

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 <u>Sherriff</u> Office Held or Sought _____ (Include county, municipality, district, post or judicial circuit) Filer ID _____ (Filer ID that begins with the letter "C") Organization or Person Other than Candidate's Campaign Committee Committee Name <u>Committee to Elect John Q. Williams</u> Filer ID: _____ (Filer ID that begins with the letter "NC")	Use Earlier of Post Mark or Hand-Delivered Date FEB 4 PM 1:08
--	---	---

3. Identifying and Contact Information

(1) John Quincy Williams (2) 2/3/20
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) 331 Canada Ct. Winterville GA 30683
Mailing Address City State Zip Code

(4) 706 - 363 - 0513 and/ or johnqforathens@gmail.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: Alex Vanden Heuvel | Alex Vanden Heuvel
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"/> December 31, _____ (year)	<input checked="" type="checkbox"/> January 31, <u>2020</u> (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 reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34i

I, Alex Vanden Heuvel, State of Georgia, County of Clarke, 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 4th Feb, 2020

Signature of Notary Public

Commission Expires Mar. 12, 2021

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.	\$1,087.21	\$1,680.43
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$ 4.99	\$ 841
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.	0	0
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$4.99	\$841
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$1,092.20	\$2,523.43

EXPENDITURES MADE

7	<input checked="" type="checkbox"/> I have no expenditures to report. <input 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.		\$1,095.53
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		0
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		\$99.62
11	Total expenditures reported this period. (Line 9 + 10)		\$99.62
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$1,195.15

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)		\$1,328.28
----	--	--	------------

* 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>Primary</u> Election Year: <u>2020</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	<u>596.99</u>
2	Loans received this reporting period.	<u>0</u>
3	Deferred payment of expenses this reporting period	<u>0</u>
4	Payments made on loans this reporting period.	<u>0</u>
5	Credits received on loans this reporting period	<u>0</u>
6	Payments this reporting period on previously deferred expenses.	<u>0</u>
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	<u>596.99</u>
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
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: _____		<u>Amount</u>
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 Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Felicia	Date 1/13/20	Occupation Law Enforcement	<input checked="" 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	Cash Amt. \$10	Est. Value
Last Name Kortson				Description	
Address 816 Virginia Lane					
Address2					
City Hull	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Govt			
State GA	Zip 30646				
Aff. Comm.					
First Name or Business Name Michael L	Date 1/14/20	Occupation Not Employed	<input checked="" 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	Cash Amt. \$100	Est. Value
Last Name Buchholz				Description	
Address 1941 Holman Ave.					
Address2					
City Athens	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Not Employed			
State GA	Zip 30606				
Aff. Comm.					
First Name or Business Name JoBeth	Date 1/18/20	Occupation Not Employed	<input checked="" 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	Cash Amt. \$100	Est. Value
Last Name Allen				Description	
Address 136 Clyde Rd.					
Address2					
City Athens	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Not Employed			
State GA	Zip 30605				
Aff. Comm.					

CFC-CCDR 10/19

First Name or Business Name Edward		Date 1/18/20	Occupation Attorney	<input checked="" 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	Cash Amt. \$25	Est. Value
Last Name Brumby						
Address 631 Chesterfield Rd.						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Self			Description
City Boyart		<input type="checkbox"/> In-Kind				
State GA		<input type="checkbox"/> Common Source				
Zip 30622		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name Andy		Date 1/23/20	Occupation Screenwriter	<input checked="" 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	Cash Amt. \$10	Est. Value
Last Name Ferguson						
Address 118 Ruth Dr.						
Address2 #440		<input checked="" type="checkbox"/> Monetary	Employer Self			Description
City Athens		<input type="checkbox"/> In-Kind				
State GA		<input type="checkbox"/> Common Source				
Zip 30601		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name Emily		Date 1/23/20	Occupation Not Employed	<input checked="" 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	Cash Amt. \$200	Est. Value
Last Name Carr						
Address 805 Forest Heights Dr.						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Not Employed			Description
City Athens		<input type="checkbox"/> In-Kind				
State GA		<input type="checkbox"/> Common Source				
Zip 30606		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name David		Date 1/25/20	Occupation Physician	<input checked="" 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	Cash Amt. \$50	Est. Value
Last Name Jarrett						
Address 1721 Prince Ave.						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Self			Description
City Athens		<input type="checkbox"/> In-Kind				
State GA		<input type="checkbox"/> Common Source				
Zip 30606		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
Itemized Contributions Page Total \$ 285 \$						

