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Campaign Contribution Disclosure Report

Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1402 West Tower | Atlanta, GA 30334 | 404-463-1980 | www.ethics.ga.gov

1. Report Type (Select One) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment Amendment # _____	2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought <u>Chief Magistrate, Athens-Clarke County</u> <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID <u>C 2008000 316</u> <small>(Filer ID that begins with the letter "C")</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: _____ Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>	Use Earlier of Post Mark or Hand Delivered Date <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
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3. Identifying and Contact Information

(1) Patricia De Andrea Barron (2) 04/06/2016
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) P O Box 6083 Athens GA 30604
Mailing Address City State Zip Code

(4) (706) 369-0261 and/or judgebarron@hotmail.com
Primary Contact Phone Number E-Mail

(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? Yes No

(6) If yes, is the committee registered with the Commission? Yes No

(7) If yes, complete the following: Katheryn B. Davis | Maxine Peaks
Name of Committee Chairperson Name of Committee Treasurer

4. Period for which you are Reporting

You Must Check Only One Box

My Non Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Election
<input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> June 30, ____ (year)	<input type="checkbox"/> January 31, ____ (year) <input checked="" type="checkbox"/> March 31, <u>2016</u> (year) <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> September 30, ____ (year) <input type="checkbox"/> October 25, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)	<input type="checkbox"/> 6 days before Primary Run-Off ____ (year) <input type="checkbox"/> 6 days before General Run-Off ____ (year) <input type="checkbox"/> 6 days before Special Primary Run-Off ____ (year) <input type="checkbox"/> 6 days before Special Run-Off ____ (year)	<input type="checkbox"/> 15 days before Special Primary, ____ (year) <input type="checkbox"/> 15 days before Special, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)
Supplemental Reporting <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)			
<small>*Persons leaving office with excess funds until such funds are expended as provided in the Act *Unsuccessful candidates with excess funds, or who receive contributions to retire debt incurred, until such funds are expended, or such unpaid debts are satisfied (December 31 filing only)</small>			

State of Georgia County of Athens-Clarke

I, Patricia D. Barron, being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on 17th day of April, 2016

[Signature] 3/6/2020 Patricia D. Barron
Signature of Notary Public Commission Expiration a. Signature of Candidate b. Organization/Chairperson/Treasurer

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**State of Georgia
Campaign Contribution Disclosure Report
Summary Report**

CONTRIBUTIONS RECEIVED

1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	In-Kind Estimated Value	Cash Amount
2	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.	0	1233.74
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		1,000.00
3a	All loans received this reporting period.		0
3b	Interest earned on campaign account this reporting period.		0
3c	Total amount of investments sold this reporting period.		0
3d	Total amount of cash dividends and interest paid out this reporting period.		0
4	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.	55.31	1,280.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	55.31	2,280.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	55.31	3513.74

EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	0	0
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	0	2,405.16
10	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	0	133.75
11	Total expenditures reported this period. (Line 9 + 10)	0	2538.91
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	0	2538.91

INVESTMENTS

13	Total value of investments held at the beginning of this reporting period.		0
14	Total value of investments held at the end of this reporting period.		0

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)	55.31	974.83
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* 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.

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State of Georgia Campaign Contribution Disclosure Report Outstanding Indebtness			
Election Cycle*: <u>General</u>		Election Year: <u>2016</u>	<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.		0
2	Loans received this reporting period.		0
3	Deferred payment of expenses this reporting period		0
4	Payments made on loans this reporting period.		0
5	Credits received on loans this reporting period		0
6	Payments this reporting period on previously deferred expenses.		0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		0
Election Cycle*: <u>General</u>		Election Year: <u>2016</u>	<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.		0
2	Loans received this reporting period.		0
3	Deferred payment of expenses this reporting period		0
4	Payments made on loans this reporting period.		0
5	Credits received on loans this reporting period		0
6	Payments this reporting period on previously deferred expenses.		0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		0
Election Cycle*: <u>General</u>		Election Year: <u>2016</u>	<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.		0
2	Loans received this reporting period.		0
3	Deferred payment of expenses this reporting period		0
4	Payments made on loans this reporting period.		0
5	Credits received on loans this reporting period		0
6	Payments this reporting period on previously deferred expenses.		0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		0

* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)
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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.
Note: Loans are no longer reported in "Itemized Contributions" section. See Loan Reporting section below.

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name or Business Name Patricia Last Name Barron Address P.O. Box 6083 Address2 City Athens State GA Zip Aff. Comm.	Date 02/03/2016 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Chief Magistrate Judge Employer Athens-Clarke County Government	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 250.00	Est. Value Description
First Name or Business Name Pamela Last Name Adkins-Ramey Address 140 Chalice Ct Address2 City Athens State GA Zip 30606 Aff. Comm.	Date 02/25/2016 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Entrepreneur Employer Self-Employed	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 175.00	Est. Value Description
First Name or Business Name Nancy Last Name Lindbloom Address 215 Southview Dr Address2 City Athens State GA Zip 30605 Aff. Comm.	Date 02/02/2016 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Attorney Employer Georgia Legal Services	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 150.00	Est. Value Description

Itemized Contributions Page Total \$ 575.00 \$ 0

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First Name or Business Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
Clyde Last Name: Peek Address: 561 Lakeland Ct Address2: City: Athens State: GA Zip: 30607 Aff. Comm.	02/11/2016	Retired	<input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	300.00	
Fred Last Name: Smith Address: 425 Rivermont Rd Address2: City: Athens State: GA Zip: 30606 Aff. Comm.	03/03/2016	Retired	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	125.00	
 Last Name: Address: Address2: City: State: Zip: Aff. Comm.			<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
 Last Name: Address: Address2: City: State: Zip: Aff. Comm.			<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
 Last Name: Address: Address2: City: State: Zip: Aff. Comm.			<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
 Last Name: Address: Address2: City: State: Zip: Aff. Comm.			<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
Itemized Contributions Page Total				\$ 425.00	\$ 0

* 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

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Loan Reporting

Name of Lender & Mailing Address	1.Date of Loan 2.Amount of Loan 3.Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1.Occupation & 2.Place of Employment 3.Fiduciary Relationship***
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State Zip		State Zip	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State Zip		State Zip	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total \$ 0	

* 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

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State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total more than \$100.00.

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Katheryn <hr/> Last Name Davis <hr/> Address 101 Woodhaven Circle <hr/> Address2 <hr/> City Athens <hr/> State GA Zip 30606	Date 03/03/2016 <hr/> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation UGA Professor <hr/> Employer Retired	Campaign Reception Food	232.14
First Name Athens-Clarke County <hr/> Last Name <hr/> Address 325 E Washington Street <hr/> Address2 <hr/> City Athens <hr/> State GA Zip 30601	Date 03/07/2016 <hr/> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Board of Elections <hr/> Employer Athens-Clarke County Government	Qualifying Fee	2173.02
First Name <hr/> Last Name <hr/> Address <hr/> Address2 <hr/> City <hr/> State Zip	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <hr/> Employer		

Page Total \$ 2405.16

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)
 Public Officer/Candidate/Other Than Candidate Committee Name

Public Officer/Candidate/Other Than Candidate Committee Name

Patricia D. Barron

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