34773AF5**

Amount of Each Receipt this Period  
 2500.00

**C.** 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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : ABECB6DA6DF1D4332B7B**

Amount of Each Receipt this Period  
 200.00

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

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

3700.00

**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 12 OF 73
	<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)  
**Hulya Sercan**

Mailing Address 10208 Lexington Farms Dr

City State Zip Code  
Alpharetta GA 30004-6773

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  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AEEC8D54DEECF4FE58C4**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 4672 Manor Dr

City State Zip Code  
Gainesville GA 30506-7520

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

Name of Employer Occupation Information Requested  
Northeast Georgia Health System President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
362.50

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : AB23E4EAE736B430C88D**

Amount of Each Receipt this Period  
62.50

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

Mailing Address 999 E Lake Dr

City State Zip Code  
Gainesville GA 30506-1729

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

Name of Employer Occupation Information Requested  
Negpsa Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A4D2D9B9A4EB94D2FBB0**

Amount of Each Receipt this Period  
200.00

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

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

2862.50

**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 13 OF 73
	<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)  
**Dorotha Lea**

Mailing Address 3224 Farmington Dr.

City Chevy Chase	State MD	Zip Code 20815-4827
---------------------	-------------	------------------------

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

Name of Employer Viacom	Occupation Executive Vice President, Global Gover
----------------------------	--

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  
 03 / 27 / 2014

**Transaction ID : A5AFFC82686904ACA8FC**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3112 Overlook Dr

City Gainesville	State GA	Zip Code 30506-1710
---------------------	-------------	------------------------

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 Y  
 03 / 07 / 2014

**Transaction ID : A632D7EC511E44667BE5**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 130 Bruce Dr

City Jasper	State GA	Zip Code 30143-4254
----------------	-------------	------------------------

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 Y  
 03 / 25 / 2014

**Transaction ID : A2D2FAD2076774F98A01**

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 14 OF 73
	<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)  
**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 **362.50**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : A12B177C24A0E4D9A8AD**

Amount of Each Receipt this Period  
**62.50**

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

Mailing Address 338 Old Cannon Rd

City Toccoa State GA Zip Code 30577-7153

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 **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : A178E6DCD3EE94C508E9**

Amount of Each Receipt this Period  
**500.00**

**C.** 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 Gainesville Eye Associates Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : ADED879B7C94C48A392C**

Amount of Each Receipt this Period  
**500.00**

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

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

**1062.50**

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

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

FOR LINE NUMBER: PAGE 15 OF 73  
(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)  
**Stanley Rumsey**

Mailing Address 1032 Rose Ln

City State Zip Code  
Toccoa GA 30577-8767

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  
 03 / 25 / 2014

**Transaction ID : AE015FFA9A1D244E5BA1**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 373 Chase Landing Rd

City State Zip Code  
Martin GA 30557-4512

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

Name of Employer Occupation Information Requested  
1st Franklin Financial Corp. Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : AD9F713CB582E4C61A06**

Amount of Each Receipt this Period  
250.00

**C.** 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 Information Requested  
Phil-Mart Transportation Trucking

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : AEBB1E0D015A44702BB9**

Amount of Each Receipt this Period  
200.00

**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 16 OF 73
	<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)  
**Bruce Richards**

Mailing Address 190 Northland Ridge Trl. NE

City Atlanta State GA Zip Code 30342-2467

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2014

**Transaction ID : A6B8D106AD7424575861**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 9 Estates Dr

City Gainesville State GA Zip Code 30501

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A31B4F1468CE9493DBCD**

Amount of Each Receipt this Period  
 62.50

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

Mailing Address PO Box 3103

City Gainesville State GA Zip Code 30503-3103

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A59501D4B50654B7BA61**

Amount of Each Receipt this Period  
 200.00

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

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

1262.50



**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 73
	<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)  
**Samuel Smith**

Mailing Address **PO Box 3422**

City **Gainesville** State **GA** Zip Code **30503-3422**

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

Name of Employer **Rainmaker Properties** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 07 / 2014**

**Transaction ID : AC5A61434E28141CEB3D**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **101 College Ave**

City **Elberton** State **GA** Zip Code **30635-1705**

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

Name of Employer **Madden Pharmacy** 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  
**03 / 25 / 2014**

**Transaction ID : A26B2115421F1448DB8E**

Amount of Each Receipt this Period  
**500.00**

**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  
**03 / 27 / 2014**

**Transaction ID : AAA9CE98C3E7A49D0BE3**

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: PAGE 18 OF 73  
(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)  
**Debra Harkrider**

Mailing Address 805 Park St

City State Zip Code  
Gainesville GA 30501-3418

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 Y  
 03 / 25 / 2014

**Transaction ID : A8DEF369E9DC5496C95B**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 82352

City State Zip Code  
Atlanta GA 30354-0352

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  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A2F4F0C6B51604A6085F**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 761 Chattahoochee Pl

City State Zip Code  
Gainesville GA 30506-1546

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

Name of Employer Occupation Information Requested  
Spherion Staffing Partner

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  
 03 / 25 / 2014

**Transaction ID : A72B41C46B30846979E0**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 73
	<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)  
**W.C. Nelson**

Mailing Address **PO Box 127**

City **Blairsville** State **GA** Zip Code **30514-0127**

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

Name of Employer **Nelson Tractor** Occupation **Co-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  
**03 / 27 / 2014**

**Transaction ID : A3F2D958A66514EBDADB**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **3230 Dunlap Dr**

City **Gainesville** State **GA** Zip Code **30506-1648**

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 **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : AF703AC3131A74895982**

Amount of Each Receipt this Period  
**2600.00**

**C.** 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 **718.20**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A1FBAAF2D720144A5911**

Amount of Each Receipt this Period  
**250.00**

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

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

**3350.00**

**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 73
	<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. Sam Richwine**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1520 Enota Ave NE

City Gainesville	State GA	Zip Code 30501-1960
---------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Plastic Surgeon
-----------------------------------	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A298058E807FC4117B3C**

Amount of Each Receipt this Period  
200.00

**B. Ben Cheek**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 880

City Toccoa	State GA	Zip Code 30577-0880
----------------	-------------	------------------------

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

Name of Employer 1st Franklin Financial Corp.	Occupation Chairman
--	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A669A383E757A4946B16**

Amount of Each Receipt this Period  
500.00

**C. Timothy Molino**  
Full Name (Last, First, Middle Initial)  
Mailing Address 611 N Alfred St

City Alexandria	State VA	Zip Code 22314-1822
--------------------	-------------	------------------------

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

Name of Employer Business Software Alliance	Occupation Government Relations
--	------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : A4509913B16FE4E96B35**

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 21 OF 73
	<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)  
**Lenard Collins**

Mailing Address 2402 Hawthorne Pl

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  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A46DB12C521BF4128900**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1200 Sherwood Park Dr.

