Image#	11932329943
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FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only
1. NAME OF COMMITTEE (in	ull) (Check if name Example: If typying, type over the lines	12FE4M5
Lee Hawkins f	or Congress	
		<u> </u>
ADDRESS (number and a (Check if address is changed)		GA
	CITY	STATE ZIP CODE
COMMITTEE'S E-MA (Check if address is changed)	L ADDRESS (Please provide only one e-mail address) sshhawkins@bellsouth.net I I I I	
COMMITTEE'S WEB (Check if address is changed)	PAGE ADDRESS (URL)	
 2. DATE 0.9 3. FEC IDENTIFICA 		I
 FEC IDENTIFICA IS THIS STATEM 		
I certify that I have exami Type or Print Name of	ned this Statement and to the best of my knowledge and belief it is true, correct and TreasurerChris Masters	d complete
Signature of Treasurer	Electronically Filed by Chris Masters	Date 09 / 12 / Y Y Y Y 09 / 12
NOTE: Submission of fa	se, erroneous, or incomplete information may subject the person signing this Stater ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information or Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

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	FEC F	Form 1 (Revised 02/2009)	Page 2
5.	TYPE OF CO	DMMITTEE (Check One)	
	Candidate C	Committee:	
	(a) X	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
	Name of Candidate		
	Candidate Party Affiliati	on Office X House Senate President	State GA District 09
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	Party Comn	nittee:	
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Political Act	tion Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
		Corporation Corporation w/o Capital Stock	bor Organization
		Membership Organization Trade Association Co	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fundra	ising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	mittees Participating in Joint Fundraiser	
		1 FEC ID number C	
		2.	

С FEC ID number 4. 1

3.

С

FEC ID number

FEC Form 1 (Revised 02/2009)	
Write or Type Committee Name	

Loo Howking for Congr

Lee Hawkins	for Co	ngress
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6.	Name of Any Connected Org	anization, Affiliated Committee, Joint Fun	draising Representative, or I	eadership PAC Sponsor
				
	Mailing Address			
		СІТҮ	STATE 🛦	ZIP CODE
	Relationship: Connected Organization	Affiliated Committee Join	nt Fundraising Representative	Leadership PAC Sponsor
7.	possession of Committee		r optional), and position	of the person in
	Full Name	Hawkins		
	Mailing Address	4710 Jim Hood Road		
		Gainesville	GA	30506 _ 2832
	Title or Position ▼	Gainesville	GA State	30506 _ 2832 ZIP CODE &
	Title or Position ♥			
8.	Treasurer: List the name a name and address of any		STATEA Telephone number 77	ZIP CODE <u>&</u> 70 – 983 – 0960
8.	Treasurer: List the name a name and address of any	CITY A and address (phone number optional designated agent (e.g., assistant treas	STATEA Telephone number 77	ZIP CODE <u>&</u> 70 – 983 – 0960
8.	Treasurer: List the name a name and address of any Full Name of Treasurer	CITY A and address (phone number optional designated agent (e.g., assistant treas	STATEA Telephone number 77	ZIP CODE <u>&</u> 70 – 983 – 0960
8.	Treasurer: List the name a name and address of any Full Name of Treasurer	CITY A and address (phone number optional designated agent (e.g., assistant treas Hawkins 4710 Jim Hood Road	STATE Telephone number 77	ZIP CODE A 0 – 983 – 0960 mmittee; and the

FEC Form 1 (Re	evised 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A		 ZIP CODE A
		Telephone number	
			de ecceunte rente
Banks or Other Depo safety deposit boxes o Name of Bank, Depos	r maintains funds.	hich the committee deposits funds, hold	is accounts, rents
safety deposit boxes o	r maintains funds. itory, etc.		
safety deposit boxes o Name of Bank, Depos	r maintains funds. itory, etc.		1
safety deposit boxes o Name of Bank, Depos	r maintains funds. itory, etc.		1
safety deposit boxes o Name of Bank, Depos	r maintains funds. itory, etc.		
safety deposit boxes o Name of Bank, Depos Mailing Address	r maintains funds. itory, etc.		
safety deposit boxes o Name of Bank, Depos Mailing Address	r maintains funds. itory, etc.		
safety deposit boxes o Name of Bank, Depos Mailing Address	r maintains funds. itory, etc. ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓		
safety deposit boxes o Name of Bank, Depos Mailing Address	r maintains funds. itory, etc. ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓	· · · · · · · · · · · · · · · · · · ·	