. 1941 9 **20**05 P 31 7

	aign Contribution Disclosure Final Rep			
	rgia Government Transparency and Car			
	14 Avenue SE, Suite 1402 West Tower	Atlanta, GA	30334 404	-463-1980
1. Report Type (Select One)	2. Filing is being made on behalf of (Select One): Candidate or Public Official			Use Earlier of Post Mark or Hand
(**************************************	Office Held or Sought Clarke County Commissioner	•		Delivered Date
■ Original	(Include county, municipality, d	istrict, post or judicial circuit)		
■ Original	(Filer ID that begins with the l	etter "C")		
☐ Amendment	Organization or Person Other than Candidate's Campai Committee Name: Friends of Rachel Watkins	gn Committee		
Amendment #	Filer ID:	etter "NC")		
3. Identifying and Co	ntact Information			
Rachel Blacksher	Watkins	(2)	1/2/15	
	lidate or Other Than Candidate Campaign Committee	(2)	Today's Date	
(3) 170 Virginia Ave	Athens	GA	30601	
Mailing Address	City	Sta	te Zip Code	?
(4)	and/ or ra	chelbwatkins@gr	nail.com	
Primary Contact	Phone Number	VALUE	E-Mail	
(5) If a Candidate or Pu	iblic Official is there a campaign committee (one or mothe campaign, or file the reports?	ore persons) to mak	e campaign trans	actions, keep
(6) If yes, is the commi	ttee registered with the Commission? Yes	□ No		
(7) If yes, complete the	following June Ball	Linda Dodson		
(7) It yes, complete the	Name of Committee Chairperson	Name of Con	nmittee Treasurer	,
A Parson Pasnonsible	e for Maintaining Campaign Records			
4. I cison icesponsion	c for Mameaning Campaign Records			
•	to Mamtaming Campaign Records			
Linda Dodson	tor Mamtaming Campaign Records			
•	tor Maintaining Campaign Records			
Linda Dodson				
Linda Dodson (1) Full Name				
Linda Dodson (1) Full Name 335 Beechwood Dri		GA 30606		
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address			Code	
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City	ive	State Zip	Code	
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens	ive (5) linda.dodson0626@	State Zip	Code	
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947	ive (5) linda.dodson0626@ Email Address	State Zip	Code	
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Photo 5. TERMINATION D	ive (5) linda.dodson0626@ Email Address DATE: 12/31/14	State Zip Dgmail.com .	Code	
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Photo 5. TERMINATION D	ive Solution County of County o	State Zip @gmail.com ·		e report form is
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Photo 5. TERMINATION E State I, Linda L. Dodson	ive Solution County of County o	State Zip	Code	s report form is
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Photo 5. TERMINATION E State I, Linda L. Dodson	ive Solution County of County o	State Zip	e information in this	s report form is
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Phon 5. TERMINATION E State Linda L. Dodson complete, true, and co	ive Solution County of County o	State Zip	e information in this	s report form is ing submitted. if
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Photo 5. TERMINATION E State Linda L. Dodson complete, true, and coalso electronically file	ive Solution County of County o	State Zip	e information in this	s report form is ing submitted. if
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Photo 5. TERMINATION E State Linda L. Dodson complete, true, and coalso electronically file	ive Solution County of County o	State Zip Dgmail.com larke larke O T 4 O T 4	information in this in the electronic fill	ang subinitied. II
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Photo 5. TERMINATION E State Linda L. Dodson complete, true, and coalso electronically file	ive Solution County of County o	State Zip Dgmail.com larke larke O T 4 O T 4	e information in this	ang subinited. II
Linda Dodson (1) Full Name 335 Beechwood Dri (2) Mailing Address Athens (3) City (4) (706) 540-5947 Primary Contact Phone 5. TERMINATION I State Linda L. Dodson complete, true, and co also electronically file Sworn to and subscrib Signature of Notar PP	ive Solution County of County o	State Zip Digmail.com larke larke O T A	information in this in the electronic fill. The of Candidate ization/Chairperso	n/Treasurer