City Gainesville State GA Zip Code 30501-3445

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

Name of Employer Self Employed Occupation Dentist

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  
 03 / 27 / 2014

**Transaction ID : A6643EE57AD9B4CF7BCA**

Amount of Each Receipt this Period  
250.00

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

Mailing Address PO Box 1438

City Gainesville State GA Zip Code 30503-1438

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

Name of Employer Carroll Daniel Construction 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 Y Y  
 03 / 07 / 2014

**Transaction ID : AF6C44CB82B954153889**

Amount of Each Receipt this Period  
1600.00

**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 22 OF 73
	<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)  
**Mr. Frank Hanna III**

Mailing Address 5 Concourse Parkway NW Suite 200

City	State	Zip Code
Atlanta	GA	30328-6157

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

Name of Employer	Occupation
Hanna Capital	President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AC5E0B23EAF12455D879**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1135 Summit Ridge Dr

City	State	Zip Code
Toccoa	GA	30577-8490

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

Name of Employer	Occupation
1st Franklin Financial Group	Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : AEA1B96179441432AA45**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2237 46th St. NW

City	State	Zip Code
Washington	DC	20007-1032

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  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : A1F29275205A84244AE5**

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 23 OF 73
	<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)  
**Christopher M. Giblin**

Mailing Address 1304 Chancel Place

City State Zip Code  
Alexandria VA 22314-4707

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

Name of Employer Occupation  
Ogilvy Government Relations Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 27 / 2014

**Transaction ID : ACE94840391974164A2C**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 10208 Lexington Farms Dr

City State Zip Code  
Alpharetta GA 30004-6773

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  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : AE8052553E44E453CB92**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 22 Dogwood Ct

City State Zip Code  
Gillsville GA 30543-9616

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

Name of Employer Occupation  
Cox Communications VP of Operations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 25 / 2014

**Transaction ID : AFFC44F34C4724081844**

Amount of Each Receipt this Period  
500.00

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

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

1700.00

**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 73
	<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)  
**Michael Boyce**

Mailing Address 15200 Santa Fe Dr  
Ste 101

City Lenexa State KS Zip Code 66219

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

Name of Employer PQ Corporation Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : AF54681A060F044B2961**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 14202 Summerwood Ln

City Alpharetta State GA Zip Code 30005-3531

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A2C2162E1B1874250A41**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 3316 Arbor Walk Dr

City Gainesville State GA Zip Code 30506-1600

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

Name of Employer Self Employed Occupation Fitness Instructor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : ADEA5E5BFD2D24D42A54**

Amount of Each Receipt this Period  
 500.00

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

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

4600.00



**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 73
	<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)  
**Alvin Guimond**

Mailing Address 309 Robin Cir

City Toccoa State GA Zip Code 30577-7830

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

Name of Employer 1st Franklin Financial Corp. Occupation VP & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : AC9B4830190144477B7B**

Amount of Each Receipt this Period  
**750.00**

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

Mailing Address 5040 Glenbrook Ter NW

City Washington State DC Zip Code 20016-2602

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

Name of Employer The Gibson Group, LLC Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AF591F69BCAA7429AAB7**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 11015 Mortons Crossing

City Alpharetta State GA Zip Code 30022-6610

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 **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AD08505DD79604F64B81**

Amount of Each Receipt this Period  
**500.00**

**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 73
	<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)  
**Sharon Sichko**

Mailing Address 9204 West 141st St

City Overland Park State KS Zip Code 66221-2125

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A24074E0DD33C432D8E3**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2344 Island Dr

City Gainesville State GA Zip Code 30501-1255

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

Name of Employer Information Requested Occupation Information Requested  
 Self Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A9419DC532525493FA8A**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 4097 Highway 52 W

City Dahlongega State GA Zip Code 30533-4773

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A8BEEA5A4C7F545A29B5**

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 27 OF 73
	<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)  
**Judith Presley**

Mailing Address 3734 Ronny Way

City Gainesville State GA Zip Code 30506-4253

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

Name of Employer Keller Williams Occupation Broker

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  
 01 / 29 / 2014

**Transaction ID : A97C98CFDE018472F82C**

Amount of Each Receipt this Period  
500.00

Earmarked (Non-Directed)

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

Mailing Address PO BOX 2713

City Alexandria State VA Zip Code 22301-0713

FEC ID number of contributing federal political committee. **C** C00484535

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  
 01 / 29 / 2014

**Transaction ID : AAA61628402D54815BC0**

Amount of Each Receipt this Period  
500.00

Conduit Memo Total  
**[MEMO ITEM]**  
 Conduit Memo

**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).....

500.00

44037.50

**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 73
	<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)  
**BSA , THE SOFTWARE ALLIANCE PAC**

Mailing Address 20 F STREET NW SUITE 800

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00416685**

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  
 03 / 27 / 2014

**Transaction ID : AA4355DD11E7B4EFCB83**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**SANOPI PASTEUR POLITICAL ACTION COMMITTEE**

Mailing Address DISCOVERY DRIVE

City SWIFTWATER State PA Zip Code 18370

FEC ID number of contributing federal political committee. **C C00215236**

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  
 03 / 31 / 2014

**Transaction ID : A6FC43957B59647119A4**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**The Freedom Project PAC**

Mailing Address 320 1st St SE

City Washington State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C C00305805**

