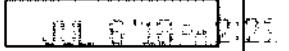


Campaign Contribution Disclosure Report

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)	2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought: Board of Education, District 5, Athens-Clarke County <small>(Include county, municipality, district, post or judicial circuit)</small> <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment <small>Amendment #</small>	Use Earliest of Post Mark or Hand Delivered Date 
	Filer ID Organization or Person Other than Candidate's Campaign Committee Committee Name: Committee to Elect Imani-Scott Blackwell Filer ID: <small>(Filer ID that begins with the letter "C")</small>	

3. Identifying and Contact Information

(1) Imani Arielle Scott-Blackwell	(2) 07/06/2018		
<i>Full Name of Candidate or Other Than Candidate Campaign Committee</i>	<i>Today's Date</i>		
(3) 870 N Chase Street	Athens	GA	30601
<i>Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
(4) (678) 749-9399	and/or	Imani4youth@gmail.com	
<i>Primary Contact Phone Number</i>	<i>E-Mail</i>		
(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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(6) If yes, is the committee registered with the Commission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(7) If yes, complete the following: Imani Scott-Blackwell		Christopher Dowd	
<i>Name of Committee Chairperson</i>		<i>Name of Committee Treasurer</i>	

4. Period for which you are Reporting**You Must Check Only One Box**

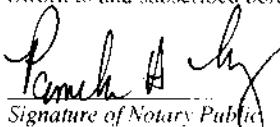
My Non Election Year	My Election Year	Run-Offs (Report required only if you are in a Run-Off Election)	Special Election
<input type="checkbox"/> January 31, _____ (year) <input checked="" type="checkbox"/> June 30, _____ (year)	<input type="checkbox"/> January 31, _____ (year) <input type="checkbox"/> March 31, _____ (year) <input checked="" type="checkbox"/> June 30, 2018 (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 checked="" type="checkbox"/> December 31, _____ (year)			
<small>*Persons leaving office with excess funds until such funds are expended as provided in the Act</small> <small>*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>			

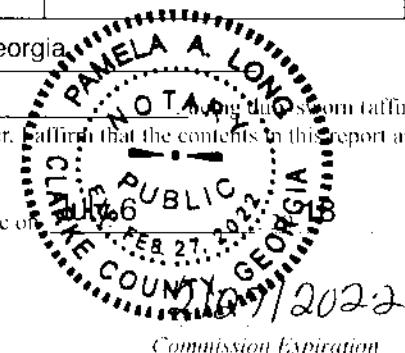
State of Georgia County of Clarke

1. Christopher Dowd

I, Christopher Dowd, do solemnly swear (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



Signature of Notary Public



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.	0.00	1307.20
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	0.00	613.00
3a	All loans received this reporting period.	0.00	0.00
3b	Interest earned on campaign account this reporting period.	0.00	0.00
3c	Total amount of investments sold this reporting period.	0.00	0.00
3d	Total amount of cash dividends and interest paid out this reporting period.	0.00	0.00
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.	0.00	916.82
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	0.00	1529.82
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	0.00	2837.02

EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:	0.00	0.00
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.	0.00	161.69
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	0.00	2005.04
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	0.00	670.29
11	Total expenditures reported this period. (Line 9 + 10)	0.00	2675.33
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	0.00	2837.02

INVESTMENTS

13	Total value of investments held at the beginning of this reporting period.	0.00
14	Total value of investments held at the end of this reporting period.	0.00

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)	0.00
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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

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

Election Cycle*: <u>General</u>		Election Year: <u>2018</u>	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		100.00
2	Loans received this reporting period.		0.00
3	Deferred payment of expenses this reporting period		0.00
4	Payments made on loans this reporting period.		0.00
5	Credits received on loans this reporting period		108.00
6	Payments this reporting period on previously deferred expenses.		0.00
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		0.00
Election Cycle*: <u></u>		Election Year: <u></u>	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*: <u></u>		Election Year: <u></u>	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*				Description
First Name or Business Name Barbara	Date 04/24/2018	Occupation Professor		Cash Amt 200.00	Est. Value
Last Name Benson			<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		
Address 235 Dubose Ave					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Piedmont College			Description
City Athens	<input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source				
State GA	Zip 30601				
Aff. Comm.					
First Name or Business Name Eleanor	Date 05/15/2018	Occupation Illustrator		Cash Amt 305.00	Est. Value
Last Name Davis			<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		
Address 117 Lenoir Ave					
Address2	<input checked="" type="checkbox"/> Monetary	Employer self-employed			Description
City Athens	<input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source				
State GA	Zip 30601				
Aff. Comm.					
First Name or Business Name Imani	Date 06/17/2018	Occupation Server		Cash Amt 108.00	Est. Value
Last Name Scott-Blackwell			<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		
Address 870 N Chase St.					
Address2	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source	Employer Another Broken Egg Cafe			Description
City Athens					
State GA	Zip 30601				
Aff. Comm.	<input checked="" type="checkbox"/> Credit Received on Loan				

Itemized Contributions Page Total \$ 613.00 \$ 0.00

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 \$ 0.00

* 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 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 Bel-Jean Copy/Print	Date 05/23/2018	Occupation n/a	Campaign literature	411.23
Last Name				
Address 163 E. Broad Street	<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	Employer n/a		
Address2				
City Athens				
State GA	Zip 30601			
First Name Signs.com	Date 04/16/2018	Occupation n/a	Yard signs	318.64
Last Name				
Address 1550 S Gladiola Street	<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	Employer n/a		
Address2				
City Salt Lake City				
State UT	Zip 84104			
First Name Best Buy	Date 04/18/2018	Occupation n/a	Chromebook computer	277.13
Last Name				
Address 1791 Oconee Connector	<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	Employer n/a		
Address2				
City Athens				
State GA	Zip 30606			

1007.00

Page Total \$

* 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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Facebook	Date 05/05/2018	Occupation n/a	Social media ads	114.00
Last Name				
Address 1 Hacker Way	<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	Employer n/a		
Address2				
City Menlo Park				
State CA	Zip 94025			
First Name Growmail	Date 05/01/2018	Occupation n/a	Direct mailer	280.00
Last Name				
Address 425 E Spruce Street	<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	Employer n/a		
Address2				
City Tampa Springs				
State FL	Zip 34689			
First Name Iron Factory	Date 05/04/2018	Occupation n/a	Food for early voting celebration	178.20
Last Name				
Address 265 W Washington Street	<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	Employer n/a		
Address2				
City Athens				
State GA	Zip 30601			
First Name EDDM Experts LLC	Date 05/17/2018	Occupation n/a	Direct mailer	317.84
Last Name				
Address 425 E Spruce Street	<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	Employer n/a		
Address2				
City Tampa Springs				
State FL	Zip 34689			

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)
 Investment) Public Officer/Candidate/Other Than Candidate Committee Name Page Total \$ 890.04

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>Imani</i>	Date <i>6/17/18</i>	Occupation <i>Server</i>	repayment of loan	<i>108.00</i>
Last Name <i>Scott-Blackwell</i>				
Address <i>870 Chase St.</i>	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input checked="" 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	Employer <i>Another Broken Egg Cafe</i>		
Address2				
City <i>Athens</i>				
State <i>GA</i>	Zip <i>30601</i>			
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			
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			
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 Page Total \$ *188.00*

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

1. 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 \$			
		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 \$			
		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: \$ _____			

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.