State of Georgia		
Campaign Contribution Disclosure Repo	ort	
Summary Report		
	In-Kind	
	Estimated Value	Cash Amount
B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind		
column and list any net balance on hand brought forward from the previous		0
election cycle in the cash amount column (Line 15 of previous report, or total		U
funds left over at year end of previous cycle); or		
C. If this filing is the second or subsequent filing of this Election Cycle, list totals		
All loans received this reporting period.		
Interest earned on campaign account this reporting period.		
I otal amount of investments sold this reporting period.		
I otal amount of cash dividends and interest paid out this reporting period.		
Total amount of all separate contributions of \$100 or less received in this		
reporting period and not listed on the "Itemized Contributions" page.		
"Common Source" contributions must be aggregated on the "Itemized	1	
	,	
	0	0
	1	
(Line 9 + 10)		
Total expenditures to date. Total to be carried forward to next report of this		
election cycle*.	0	0
(Line 8 + 11)		
INVESTMENTS		
Total value of investments held at the beginning of this reporting period.		
Total value of investments held at the end of this reporting period.		
<u></u>		
TOTAL NET BALANCE ON HAND		
Net balance on hand.	0	0
(Line 6 - 12 + 14)		<u> </u>
	Campaign Contribution Disclosure Reposummary Report CONTRIBUTIONS RECEIVED I have no contributions to report. I have the following contributions, including Common Source, to report: A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns. Total amount of all itemized Contributions received in this reporting period which is listed on the "Itemized Contributions" page. All loans received this reporting period. Total amount of investments sold this reporting period. Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page. "Contributions" page. Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4) Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5) EXPENDITURES MADE I have no expenditures to report. I have the following expenditures to report: Total amount of all separate expenditures made in this reporting period which are listed on the "Itemized Expenditures" page. Total amount of all separate expenditures made in this reporting period which are listed on the "Itemized Expenditures" page. Total amount of all separate expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page. Total amount of all separate expenditures of \$100.00 or less that were made in this repor	Campaign Contribution Disclosure Report Summary Report CONTRIBUTIONS RECEIVED 1 have the following contributions, including Common Source, to report. A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net blandace on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous sepeles); or C. If this filling is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns. Total amount of all itemized Contributions' page. All loans received this reporting period. Interest carned on campaign account this reporting period. Total amount of investments sold this reporting period. Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. Total contributions reported this period. (Line 3 + 3 a + 3b + 3c + 3d + 4) Total contributions reported this period. (Line 2 + 5) EXPENDITURES MADE 1 have no expenditures to report. A lister thank the following expenditures to report: Total amount of all itemized Expenditures to report: Total amount of all separate contributions of \$100 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page. Total expenditures made and reported prior to this reporting period which are fisted on the "Itemized Expenditures" page. Total amount of all separate expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page. Total avened the following expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page. Total expenditures to date. Total to be carried forward to next report

* O.C.G.A. 21-5-3(10): Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date

Public Officer/Candidate/Other Than Candidate Committee Name	Rachel B. Watkins	Page	of	
Those Officer/Candidate/Other Than Candidate Committee Name		rage		

	State of Georgia Campaign Contribution Disclosure Report Outstanding Indebtness	
Electi	on Cycle*: Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line $1 + 2 + 3 - 4 - 5 - 6$)	0
Electi	on Cycle*: Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line $1 + 2 + 3 - 4 - 5 - 6$)	
Electi	on Cycle*: Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line $1 + 2 + 3 - 4 - 5 - 6$)	

Rachel Blacksher Watkins	Page	ot`
	1 426	(/1

^{*} Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary) Public Officer/Candidate/Other Than Candidate Committee Name

State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

Must list contributions received by a single contributor for which the aggregate total more than \$100.00.

Not	e: Loans are no lo	onger reported in "Itemize	d Contributions" sec	tion. See Loan Re	porting sect	ion below.
Full Name of Co	ntributor	Contrib	outor	Election	Cash	In-Kind
Mailing Address				Cycle**	Amount	Contributions
(Affiliation of Co	ommittee if any)	Received Date	Occupation &			Estimated Value
		Contribution Type*	Employer			Description
First Name / Busines	s Name	Date	Occupation		Cash Amt.	Est. Value
Last Name				☐ Primary ☐ General ☐ Special		
Address				☐ Special Primary ☐ Run-Off Primary ☐ Run-Off General		
Address2		Monetary	Employer	Run-Off Special Run-Off Special Primary		Description
City		☐ In-Kind		Trimary		
Athens	T	Common Source			K (###)	
State GA	Zip	☐ Credit Received on Loan				
Aff. Comm.		Credit Received on Loan				
First Name / Busines	s Name	Date	Occupation		Cash Amt.	Est. Value
Last Name				☐ Primary ☐ General ☐ Special ☐ Special Primary		
Address				Run-Off Primary Run-Off General Run-Off Special		
Address2		☐ Monetary	Employer	Run-Off Special	1	Description
City		☐ In-Kind ☐ Common Source		Primary		
State	Zip	Credit Received on Loan			1.43:	
Aff. Comm.						
First Name / Busines	s Name	Date	Occupation		Cash Amt.	Est. Value
Last Name				☐ Primary ☐ General ☐ Special ☐ Special Primary		
Address				Run-Off Primary Run-Off General Run-Off Special		
Address2	4.9.104.00	Monetary	Employer	Run-Off Special Primary	i iii	Description
City		In-Kind				
State	Zip	Common Source Credit Received on Loan				
Aff. Comm.						
			Itemized Contribution	ons Page Total \$	· · · · · · · · · · · · · · · · · · ·	\$
Public Officer/Candid	date/Other Than Candi	date Committee Name	acnei Biacksner v	-		Page of