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  
 03 / 05 / 2014

**Transaction ID : A7E89CE1024F54F06953**

Amount of Each Receipt this Period  
 5000.00

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

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

8500.00

**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 73
	<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. COX ENTERPRISES PAC (COXPAC) INC.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 975 F STREET, NW  
 SUITE 300  
 City Washington State DC Zip Code 20004-1459  
 FEC ID number of contributing federal political committee. **C C00477653**  
 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 Y  
 03 / 19 / 2014  
**Transaction ID : AE0EAB1CEFC6846DD939**  
 Amount of Each Receipt this Period  
 2000.00

**B. Caterpillar Employees PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 NE Adams St  
 City Peoria State IL Zip Code 61629-0001  
 FEC ID number of contributing federal political committee. **C C00148031**  
 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 Y  
 03 / 31 / 2014  
**Transaction ID : AE418593EB627402C8AD**  
 Amount of Each Receipt this Period  
 1000.00

**C. UPS PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 Glenlake Pkwy NE  
 City Atlanta State GA Zip Code 30328-3474  
 FEC ID number of contributing federal political committee. **C C00064766**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : ABD2EC96D95254DFC89A**  
 Amount of Each Receipt this Period  
 1000.00

**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 30 OF 73
	<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 GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVENUE, NW  
SUITE 1000 EAST

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00350744**

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  
 03 / 31 / 2014

**Transaction ID : A3E2201AF17B5465794A**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Wal-Mart Stores Inc. PAC**

Mailing Address 702 SW 8th Street

City Bentonville State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C C00093054**

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  
 03 / 31 / 2014

**Transaction ID : AD6FDD00F0A264E62829**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1100 Wilson Boulevard Ste. 1500

City Arlington State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C C00097568**

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  
 03 / 31 / 2014

**Transaction ID : A48591A86480049E1926**

Amount of Each Receipt this Period  
 2500.00

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

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

5000.00

**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 73  
(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)  
**COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address 975 F STREET, NW  
SUITE 300

City Washington State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C C00477653**

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 Y  
03 / 05 / 2014

**Transaction ID : A025BAFA6A71F4FD897B**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AT&T Inc. Federal PAC**

Mailing Address 208 S Akard St Ste 2701

City Dallas State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C C00109017**

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 Y  
03 / 19 / 2014

**Transaction ID : A02EFB7CA007C4E0B910**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PAC)**

Mailing Address 1201 15TH STREET NW  
SUITE 400

City Washington State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C C00358663**

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  
03 / 19 / 2014

**Transaction ID : A09542516F47441E8A56**

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: PAGE 32 OF 73  
(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. Suntrust Bank Good Government Group PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 4418  
 MC 041  
 City Atlanta State GA Zip Code 30302-4418  
 FEC ID number of contributing federal political committee. **C C00009639**  
 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  
 02 / 20 / 2014  
**Transaction ID : A959367B5041242EE8DA**  
 Amount of Each Receipt this Period  
 1000.00

**B. UPS PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 Glenlake Pkwy NE  
 City Atlanta State GA Zip Code 30328-3474  
 FEC ID number of contributing federal political committee. **C C00064766**  
 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  
 02 / 26 / 2014  
**Transaction ID : A5008F428CF20493194E**  
 Amount of Each Receipt this Period  
 500.00

**C. Coca-Cola Co. Committee for Good Govt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1734  
 City Atlanta State GA Zip Code 30301-1734  
 FEC ID number of contributing federal political committee. **C C00012468**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : AFAB9CCDC569340FA989**  
 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 33 OF 73
	<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  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A0068BB6DFE5B417BA2F**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**CORRECTIONS CORPORATION OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 10 BURTON HILLS BOULEVARD

City Nashville State TN Zip Code 37215-6105

FEC ID number of contributing federal political committee. **C C00366468**

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  
**03 / 05 / 2014**

**Transaction ID : AFB5B7E88C11141F4980**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**UNIVERSAL MUSIC GROUP POLITICAL ACTION COMMITTEE**

Mailing Address 6301 Owensmouth Ave.  
9th Floor

City Woodland Hills State CA Zip Code 91367-2216

FEC ID number of contributing federal political committee. **C C00392464**

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  
**01 / 29 / 2014**

**Transaction ID : A15FE7DFD74A8403FA37**

Amount of Each Receipt this Period  
**1000.00**

**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: PAGE 34 OF 73  
(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)  
**National Restaurant Assoc. PAC**

Mailing Address 2055 L St NW

City Washington State DC Zip Code 20036-4983

FEC ID number of contributing federal political committee. **C C00003764**

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  
03 / 31 / 2014

**Transaction ID : A7CB2F75C92E849F3AC7**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**SPRINT CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address KSOPHN0314-3B211  
6450 SPRINT PARKWAY

City OVERLAND PARK State KS Zip Code 66251

FEC ID number of contributing federal political committee. **C C00089342**

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  
03 / 31 / 2014

**Transaction ID : A865214D89AD34F33AC8**

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 **2000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : A2F74F4120B6C45F2A2F**

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 35 OF 73
	<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. Georgia Power Co. Federal PAC, Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 241 Ralph McGill Blvd NE  
 City Atlanta State GA Zip Code 30308-3374  
 FEC ID number of contributing federal political committee. **C C00119776**  
 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 Y  
 01 / 29 / 2014  
**Transaction ID : A1EE3DD153F204039ACB**  
 Amount of Each Receipt this Period  
 2500.00

**B. American Intellectual Property Law Assoc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 241 18th Street South Ste. #700  
 City Arlington State VA Zip Code 22202-3419  
 FEC ID number of contributing federal political committee. **C C00156935**  
 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 Y  
 03 / 07 / 2014  
**Transaction ID : A9BA5C4CDA3A94B2AACE**  
 Amount of Each Receipt this Period  
 1000.00

**C. R.O.S.K.A.M. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 610 S Boulevard  
 City Tampa State FL Zip Code 33606-2693  
 FEC ID number of contributing federal political committee. **C C00494674**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3527.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : A91FB863706E94841904**  
 Amount of Each Receipt this Period  
 500.00  
 In-kind: Fundraising Consulting

**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 36 OF 73
	<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.** Full Name (Last, First, Middle Initial)  
**BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC**

