

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 <small>(Select One)</small> <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment <small>Amendment #</small> _____	2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought District 2 Commissioner, Athens, Georgia <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID: _____ <small>(Filer ID that begins with the letter "C")</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: _____		<small>Use Earlier of Post Mark or Hand Delivered Date</small> APR 2 '18 PM12:16
	Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>		

3. Identifying and Contact Information

(1) **Taylor Pass** (2) **03/31/2018***Full Name of Candidate or Other Than Candidate Campaign Committee* *Today's Date*(3) **Athens** **Ga** **30605**
Mailing Address *City* *State* *Zip Code*(4) **TaylorPassforAthens@gmail.com** *and/or* **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: **Cshanyse Allen** **Kisha Bailey**
Name of Committee Chairperson *Name of Committee Treasurer*

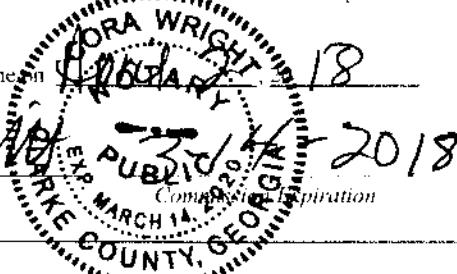
4. Period for which you are Reporting

You Must Check Only One Box

My Non Election Year	My Election Year	Run-Offs (Report required only if you are in a Run-Off Election)	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, 2018 (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)			

*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)

I, Taylor B. Pass, 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 18*Signature of Notary Public*
Taylor Pass
 a. Signature of Candidate
 b. Organization/Chairperson/Treasurer

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.	585.20	585.20
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		4050.00
3a	All loans received this reporting period.	0	0
3b	Interest earned on campaign account this reporting period.	0	0
3c	Total amount of investments sold this reporting period.	0	0
3d	Total amount of cash dividends and interest paid out this reporting period.	0	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.		2735.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		6785.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		7370.20

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.		699.05
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		6040.69
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		139.39
11	Total expenditures reported this period. (Line 9 + 10)		6180.08
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 - 11)		6879.13

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)		491.07
----	--	--	--------

* 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.

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

Election Cycle*:		Election Year:	Amount
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*:		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)	
Election 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)	

* 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.

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*				
First Name or Business Name Janice	Date 02/10/2018	Occupation retired		Cash Amt. 150.00	Est. Value
Last Name Dunston			<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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 2300 W. Rosecroft Village Circle		Employer			
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				Description
City Athens					
State Ga	Zip 20745				
Aff. Comm.					
First Name or Business Name Tommie	Date 03/06/2018	Occupation retired educator		Cash Amt. 250.00	Est. Value
Last Name Farmer			<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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 P.O. Box 293		Employer			
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				Description
City Athens					
State GA	Zip 30603				
Aff. Comm.					
First Name or Business Name Mary	Date 03/28/2018	Occupation Retired Educator		Cash Amt. 200.00	Est. Value
Last Name Kendrick			<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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 2951 Mockingbird Lane, SW		Employer			
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				Description
City Atlanta					
State GA	Zip 30311				
Aff. Comm.					

Itemized Contributions Page Total \$ 3000.00

CFC-CDR 1.4

First Name or Business Name Patricia	Last Name Wilker	Address 135 Tamarack Drive	Date 03/13/2018	Occupation business owner	Cash Amt. 250.00	Est. Value
				<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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		Description
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Eventbiles		
City Athens						
State GA		Zip 30605				
Aff. Comm.						
First Name or Business Name Edith	Last Name Frazier	Address 157 Old Winterville Road	Date 03/18/2018	Occupation retired	Cash Amt. 200.00	Est. Value
				<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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		Description
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer		
City Athens						
State GA		Zip 30601				
Aff. Comm.						
First Name or Business Name Michael	Last Name Ruppersburg	Address 1776 Briardill Road, NE	Date 03/21/2018	Occupation attorney	Cash Amt. 250.00	Est. Value
				<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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		Description
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Blasingame, Burch, Garrard, Ashley, PC		
City Atlanta						
State GA		Zip 30306				
Aff. Comm.						
First Name or Business Name Ruby	Last Name Worthy	Address 12 Melbourne Drive	Date 03/28/2018	Occupation retired educator	Cash Amt. 150.00	Est. Value
				<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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		Description
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer		
City Athens						
State GA		Zip 30606				
Aff. Comm.						
Itemized Contributions Page Total \$ 850.00						\$