CFC-CCDR-FR&TS 1/14

First Name / Business	s Name	Date	Occupation		Cash Amt.	Est. Value
				Primary		
Last Name				General		
				Special Primary		
Address				Run-Off Primary		
				Run-Off General		
Address2		Monetary	Employer	Run-Off Special Run-Off Special	11.1 #11.14	Description
City		☐ In-Kind		Primary	gri di tani	
State	Zip	Common Source				
	Zip					
Aff. Comm.		Credit Received on Loan				
First Name / Business	s Name	Date	Occupation		Cash Amt.	Est. Value
				Primary		
Last Name				General		
				Special		
Address				Special Primary Run-Off Primary		
				Run-Off General		
Address2		Monetary	Employer	Run-Off Special Run-Off Special	1 14	Description
City		☐ In-Kind		Primary		
State	Zip	Common Source				
Aff. Comm.		Credit Received on Loan				
Mir. Comm.					š 25 6 2,	
First Name / Business	s Name	Date	Occupation		Cash Amt.	Est. Value
	144-1911-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			Primary		
Last Name				General Special	e Par	
				Special Primary		
Address				Run-Off Primary		
Address2		☐ Monetary	Employer	Run-Off General Run-Off Special		Description
			Employer	Run-Off Special		Description
City		☐ In-Kind		Primary		
State	Zip	Common Source				
Aff. Comm.		Credit Received on Loan				
					A Fifte	
First Name / Business	s Name	Date	Occupation		Cash Amt.	Est. Value
				Primary		
Last Name				General Special		
		<u> </u>		Special Primary		
Address				Run-Off Primary	a Th	
Address2		Monetary	Employer	Run-Off General		Description
			Employer	Run-Off Special		Description
City		☐ In-Kind		Primary		
State	Zip	Common Source				
Aff. Comm.		Credit Received on Loan				
			<u> </u>	<u> </u>		
			Itemized Contributio	ns Page Total \$		\$
* Contribution Typ	e (Monetary In-Kind	Common Source, Credit Receiv				

	Itemized Contributions Page Total \$	\$
* Contribution Type (Monetary, In-Kind, Common Source, Credit F		: (P:)
** Election Cycle (Primary, General, Special, Special Primary, Run- *** If any such person(s) shall have a fiduciary relationship to the lend		
it any outer person(e) of an involutionary relationship to the following	and modulation of party making the devance of extension of	Cican
Public Officer/Candidate/Other Than Candidate Committee Name	Rachel Blacksher Watkins	Page of
Tuote Officer/Candidate/Office Than Candidate Committee Name		rage or

CFC-CCDR-FR&TS 1/14

	L	oan Reporting		
Name of Lender	1.Date of Loan	Person(s) responsi	ble for	1.Occupation &
&	2.Amount of Loan	repayment of loan	&	2.Place of Employment
Mailing Address	3.Election Cycle**	Mailing Address		3.Fiduciary Relationship***
Lender Name (First Name, Business, Inst.)	1.	First Name		1.
Lender Last Name	2.	Last Name		2.
	2.			
Address	3.	Address		3.
	Primary General			☐ Public Officer
Address2	Special	Address2		7 -
	Special Primary			☐ Candidate
City	Run-Off Primary Run-Off General	City		Other Than Candidate Committee
	Run-Off Special			Name
State Zip	Run-Off Special Primary	State	Zip	
Lender Name (First Name, Business, Inst.)	1.	First Name		I.
Lender Last Name	2.	Last Name		2.
Address	3.	Address		3.
	Primary General			Public Officer
Address2	Special	Address2	•	1
	Special Primary			☐ Candidate
City	Run-Off Primary Run-Off General	City		Other Than Candidate Committee
	Run-Off Special			Name
State Zip	Run-Off Special Primary	State	Zip	
				-
Reference: OCGA § 21-5-34(b)(1)	I	<u></u>	1	Loan Page Total \$

Public Officer/Candidate/Other Than Candidate Committee Name	Rachel Blacksher Watkins	 Pageof