Mailing Address 1310 G STREET NW

City Washington State DC Zip Code 20005-3000

FEC ID number of contributing federal political committee. **C C00194746**

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  
 03 / 31 / 2014

**Transaction ID : A168F3957DE4442AB9D**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ERNST & YOUNG POLITICAL ACTION COMMITTEE**

Mailing Address 1101 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

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  
 03 / 31 / 2014

**Transaction ID : A553AF24BF3CE4D39B6A**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**ALCOA INC EMPLOYEES VOLUNTARY STATE AND FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1050 K ST. NW  
STE 1100

City Washington State DC Zip Code 20001-4949

FEC ID number of contributing federal political committee. **C C00552679**

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  
 03 / 31 / 2014

**Transaction ID : A3355838F36394ECDAE7**

Amount of Each Receipt this Period  
 1000.00

**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 37 OF 73
	<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 Optometric Assoc. PAC**

Mailing Address 1505 Prince St Ste 300

City State Zip Code  
Alexandria VA 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  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : ADEE2A80AF63C4E209F1**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 55 Glenlake Pkwy NE

City State Zip Code  
Atlanta GA 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A628541A7BB78431499E**

Amount of Each Receipt this Period  
**1500.00**

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC (TIPAC)**

Mailing Address 1828 L ST NW  
SUITE 705

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00012914**

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  
**03 / 31 / 2014**

**Transaction ID : A1C565A4BEAC948E4A79**

Amount of Each Receipt this Period  
**1000.00**

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

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

**5000.00**

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

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

FOR LINE NUMBER: PAGE 38 OF 73  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1875 I STREET, NW  
SUITE 600

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00303339**

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  
 03 / 31 / 2014

Transaction ID : **A760703A402C545B3814**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**R.O.S.K.A.M. PAC**

Mailing Address 610 S Boulevard

City State Zip Code  
Tampa FL 33606-2693

FEC ID number of contributing federal political committee. **C C00494674**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 3527.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

Transaction ID : **A48E10A9C99C044F48E1**

Amount of Each Receipt this Period  
 527.87  
 In-kind:Event Catering

Full Name (Last, First, Middle Initial)  
**CISCO SYSTEMS, INC. FEDERAL PAC, AKA CISCO SYSTEMS EPAC**

Mailing Address 400 CAPITOL MALL, STE 1545

City State Zip Code  
Sacramento CA 95814-4434

FEC ID number of contributing federal political committee. **C C00362707**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

Transaction ID : **A436EB1AE9F5440E6A40**

Amount of Each Receipt this Period  
 1500.00

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

3027.87

**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 39 OF 73
	<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)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

Mailing Address 11921 FREEDOM DRIVE  
SUITE 1100

City Reston State VA Zip Code 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  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : ADF8444E557794899950**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 2941 Fairview Park Dr Ste 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

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  
 03 / 31 / 2014

**Transaction ID : A3765AEE1C6CA49E78FD**

Amount of Each Receipt this Period  
1000.00

**C.** 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  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : ABF8B2AB2D24241D98E9**

Amount of Each Receipt this Period  
1500.00

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

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

5000.00

**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 73
	<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)  
**Action Comm. for Rural Electrification**

Mailing Address 4301 Wilson Blvd

City State Zip Code  
Arlington VA 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  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A139E2EED17E741CE916**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1776 WILSON BOULEVARD  
SUITE 200

City State Zip Code  
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C** C00022368

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  
 03 / 31 / 2014

**Transaction ID : A6C96D74E9EB349CC8B2**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 100 DAINGERFIELD ROAD

City State Zip Code  
Alexandria VA 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  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AB2A7CA109C2D473E8B3**

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 41 OF 73
	<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)  
**NORTH SIDE GOOD GOVERNMENT COMMITTEE**

Mailing Address 3400 SOUTH WATER STREET

City State Zip Code  
PITTSBURGH PA 15203

FEC ID number of contributing federal political committee. **C** C00461939

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  
 03 / 25 / 2014

**Transaction ID : AD0757C09B84A40B0985**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE**

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City State Zip Code  
Washington DC 20036-1500

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

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  
 03 / 07 / 2014

**Transaction ID : A4CA4F38376B04DA1A3D**

Amount of Each Receipt this Period  
750.00

**C.** Full Name (Last, First, Middle Initial)  
**DUKE ENERGY CORPORATION PAC**

Mailing Address 550 SOUTH TRYON STREET

City State Zip Code  
Charlotte NC 28202-4200

FEC ID number of contributing federal political committee. **C** C00083535

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  
 03 / 31 / 2014

**Transaction ID : AF800C47A4A924228BCB**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

**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 73
	<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) <b>R.O.S.K.A.M. PAC</b>		Date of Receipt M M / D D / Y Y Y Y <b>01 / 29 / 2014</b>
Mailing Address <b>610 S Boulevard</b>		<b>Transaction ID : ADD53176BECEB43AAB2B</b>
City <b>Tampa</b>	State <b>FL</b>	
Zip Code <b>33606-2693</b>		Amount of Each Receipt this Period <b>2500.00</b>
FEC ID number of contributing federal political committee. <b>C C00494674</b>	Name of Employer	Occupation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500.00</b>	

Full Name (Last, First, Middle Initial) <b>Microsoft Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>16011 NE 36th Way</b>		<b>Transaction ID : ABD7B602DC17F47DCA50</b>
City <b>Redmond</b>	State <b>WA</b>	
Zip Code <b>98052-6301</b>		Amount of Each Receipt this Period <b>3000.00</b>
FEC ID number of contributing federal political committee. <b>C C00227546</b>	Name of Employer	Occupation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>4000.00</b>	

Full Name (Last, First, Middle Initial) <b>CMR PAC</b>		Date of Receipt M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>PO Box 2485</b>		<b>Transaction ID : A508C4843C1784B52827</b>
City <b>Springfield</b>	State <b>VA</b>	
Zip Code <b>22152-0485</b>		Amount of Each Receipt this Period <b>2500.00</b>
FEC ID number of contributing federal political committee. <b>C C00469429</b>	Name of Employer	Occupation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>8000.00</b>
<b>TOTAL</b> 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 43 OF 73
	<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 Beer Wholesalers Assoc. PAC**

Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

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  
 03 / 31 / 2014

**Transaction ID : A0870419E661E45D89D5**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

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  
 03 / 31 / 2014

**Transaction ID : A9B280E968BD64D08AFB**

Amount of Each Receipt this Period  
 2500.00

**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).....

4000.00

65277.87

**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 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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.** Full Name (Last, First, Middle Initial)  
**Mule Camp Springs LLC**

Mailing Address 3509 Tanners Mill Cir.