* 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

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 Diane	Date 03/12/2018	Occupation Pediatrician	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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 2600.00	Est. Value
Last Name Dunston					
Address 1120 Victoria Crossing					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Palmetto Pediatrics in Aiken, South Carolina			Description
City Watkinsville					
State Ga	Zip 30606				
Aff. Comm.					
First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Last Name			<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					
Address2	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
City					
State Ga	Zip 30606				
Aff. Comm.					
First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Last Name			<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					
Address2	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
City					
State Ga	Zip 30606				
Aff. Comm.					

Itemized Contributions Page Total \$ 2600.00

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 \$ _____				

* 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

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 Athens-Clarke County Board of Elections	Date 03/05/2018	Occupation	qualifying fee	450.00
Last Name		Employer		
Address 155 E Washington St	<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			
Address2				
City Athens				
State GA	Zip 30601			
First Name Sams Club	Date 03/09/2018	Occupation	to purchase items needed for March 9, 2018 Iron Triangle Community Vote Event	105.49
Last Name		Employer		
Address 4365 Atlanta Hwy	<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			
Address2				
City Bogart				
State GA	Zip 30622			
First Name Cherelle	Date 03/17/2018	Occupation teacher	reimbursement for campaign brochures	160.00
Last Name Pullen		Employer		
Address 232 Epps Bridge Road Apt. 9H	<input 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	Clarke County School District		
Address2				
City Athens				
State GA	Zip 30606			

Page Total \$ **715.49**

* 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

CFC-CUDR-14

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Diamond Global Multi Media	Date 03/17/2018	Occupation graphic design company	campaign flyers, shirts, and yard signs	1846.63
Last Name		Employer		
Address 117 Whisperwood Ln	<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			
Address2		Employer		
City Athens				
State GA	Zip 30605			
First Name Fairway Outdoor Advertising	Date 03/18/2018	Occupation advertisement company	campaign billboards for advertisement	2978.57
Last Name				
Address 3420 Jefferson Road	<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			
Address2		Employer		
City Athens				
State Ga	Zip 30607			
First Name Kisha	Date 03/18/2018	Occupation teacher	reimbursement for additional billboard campaign advertisement	500.00
Last Name Bailey				
Address 212 Kelli Drive	<input 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			
Address2		Employer Clarke County School District		
City Athens				
State GA	Zip 30606			
First Name	Date	Occupation		
Last Name				
Address	<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			
Address2		Employer		
City				
State	Zip			

* 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 Taylor Pass Page Total \$ 5325.20

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

1. Investment Name n/a		Account #			
Institution/Person Holding Account _____		Value at beginning of reporting period \$ _____			
Mailing Address _____		Value at end of reporting period \$ _____			
Address2 _____		Difference in value \$ _____			
City _____ State _____ Zip _____		Interest Paid Out \$ _____			
		Cash Dividends \$ _____			
Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
2. Investment Name		Account #			
Institution/Person Holding Account _____		Value at beginning of reporting period \$ _____			
Mailing Address _____		Value at end of reporting period \$ _____			
Address2 _____		Difference in value \$ _____			
City _____ State _____ Zip _____		Interest Paid Out \$ _____			
		Cash Dividends \$ _____			
Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
Total value of investments at beginning of reporting period \$ _____		Page Total Cash Dividends: \$ _____			
Total value of investments at end of reporting period \$ _____		Page Total Interest Paid Out: \$ _____			
Total difference in value \$ _____		Page Total Profit: \$ _____			
		Page Total Loss: \$ _____			

CEC-CCDR 1-4

State of Georgia
Campaign Contribution Disclosure Report
Addendum Statement

The 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.

N/A