^{*} Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

** Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)

*** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

____ Page ____ of ___

	State of Georg			
Car	npaign Contribution Di	sclosure Report		
	Itemized Expend	ditures		
ust list expenditures	made to a single recipient for which	h the <u>aggregate</u> total more	than \$100.00.	
	· ·	•		Amount
ess of Recipient	Exp. Type*	Employer	Purpose	Paid
	Date	Occupation		
		•		
	Expenditure			
	☐In-Kind ☐Loan Repayment			
······	Refund	Employer		
	3rd Party			
	Payment on Deferred Expense			
Zip	□Investment			
	Date	Occupation		
	Expenditure			
	Loan Repayment			
		Employer		
	Credit Card			
	Deferred Payment			
7:	☐Payment on Deferred Expense			
Zip				
	Date	Occupation		
	Expenditure			
	☐In-Kind			
	Refund	Employer		
	Reimbursement			
	☐3rd Party			
	Deferred Payment Payment on Deferred Expense			
	□Investment			
	ust list expenditures ame and ess of Recipient	Itemized Expenditure ame and	### Itemized Expenditures ### Ust list expenditures made to a single recipient for which the aggregate total more ame and Exp. Date Occupation & Exp. Type* Employer Date	Ust list expenditures made to a single recipient for which the appregate total more than \$100.00. ame and Exp. Date Exp. Type* Employer Purpose Date Occupation Expenditure Purpose

Rachel Blacksher Watkins

Public Officer/Candidate/Other Than Candidate Committee Name

CFC-CCDR-FR&TS 1/14

	nme and ess of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
		Emp. Type		1 pos o	
First Name		Date	Occupation		
Last Name					
Address		Expenditure	_		
		☐In-Kind ☐Loan Repayment			
Address2		Refund	Employer		
		Reimbursement Credit Card			
City		3rd Party Deferred Payment			
	T -2:	Payment on Deferred Expense			
State	Zip				
First Name		Date	Occupation		
Last Name					
Address		Expenditure			
		☐In-Kind ☐Loan Repayment			
Address2		Refund Reimbursement	Employer		
C'.		Credit Card			
City		3rd Party Deferred Payment			
State	Zip	Payment on Deferred Expense			
First Name	<u> </u>	Date	Occupation		
Last Name					

Address		Expenditure In-Kind			
		Loan Repayment			
Address2		☐ Refund ☐ Reimbursement	Employer		
City		Credit Card 3rd Party			*
		Deferred Payment Payment on Deferred Expense			
State	Zip	Investment			
First Name		Date	Occupation		
Last Name					
Addesse		Europeditura			
Address		Expenditure In-Kind			
Address2		Loan Repayment Refund	Employer		
		Reimbursement Credit Card			
City		☐ 3rd Party ☐ Deferred Payment			
		Payment on Deferred Expense			
State	Zip	□Investment			
* Expenditure Type (Exp	enditure, In-Kind, Loan F	Repayment, Refund, Reimbursement, Credi	t Card, 3rd Party, Deferred Paym	ent on Deferred Expense,	
Investment)Public Officer/			otal \$		
		Rachel Blacksh	er Watkins		
Public Officer/Candidate/C	Other Than Candidate Con	nmittee Name	- 77 GARATO	Page	_ of

		State of G	eorgia					
	Campa	ign Contribution	n Disclo	osure Report				
		Investments S	Stateme	ent				
1. Investme	ent Name		Ac	ecount #				
Institution/	Person		Va	llue at beginning of reporting peri	od \$			
Holding A	ccount			Value at end of reporting per	iod \$			
Mailing Address 170 Virginia Ave				Difference in value \$				
Address2								
				Interest Paid C	Out \$			
	City	State Zip		Cash Divider	nds \$			
Investment	Transactions	,						
<u>Date</u>	Person(s) Involved in Transaction	Value of investment p	urchased	Value of investment sold	<u>Profit</u>	Loss		
2. Investme	ent Name		Ac	count #		1		
Institution/	Person		Va	lue at beginning of reporting peri-	od \$			
Holding A	ecount			Value at end of reporting peri	iod\$			
Mailing Ac	ddress			Difference in val	ue \$			
Address2								
				Interest Paid (Out \$			
	City	State Zip		Cash Divider	nds \$			
Investment	Transactions		I					
<u>Date</u>	Person(s) Involved in Transaction	Value of investment pr	urchased	Value of investment sold	Profit	Loss		
Total value	of investments at beginning of report	ting period \$	Page To	otal Cash Dividends: \$				
<u>Tota</u>	I value of investments at end of report	ting period \$	Page Total Interest Paid Out: \$					
	Total difference	ce in value \$	Page To	Page Total Profit:				
			Page To	otal Loss: \$				