City Gainesville State GA Zip Code 30507-8839

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  
 01 / 29 / 2014

**Transaction ID : A33EB7AC27CD04D0CB00**

Amount of Each Receipt this Period  
 400.00

Refund

**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).....

400.00

400.00

**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 45 OF 73			
	<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. R.O.S.K.A.M. PAC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 25 / 2014</b>
Mailing Address <b>610 S Boulevard</b>		Amount of Each Disbursement this Period <b>500.00</b> Transaction ID : <b>B91FB863706E94841904</b>
City <b>Tampa</b>	State <b>FL</b>	
Zip Code <b>33606-2693</b>	Purpose of Disbursement In-kind: Fundraising Consulting	Category/ Type
Candidate Name <b>R.O.S.K.A.M. PAC</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. R.O.S.K.A.M. PAC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 25 / 2014</b>
Mailing Address <b>610 S Boulevard</b>		Amount of Each Disbursement this Period <b>527.87</b> Transaction ID : <b>B48E10A9C99C044F48E1</b>
City <b>Tampa</b>	State <b>FL</b>	
Zip Code <b>33606-2693</b>	Purpose of Disbursement In-kind: Event Catering	Category/ Type
Candidate Name <b>R.O.S.K.A.M. PAC</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. Hassel Weems Photography</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 02 / 2014</b>
Mailing Address <b>PO Box 141</b>		Amount of Each Disbursement this Period <b>750.76</b> Transaction ID : <b>B657686D9780A4F17A6E</b>
City <b>Locust Grove</b>	State <b>GA</b>	
Zip Code <b>30248-0141</b>	Purpose of Disbursement Photography	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>1778.63</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 46 OF 73			
	<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 01 / 02 / 2014
Mailing Address 301 N Walnut St Ste 1002		Amount of Each Disbursement this Period 7.95
City Wilmington	State DE	
Zip Code 19801-2917	Purpose of Disbursement CC Transaction Fees	Transaction ID : <b>BE338840EF5B24F54A7F</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:		

Full Name (Last, First, Middle Initial) <b>B. Red Pledge</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 53 Lake Morton Dr Ste 110		Amount of Each Disbursement this Period 217.61
City Lakeland	State FL	
Zip Code 33801-5344	Purpose of Disbursement CC Transaction Fees	Transaction ID : <b>B022F498964C84AD3A45</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:		

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 301 N Walnut St Ste 1002		Amount of Each Disbursement this Period 163.05
City Wilmington	State DE	
Zip Code 19801-2917	Purpose of Disbursement CC Transaction Fees	Transaction ID : <b>B469C75441C0D40A2A3B</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).....	388.61
<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 47 OF 73			
	<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 01 / 14 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 448.37 Transaction ID : BDF4DB39C769A41DA9E4
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:		

Full Name (Last, First, Middle Initial) <b>B. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 938.51 Transaction ID : BE1E1A3169CB14E9092B
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. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1514.07 Transaction ID : B749E1789820346C7836
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2900.95
<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 48 OF 73		
	<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. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 4500.00 <b>Transaction ID : BCB4B510BD55C46C5BA9</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software	
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. Matthews Printing Company</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 336 Northside Dr		Amount of Each Disbursement this Period 726.53 <b>Transaction ID : B5B180DE8354E4DE19A1</b>
City Gainesville State GA Zip Code 30501-3249	Purpose of Disbursement Printing	
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. Lunas Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 200 Main St SW		Amount of Each Disbursement this Period 790.01 <b>Transaction ID : B9C7899D7FBD54BF9AFB</b>
City Gainesville State GA Zip Code 30501-3774	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6016.54
<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 49 OF 73			
	<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 Mailworks Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 2394 Monroe Drive		Amount of Each Disbursement this Period 485.70 <b>Transaction ID : B92C8587257E94B1395B</b>
City Gainesville	State GA	
Zip Code 30507-7343	Purpose of Disbursement Mailing Services	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. The Theodore Company LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : BC16DDF0653F44A73AD0</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>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 56.00 <b>Transaction ID : BBB504CD63671483B904</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).....	3541.70
<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 50 OF 73			
	<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 01 / 24 / 2014
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 12135.59 <b>Transaction ID : B8705B422B544492A8B4</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. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 <b>Transaction ID : B224147581CF9471A92B</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:	

Full Name (Last, First, Middle Initial) <b>c. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1508.28 <b>Transaction ID : B2E1668F7129B49FD88F</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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13690.07
<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 51 OF 73			
	<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 01 / 30 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 511.36 <b>Transaction ID : B09F50C17A4C4413ABCF</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:		

Full Name (Last, First, Middle Initial) <b>B. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 938.52 <b>Transaction ID : BA950C95E777B4BF995D</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. Chattahoochee Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 3000 Club Dr		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : BD4C8B999BE0247ACAF1</b>
City Gainesville State GA Zip Code 30506-1773	Purpose of Disbursement Event Facility Rental	
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).....	1949.88
<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 52 OF 73			
	<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. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y <b>02 / 01 / 2014</b>
Mailing Address <b>140 West St</b>			Amount of Each Disbursement this Period <b>71.43</b> Transaction ID : <b>B057D33E800824E26AD1</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10007-2141</b>	
Purpose of Disbursement <b>Cell Phone</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:	

