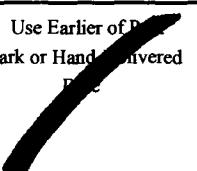


Campaign Contribution Disclosure Report

Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1416 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>Athens-Clarke County Commissioner, District 10</u> <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID <u>C2019000578</u> <small>(Filer ID that begins with the letter "C")</small>		Use Earlier of Post Date or Hand Delivered Date  JAN 3 AM 9:52
	Organization or Person Other than Candidate's Campaign Committee Committee Name: _____ Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>		

3. Identifying and Contact Information

(1) Devon Alexander Spiva (2) 01/02/2020
Full Name of Candidate or Other Than Candidate Campaign Committee Name *Today's Date*

(3) P.O. Box 5922, Athens, GA 30604
Mailing Address *City* *State* *Zip Code*

(4) (706) 389-0406 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: Devon Alexander Spiva John Thomas Hanley, III
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 checked="" type="checkbox"/> December 31, <u>2019</u> (year)	<input type="checkbox"/> January 31, _____ (year) <input type="checkbox"/> April 30, _____ (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)			

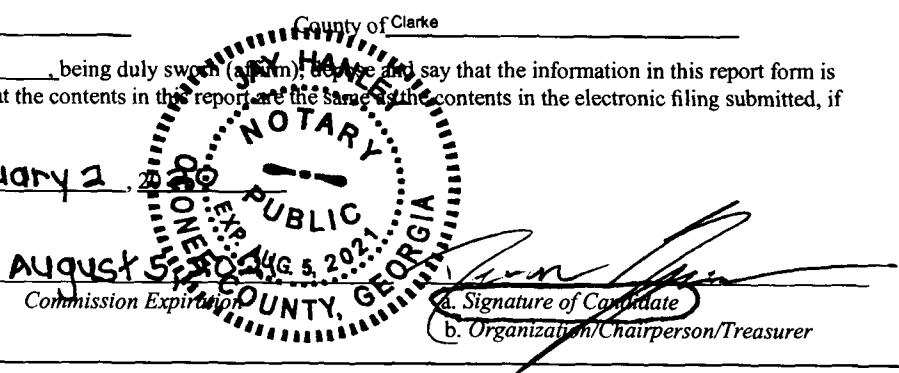
*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34i

State of GeorgiaCounty of Clarke

I, Devon Alexander Spiva, 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 January 2, 2020

John Hanley
Signature of Notary Public



State of Georgia
Campaign Contribution Disclosure Report
Summary Report

CONTRIBUTIONS RECEIVED

		In-Kind Estimated Value	Cash Amount
1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:		
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	0
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$450.00	\$1,210.00
3a	All loans received this reporting period.		\$301.66
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.	0	\$140.25
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$450.00	\$1,651.91
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$450.00	\$1,651.91

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	\$360.00
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		\$176.00
11	Total expenditures reported this period. (Line 9 + 10)		\$536.00
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$536.00

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)		\$1,115.91
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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.

Committee to Elect Devon Spiva

CFC-CCDR 10/19

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

Election Cycle*: <u>General</u>		Election Year: <u>2020</u>	<u>Amount</u>
1 Outstanding indebtedness at the beginning of this reporting period.			0
2 Loans received this reporting period.			\$301.66
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)			\$301.66
Election Cycle*: <u></u>		Election Year: <u></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></u>		Election Year: <u></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)
 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 John Thomas	Date 07/05/2019	Occupation Funeral Services Assistant		Cash Amt.	Est. Value
Last Name Hanley III			<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	\$150	
Address P.O. Box 34		Employer Bernstein Funeral Home	<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				
City Watkinsville					
State GA	Zip 30677				
Aff. Comm.					
First Name or Business Name DVA Home Solutions	Date 7/11/2019	Occupation Construction Company		Cash Amt.	Est. Value
Last Name			<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	\$150	
Address 109 Red Maple Lane		Employer Self-Employed	<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				
City Guyton					
State GA	Zip 31312				
Aff. Comm.					
First Name or Business Name Johnny	Date 7/12/2019	Occupation Political Consultant		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	\$150	
Address 4410 Clonemore Way		Employer Self-Employed			Description
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				
City Cumming					
State GA	Zip 30040				
Aff. Comm.					

Itemized Contributions Page Total \$ 400.00

\$ 0

CFC-CCDR 10/19

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Carl Spiva	7/12/2019	CEO	\$100	
Address 8716 Hurst Avenue				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City Savannah	<input type="checkbox"/> In-Kind	TCI		
State GA	Zip 31406	<input type="checkbox"/> Common Source		
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Brant Frost V	07/12/2019	Second Vice Chairman		
Address 14 Greenville Street				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City Newnan	<input type="checkbox"/> In-Kind	Georgia Republican Party		
State GA	Zip 30263	<input type="checkbox"/> Common Source		
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
John Elliott	07/12/2019	Business Owner		
Address 130 Southview Drive				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City Athens	<input type="checkbox"/> In-Kind	Aaron Bonding Company		
State GA	Zip 30605	<input type="checkbox"/> Common Source		
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Persica of Georgia Inc.	07/29/2019	N/A		
Address 115 E. Main Street				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
A1B-2C	<input type="checkbox"/> In-Kind	Persica of Georgia Inc.		
City Buford	<input type="checkbox"/> Common Source			
State GA	Zip 30518	<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.				
Itemized Contributions Page Total \$ 810.00 \$				

* 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
First Name or Business Name Printing Trade Company	Date 07/29/2019	Occupation Printing Company	<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	Cash Amt.	Est. Value \$450
Last Name			<input type="checkbox"/> Run-Off Special Primary		
Address 2790 Simpson Circle		Employer Printing Trade Company	<input type="checkbox"/> Run-Off Special Primary		
Address2	<input type="checkbox"/> Monetary <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				Description Handouts
City Norcross					
State GA	Zip 30071				
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		
Address			<input type="checkbox"/> Run-Off Special Primary		
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	Zip				
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		
Address			<input type="checkbox"/> Run-Off Special Primary		
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	Zip				
Aff. Comm.					

Itemized Contributions Page Total \$ \$ 450.00

CFC-CCDR 10/19

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.) Devon	1. 07/08/2019	First Name Devon	1. Phone Technician
Lender Last Name Spiva	2. \$301.66	Last Name Spiva	2. Dr. Phone Fix
Address 1005 Macon Hwy., Apt. 116	3. <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 P.O. Box 5922	3. <input type="checkbox"/> Public Officer <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City Athens		City Athens	
State GA	Zip 30608	State GA	Zip 30604
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 \$ <u>\$301.66</u>	

* 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	Occupation & Employer	Expenditure Purpose	Amount Paid
Exp. Type*				
First Name Brant	Date 12/30/2019	Occupation Second Vice Chairman	Refund of Contribution	\$360
Last Name Frost V				
Address 14 Greenville Street	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input checked="" 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 Georgia Republican Party		
City Newnan				
State GA	Zip 30263			
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	Employer		
Address2				
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	Employer		
Address2				
City				
State	Zip			

Page Total \$ **\$360.00**

* 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-CCDR 10/19

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
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	Employer		
Address2					
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	Employer		
Address2					
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	Employer		
Address2					
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	Employer		
Address2					
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 \$ 0

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: \$ _____		

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.