Rachel Blacksher Watkins	Page	of	
	-		

State of Georgia Campaign Contribution Disclosure Report Addendum Statement

	Addendum Statement					
The Addendum Statement should be used for explanation of any additional information needed to complete an accurate filing of this report.						
	In Addendum Statement should be used for explanation of any additional information needed to complete an accurate filing of this report. Information that is to be reported in the body of the report should not be listed on Addendum Statement.					
	information and is to be reported in the body of site report <u>and the sou</u> of instead of reasonable sources.					
-						

Public Officer/Candidate/Other Than Candidate Committee Name	Rachel Blacksher Watkins	Page	of`

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	aign Contribution Disclosure Final Rep			
	rgia Government Transparency and Car			
200 Piedmor	t Avenue SE, Suite 1402 West Tower	Atlanta, GA	30334 404	-463-1980
1. Report Type (Select One)	2. Filing is being made on behalf of (Select One):			Use Earlier of Post
(00000 0.22)	Candidate or Public Official Office Held or Sought Clarke County Commissioner			Mark or Hand Delivered Date
	(Include county, municipality, di	strict, post or judicial circuit)		Denvered Date
Original	Filer ID C2013001612 (Filer ID that begins with the le	(ler "C")		
☐ Amendment	Organization or Person Other than Candidate's Campai			
	Committee Name: Friends of Rachel Watkins	ga Committee		
Amendment #	Filer ID:			
	(Filer ID that begins with the let	ler "NC")		
3. Identifying and Cor	ntact Information			
(1) Rachel Blacksher	Watkins	(2) 1	/2/15	
Full Name of Cand	idate or Other Than Candidate Campaign Committee		Today's Date	
(3) 170 Virginia Ave	Athens	GA	30601	
Mailing Address	City	State		<u>. </u>
(4)	•	chelbwatkins@gm	•	
(4) Primary Contact F			E-Mail	·
(5) If a Candidate or Put financial records of t	olic Official is there a campaign committee (one or more the campaign, or file the reports?	e persons) to make	campaign transa	actions, keep
(6) If yes, is the commit	tee registered with the Commission? Yes	□ No		
(7) If yes, complete the	following June Ball	Linda Dodson		
	Name of Committee Chairperson	Name of Com	nittee Treasurer	
4. Person Responsible	for Maintaining Campaign Records			
Linda Dodson				
(1) Full Name				
335 Beechwood Driv	ve			
(2) Mailing Address				
Athono		0.0000		
Athens		GA 30606		
(3) City		7: 6	1	
		State Zip C	ode	
₍₄₎ (706) 540-5947	linda.dodson0626@		ode	
(4) (706) 540-5947 Primary Contact Phone	(2)		ode	
	(5)		ode	
	Number (2) Email Address		ode	
Primary Contact Phone 5. TERMINATION D	Number (3) Email Address ATE: 12/31/14	gmail.com .	ode	
5. TERMINATION DA	Number Email Address ATE: 12/31/14 Of Georgia County of Cla	gmail.com .		
5. TERMINATION DA	Number County of Clark Co	gmail.com	nformation in this	
5. TERMINATION DA	ATE: 12/31/14 Of Georgia County of Clary being duly sworn (affirm), dependent of the contents in this report are the contents in the contents	gmail.com		
5. TERMINATION DA State of I, Linda L. Dodson complete, true, and corr	ATE: 12/31/14 Of Georgia County of Clary being duly sworn (affirm), dependent. Further, I affirm that the contents in this report are the contents of the con	gmail.com	nformation in this	
State of Linda L. Dodson complete, true, and corralso electronically filed.	ATE: 12/31/14 Of Georgia County of Clary being duly sworn (affirm), dependent. Further, I affirm that the contents in this report are the contents of the con	gmail.com	nformation in this	
State of Linda L. Dodson complete, true, and corralso electronically filed.	ATE: 12/31/14 Of Georgia County of Clary being duly sworn (affirm), dependent. Further, I affirm that the contents in this report are the contents of the con	gmail.com	nformation in this	
State of Notary Pull	ATE: 12/31/14 Of Georgia County of Clary being duly sworn (affirm), dependent. Further, I affirm that the contents in this report are the contents of the con	gmail.com Trke Trke Trke Trke Trice Tr	nformation in this the electronic filing of Candidate atton/Chairperson	Treasurer

Public Officer/Candidate/Other Than Candidate Committee Name

Rachel B. Watkins

____ Page ____ of ____