Full Name (Last, First, Middle Initial) <b>B. Red Pledge</b>			Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>53 Lake Morton Dr Ste 110</b>			Amount of Each Disbursement this Period <b>61.97</b> Transaction ID : <b>BDC04032951C34FEF943</b>
City <b>Lakeland</b>	State <b>FL</b>	Zip Code <b>33801-5344</b>	
Purpose of Disbursement <b>CC Transaction Fees</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:	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>300 1st St SE</b>			Amount of Each Disbursement this Period <b>1016.57</b> Transaction ID : <b>B3610CC5EA7024DDF89E</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003-1801</b>	
Purpose of Disbursement <b>Event Catering</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).....	<b>1149.57</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 53 OF 73		
	<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 02 / 05 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 <b>Transaction ID : B18D0721781F74E80A75</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. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 301 N Walnut St Ste 1002		Amount of Each Disbursement this Period 51.60 <b>Transaction ID : BD0EF54B3085B498895F</b>
City Wilmington State DE Zip Code 19801-2917	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. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 448.37 <b>Transaction ID : B5611FB7F53074490AE5</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).....	546.17
<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 54 OF 73	
	<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 02 / 14 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 <b>Transaction ID : B803A9E4BDAC044FE8B8</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. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 140 West St		Amount of Each Disbursement this Period 72.66 <b>Transaction ID : B7A21AD2FF04D4B2EA84</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:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Strategy Group</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 2700 Cumberland Parkway Suite 150		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : BBAD722A1C75344CF831</b>
City Atlanta State GA Zip Code 30339-3321	Purpose of Disbursement Fundraising 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5118.86
<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 73	
	<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>02 / 14 / 2014</b>
Mailing Address <b>PO Box 320412</b>		Amount of Each Disbursement this Period <b>1090.23</b> Transaction ID : <b>BCBB343A6FB1C4CA4A4B</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. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 14 / 2014</b>
Mailing Address <b>364 Green St NE</b>		Amount of Each Disbursement this Period <b>146.00</b> Transaction ID : <b>B96F7E49F1E0A462781D</b>
City <b>Gainesville</b>	State <b>GA</b>	
Zip Code <b>30501-3310</b>	Purpose of Disbursement <b>PO Box Renewal</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. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 14 / 2014</b>
Mailing Address <b>909 Brenau Point Dr</b>		Amount of Each Disbursement this Period <b>938.51</b> Transaction ID : <b>BC03C9E4CF43A42178DF</b>
City <b>Gainesville</b>	State <b>GA</b>	
Zip Code <b>30501-2074</b>	Purpose of Disbursement <b>Salary</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>2174.74</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 56 OF 73			
	<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. Hall County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 20 / 2014</b>
Mailing Address <b>PO Box 1174</b>		Amount of Each Disbursement this Period <b>250.00</b> Transaction ID : <b>B1C4B084FB14E42D4BF6</b>
City <b>Gainesville</b>	State <b>GA</b>	
Zip Code <b>30503-1174</b>	Purpose of Disbursement <b>Event Tickets</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. Georgia Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 24 / 2014</b>
Mailing Address <b>3110 Maple Dr NE Ste 150</b>		Amount of Each Disbursement this Period <b>5220.00</b> Transaction ID : <b>B782F5DE6080A47A2905</b>
City <b>Atlanta</b>	State <b>GA</b>	
Zip Code <b>30305-2650</b>	Purpose of Disbursement <b>Qualifying Fee</b>	Category/ Type
Candidate Name <b>Georgia Republican Party</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. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 27 / 2014</b>
Mailing Address <b>400 W Covina Blvd</b>		Amount of Each Disbursement this Period <b>448.36</b> Transaction ID : <b>BCD1C2F76A90743C396C</b>
City <b>San Dimas</b>	State <b>CA</b>	
Zip Code <b>91773-2954</b>	Purpose of Disbursement <b>Payroll Taxes</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>5918.36</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 73			
	<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 MM / DD / YYYY 02 / 28 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 92.40 <b>Transaction ID : B853B9140B12C4F0F9C9</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 MM / DD / YYYY 02 / 28 / 2014
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 938.52 <b>Transaction ID : B4CDE24EA2C6347B7AE6</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. American Express</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 301 N Walnut St Ste 1002		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : BFEB98A25AAF44414A1D</b>
City Wilmington State DE Zip Code 19801-2917	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).....	1038.87
<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 58 OF 73			
	<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. Red Pledge</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 53 Lake Morton Dr Ste 110		Amount of Each Disbursement this Period 34.09 <b>Transaction ID : B45407EA45C984465979</b>
City Lakeland	State FL Zip Code 33801-5344	
Purpose of Disbursement CC 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. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 28.34 <b>Transaction ID : BEF56727FB8304334820</b>
City Gainesville	State GA Zip Code 30501-2074	
Purpose of Disbursement Shipping (No Itemization)		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. Atlanta Hawks</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 101 Marietta St. Ste. 1900		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : BAFD9AD2DC3554BA78FF</b>
City Atlanta	State GA Zip Code 30303-2771	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3062.43
<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 73			
	<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 03 / 05 / 2014
Mailing Address 301 N Walnut St Ste 1002		Amount of Each Disbursement this Period 1.60 <b>Transaction ID : BA80725A47B0D40E9BB2</b>
City Wilmington	State DE	
Zip Code 19801-2917	Purpose of Disbursement CC 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. Digital Xpress Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address Suite 170		Amount of Each Disbursement this Period 809.43 <b>Transaction ID : BDBCCA20160B48C6AE6</b>
City Norcross	State GA	
Zip Code 30071	Purpose of Disbursement Printing	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. Dahlonaga Sunrise Rotary Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address PO Box 1388		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B13896065E46747A0AA8</b>
City Dahlonaga	State GA	
Zip Code 30533-0024	Purpose of Disbursement Event Tickets	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).....	1061.03
<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 60 OF 73			
	<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. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 448.37 <b>Transaction ID : B1F80943F2BE44AA5968</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:		

Full Name (Last, First, Middle Initial) <b>B. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 938.51 <b>Transaction ID : B8C1F2F8C4B814039B22</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. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1525.43 <b>Transaction ID : B33D72F1640F84ED59B7</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2912.31
<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 73	
	<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 03 / 21 / 2014
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period 46.20 <b>Transaction ID : B42C1556917354672811</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. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 140 West St		Amount of Each Disbursement this Period 71.57 <b>Transaction ID : B1B06F71CFB444250949</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:		