* 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

First Name or Business Name Brooks	Date 1/26/20	Occupation Researcher	<input checked="" 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	Cash Amt. \$100	Est. Value
Last Name Mendell					
Address 1828 Regency Walk					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Forisk			Description
City Watkinsville					
State GA	Zip 30671				
Aff. Comm.					
First Name or Business Name John	Date 1/27/20	Occupation Professor	<input checked="" 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	Cash Amt. \$50	Est. Value
Last Name Olive					
Address 135 Gibbons Way					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer UGA			Description
City Athens					
State GA	Zip 30605				
Aff. Comm.					
First Name or Business Name Jane	Date 1/27/20	Occupation Professor	<input checked="" 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	Cash Amt. \$50	Est. Value
Last Name McPherson					
Address 554 Boulevard					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer UGA			Description
City Athens					
State GA	Zip 30601				
Aff. Comm.					
First Name or Business Name Dantrel	Date 1/28/20	Occupation Marketing Manager	<input checked="" 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	Cash Amt. \$25	Est. Value
Last Name Robinson					
Address 402 Holly Dr.					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Alabama ONE Credit Union			Description
City Adamsville					
State AL	Zip 35005				
Aff. Comm.					
Itemized Contributions Page Total \$ 225					

* 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

First Name or Business Name Janet	Date 1/28/20	Occupation Professor	<input checked="" 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	Cash Amt. \$25	Est. Value
Last Name Frick					
Address 210 Rollingwood Dr.					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer UGA			Description
City Athens					
State GA	Zip 30605				
Aff. Comm.					
First Name or Business Name Thomas	Date 1/29/20	Occupation Not Employed	<input checked="" 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	Cash Amt. \$10	Est. Value
Last Name Wittenberg					
Address 14450 Stratford Dr.					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Not Employed			Description
City Athens					
State GA	Zip 30605				
Aff. Comm.					
First Name or Business Name Sara	Date 1/29/20	Occupation Not Employed	<input checked="" 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	Cash Amt. \$50	Est. Value
Last Name Hensley					
Address 160 Virginia Ave.					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Not Employed			Description
City Athens					
State GA	Zip 30601				
Aff. Comm.					
First Name or Business Name Nyndaly	Date 1/31/20	Occupation Records	<input checked="" 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	Cash Amt. \$10	Est. Value
Last Name Latimore					
Address PO Box 831					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer ACCPD			Description
City Colbert					
State GA	Zip 30628				
Aff. Comm.					
Itemized Contributions Page Total \$ 95 \$					

* 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

First Name or Business Name Danita	Date 1/20/20	Occupation Nurse	<input checked="" 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	Cash Amt. \$25	Est. Value
Last Name Brown					
Address 712 Crossing Dr.					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Self			Description
City Lithia Springs	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30122	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name Common Source	Date	Occupation	<input checked="" 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	Cash Amt. \$1	Est. Value
Last Name					
Address					
Address2	<input type="checkbox"/> Monetary	Employer			Description
City	<input type="checkbox"/> In-Kind				
State	<input checked="" type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name John Q	Date 1/26/20	Occupation Police Sgt.	<input checked="" 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	Cash Amt.	Est. Value \$4.99
Last Name Williams					
Address 331 Canada Ct.					
Address2	<input type="checkbox"/> Monetary	Employer ALCPD			Description hosting email
City Winterville	<input checked="" type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30683	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name	Date	Occupation	<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	Cash Amt.	Est. Value
Last Name					
Address					
Address2	<input type="checkbox"/> Monetary	Employer			Description
City	<input type="checkbox"/> In-Kind				
State	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Itemized Contributions Page Total \$ 26 \$ 4.99					

* 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

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	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2	<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	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	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2	<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	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
Investments Statement

1. Investment Name	Account #
Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	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 _____ Mailing Address _____ Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	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

<u>Total value of investments at beginning of reporting period \$</u>	Page Total Cash Dividends: \$ _____
<u>Total value of investments at end of reporting period \$</u>	Page Total Interest Paid Out: \$ _____
<u>Total difference in value \$</u>	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.

NA