Full Name (Last, First, Middle Initial) <b>C. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 938.52 <b>Transaction ID : BAFB00351CDD14A6FB15</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1056.29
<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 62 OF 73			
	<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. ADP</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>03</td> <td></td> <td>28</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		28		2014
M M	/	D D	/	Y Y Y Y									
03		28		2014									
Mailing Address 400 W Covina Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Dimas</td> <td>CA</td> <td>91773-2954</td> </tr> </table>		City	State	Zip Code	San Dimas	CA	91773-2954	<table border="1"> <tr> <td>445.36</td> </tr> </table>		445.36			
City	State	Zip Code											
San Dimas	CA	91773-2954											
445.36													
Purpose of Disbursement Payroll Taxes		Transaction ID : <b>BD20EC037C05149778D0</b>											
Candidate Name		Category/ Type											
Office Sought:	<table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For:					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State:	District:	<table border="1"> <tr> <td><input type="checkbox"/></td><td>Primary</td> <td><input type="checkbox"/></td><td>General</td> </tr> <tr> <td><input type="checkbox"/></td><td colspan="3">Other (specify)</td> </tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)				
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General										
<input type="checkbox"/>	Other (specify)												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Chattahoochee Bankcard</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>01</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		17		2014
M M	/	D D	/	Y Y Y Y									
01		17		2014									
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Lawrenceville</td> <td>GA</td> <td>30043-8154</td> </tr> </table>		City	State	Zip Code	Lawrenceville	GA	30043-8154	<table border="1"> <tr> <td>4880.52</td> </tr> </table>		4880.52			
City	State	Zip Code											
Lawrenceville	GA	30043-8154											
4880.52													
Purpose of Disbursement See Below		Transaction ID : <b>B1C5BC69F648D4652953</b>											
Candidate Name		Category/ Type											
Office Sought:	<table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For:					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State:	District:	<table border="1"> <tr> <td><input type="checkbox"/></td><td>Primary</td> <td><input type="checkbox"/></td><td>General</td> </tr> <tr> <td><input type="checkbox"/></td><td colspan="3">Other (specify)</td> </tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)				
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General										
<input type="checkbox"/>	Other (specify)												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>c. Tortilla Coast</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>01</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		17		2014
M M	/	D D	/	Y Y Y Y									
01		17		2014									
Mailing Address 400 1st St SE		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20003-1826</td> </tr> </table>		City	State	Zip Code	Washington	DC	20003-1826	<table border="1"> <tr> <td>108.70</td> </tr> </table>		108.70			
City	State	Zip Code											
Washington	DC	20003-1826											
108.70													
Purpose of Disbursement Meeting Expense		Transaction ID : <b>B6985C5FDF03842438C7</b>											
Candidate Name		Category/ Type											
Office Sought:	<table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For:					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State:	District:	<table border="1"> <tr> <td><input type="checkbox"/></td><td>Primary</td> <td><input type="checkbox"/></td><td>General</td> </tr> <tr> <td><input type="checkbox"/></td><td colspan="3">Other (specify)</td> </tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)				
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General										
<input type="checkbox"/>	Other (specify)												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5325.88
<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 73			
	<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. Gainesville Signs</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 930-D Interstate Ridge Dr.		Amount of Each Disbursement this Period 444.05
City Gainesville	State GA	
Purpose of Disbursement Campaign Signs		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Stoneridge Group</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 4400 N Point Pkwy Ste 190		Amount of Each Disbursement this Period 59.85
City Alpharetta	State GA	
Purpose of Disbursement Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 1271.79
City Washington	State DC	
Purpose of Disbursement Event Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 64 OF 73			
	<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. Publix Supermarket</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 879 Dawsonville Hwy		Amount of Each Disbursement this Period 132.68
City Gainesville	State GA	
Zip Code 30501-2616	Purpose of Disbursement Event Catering	Transaction ID : B65D622330C10410FBF7
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 01 / 17 / 2014
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 : B646CE0D2BBA041799C9
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. Hank's Oyster Bar</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 1624 Q St NW		Amount of Each Disbursement this Period 114.80
City Washington	State DC	
Zip Code 20009-6354	Purpose of Disbursement Meeting Expense	Transaction ID : BF9267F8F54404E4AABF
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 65 OF 73			
	<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. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 140 West St		Amount of Each Disbursement this Period 277.18
City New York	State NY	
Purpose of Disbursement Cell Phone		Transaction ID : B7417C802645B4E7BB12
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Piedmont College</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 165 Central Ave.		Amount of Each Disbursement this Period 341.40
City Demorest	State GA	
Purpose of Disbursement Event Facility Rental		Transaction ID : BF87289DB5EEB49D7986
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Kingwood Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 401 Country Club Dr.		Amount of Each Disbursement this Period 99.68
City Clayton	State GA	
Purpose of Disbursement Meeting Expense		Transaction ID : BF94694DCA43F469590F
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)	[MEMO ITEM]
State: District:	Category/Type	

<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 66 OF 73			
	<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. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 826 Dawsonville Hwy		Amount of Each Disbursement this Period 159.14
City Gainesville	State GA	
Zip Code 30501-2617	Purpose of Disbursement Office Supplies	Transaction ID : <b>B94FFAE0357DA4565B47</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. Loree Anne Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 909 Brenau Point Dr		Amount of Each Disbursement this Period 17.50
City Gainesville	State GA	
Zip Code 30501-2074	Purpose of Disbursement See Below	Transaction ID : <b>B274E7484468B4C6C9F0</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:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 364 Green St NE		Amount of Each Disbursement this Period 17.50
City Gainesville	State GA	
Zip Code 30501-3310	Purpose of Disbursement Postage	Transaction ID : <b>BFA5D88B5C37847E4AA0</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).....	17.50
<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 73			
	<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 02 / 04 / 2014
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period 2575.94
City Lawrenceville	State GA Zip Code 30043-8154	
Purpose of Disbursement See Below	Category/Type	<b>Transaction ID : B3B0312B632F14212B98</b>
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. Babyland General</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 300 NOK Dr.		Amount of Each Disbursement this Period 100.00
City Cleveland	State GA Zip Code 30528-6981	
Purpose of Disbursement Event Tickets	Category/Type	<b>Transaction ID : B406B63C19FD74AFA8BB</b>
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>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>c. Createsend.com</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address Suite 11 Co. Clare, Ireland		Amount of Each Disbursement this Period 325.00
City	State Zip Code 0000	
Purpose of Disbursement E-Marketing	Category/Type	<b>Transaction ID : B97134AB1D62043BFA60</b>
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>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2575.94
<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 73			
	<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. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>140 West St</b>		Amount of Each Disbursement this Period <b>282.30</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10007-2141</b>	Transaction ID : <b>B86BEF3EF17594BAC9D2</b>	
Purpose of Disbursement <b>Cell Phone</b>	Category/ Type	<b>[MEMO ITEM]</b>
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. Lake Lanier</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>7000 Lanier Islands Parkway</b>		Amount of Each Disbursement this Period <b>119.84</b>
City <b>Buford</b> State <b>GA</b> Zip Code <b>30518-1442</b>	Transaction ID : <b>BDC255A74DAD34C6284B</b>	
Purpose of Disbursement <b>Tent Rental</b>	Category/ Type	<b>[MEMO ITEM]</b>
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. Congressional Institute</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>1700 Diagonal Rd Ste 730</b>		Amount of Each Disbursement this Period <b>890.00</b>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22314-2843</b>	Transaction ID : <b>BE6017F833A9C4037AC6</b>	
Purpose of Disbursement <b>Event Tickets</b>	Category/ Type	<b>[MEMO ITEM]</b>
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>0.00</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 69 OF 73			
	<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 02 / 04 / 2014
Mailing Address 364 Green St NE		Amount of Each Disbursement this Period 130.57
City Gainesville	State GA	
Zip Code 30501-3310	Purpose of Disbursement Postage	Transaction ID : B313FC8E2A6D14E30AC9
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. Moe's Southwest Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 25 Morrison Moore Parkway		Amount of Each Disbursement this Period 352.78
City Dahlonega	State GA	
Zip Code 30533	Purpose of Disbursement Event Catering	Transaction ID : BA39632E7074C479EAAC
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 03 / 11 / 2014
Mailing Address 1550 N Brown Rd Ste 150		Amount of Each Disbursement this Period 2879.60
City Lawrenceville	State GA	
Zip Code 30043-8154	Purpose of Disbursement See Below	Transaction ID : B9A614ABB97A640B9A72
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).....	2879.60
<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 73			
	<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. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 140 West St		Amount of Each Disbursement this Period 138.84
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Cell Phone	Transaction ID : <b>BA5C2050C2D94424DB9F</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. Guapo's</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 4036 Campbell Ave.		Amount of Each Disbursement this Period 140.53
City Arlington	State VA	
Zip Code 22206-3424	Purpose of Disbursement Meeting Expense	Transaction ID : <b>B36EE19ECFD614708A58</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 MM / DD / YYYY 03 / 11 / 2014
Mailing Address 104 Washington St NW		Amount of Each Disbursement this Period 29.39
City Gainesville	State GA	
Zip Code 30501-3623	Purpose of Disbursement Meeting Expense	Transaction ID : <b>B57DE15D0BBD24AAFAB6</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 71 OF 73			
	<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. Createsend.com</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address Suite 11 Co. Clare, Ireland		Amount of Each Disbursement this Period 325.00 Transaction ID : BDA84389FDBEF49F8827
City	State Zip Code 0000	
Purpose of Disbursement E-Marketing	Category/ Type	[MEMO ITEM]
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. The Stoneridge Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 4400 N Point Pkwy Ste 190		Amount of Each Disbursement this Period 39.90 Transaction ID : B782F688C93EE4F369E5
City	State Zip Code GA 30022-2481	
Purpose of Disbursement Postage	Category/ Type	[MEMO ITEM]
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. Tortilla Coast</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 400 1st St SE		Amount of Each Disbursement this Period 88.80 Transaction ID : B4B81B0BCCB50450AB8D
City	State Zip Code DC 20003-1826	
Purpose of Disbursement Meeting Expense	Category/ Type	[MEMO ITEM]
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).....	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 73	
	<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. Morton's</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 11 / 2014</b>
Mailing Address 1050 Connecticut Ave. NW		Amount of Each Disbursement this Period <b>394.68</b>
City Washington State DC Zip Code 20036-5303	Purpose of Disbursement Event Catering	
Candidate Name		Transaction ID : <b>BBE54BC650278469EA63</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:	Category/Type	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 11 / 2014</b>
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period <b>1016.57</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Event Catering	
Candidate Name		Transaction ID : <b>BAB63203644C24E87B01</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:	Category/Type	<b>[MEMO ITEM]</b>

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	
Candidate Name		Transaction ID
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>65104.33</b>



**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 73			
	<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. Project 51 Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 24 / 2014</b>
Mailing Address <b>PO Box 3372</b>		Amount of Each Disbursement this Period <b>5000.00</b> Transaction ID : <b>B3F1F928DC2864068A76</b>
City <b>Marietta</b> State <b>GA</b> Zip Code <b>30061-3372</b>	Purpose of Disbursement <b>Donation</b>	
Candidate Name	Category/Type	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. NRCC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 27 / 2014</b>
Mailing Address <b>320 1st St SE</b>		Amount of Each Disbursement this Period <b>32500.00</b> Transaction ID : <b>B9F08DAFA5EDD4405B7F</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1838</b>	Purpose of Disbursement <b>Contribution</b>	
Candidate Name <b>NRCC</b>	Category/Type	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>C. COFFMAN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 27 / 2014</b>
Mailing Address <b>4950 S YOSEMITE STREET F2 #511</b>		Amount of Each Disbursement this Period <b>1000.00</b> Transaction ID : <b>B1BFD93FD57604B15A1C</b>
City <b>Greenwood Village</b> State <b>CO</b> Zip Code <b>80111-1349</b>	Purpose of Disbursement <b>Contribution</b>	
Candidate Name <b>Michael Coffman</b>	Category/Type	
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: <b>CO</b> District: <b>06</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>38500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>38500.00</b>