

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) | 2. Filing is being made on behalf of (Select One): | | Use Earlier of Post Mark or Hand-Delivered Date |
| <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment Amendment # _____ | Candidate or Public Official Office Held or Sought Sheriff (Include county, municipality, district, post or judicial seat) | Filer ID C2020000096 (Filer ID that begins with the letter "C") | |
| Organization or Person Other than Candidate's Campaign Committee Committee Name: Hare for Sheriff Filer ID: _____ (Filer ID that begins with the letter "NC") | | | |

MAY 14 2020 11:47

3. Identifying and Contact Information

| | |
|--|---------------------------------------|
| (1) Robert William Hare | (2) 04/30/2020 |
| Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date | |
| (3) 1860 Barnett Shoals Road, Ste. 103-547, Athens, GA 30605 | Mailing Address City State Zip Code |
| (4) (678) 656-2764 | and/ or hare4sheriff@gmail.com 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? <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: Kristina Jerome-Hare | Robert Hare |
| 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"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year) | <input type="checkbox"/> January 31, _____ (year) <input checked="" type="checkbox"/> April 30, 2020 (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. § 21-5-341

State of Georgia

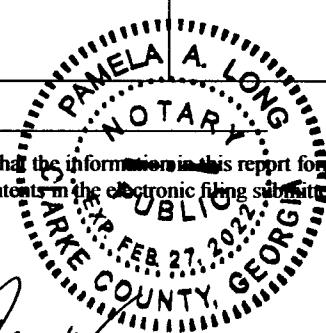
County of Clarke

I, Robert William Hare, 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 May 1, 2020


Signature of Notary Public

21 27/2022
Commission Expiration



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 | 0.00 |
| 3 | Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page. | 1,000.00 | 3,500.00 |
| 3a | All loans received this reporting period. | | 0.00 |
| 3b | Interest earned on campaign account this reporting period. | | 0.00 |
| 3c | Total amount of investments sold this reporting period. | | 0.00 |
| 3d | Total amount of cash dividends and interest paid out this reporting period. | | 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. | | 750.00 |
| 5 | Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4) | 1,000.00 | 4,250.00 |
| 6 | Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5) | 1,000.00 | 4,250.00 |
| 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. | 0.00 | 0.00 |
| 9 | Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page. | | 3,524.66 |
| 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 | | 210.35 |
| 11 | Total expenditures reported this period. (Line 9 + 10) | | 3735.01 |
| 12 | Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11) | | 3735.01 |
| 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) | | 514.99 |

* 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

| <u>Election Cycle*</u> : Primary | | <u>Election Year:</u> 2020 | <u>Amount</u> |
|--|--|----------------------------|---------------|
| 1 Outstanding indebtedness at the beginning of this reporting period. | | | 0.00 |
| 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 | | | 0.00 |
| 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 |
| <u>Election Cycle*</u> : Primary | | <u>Election Year:</u> 2020 | <u>Amount</u> |
| 1 Outstanding indebtedness at the beginning of this reporting period. | | | 0.00 |
| 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 | | | 0.00 |
| 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 |
| <u>Election Cycle*</u> : Primary | | <u>Election Year:</u> 2020 | <u>Amount</u> |
| 1 Outstanding indebtedness at the beginning of this reporting period. | | | 0.00 |
| 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 | | | 0.00 |
| 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 (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* | | | | Description |
| First Name or Business Name Robert Last Name Hare Address 185 Stillwood Ct Address2 City Athens State GA Zip 30605 Aff. Comm. Candidate/Treasurer | Date Feb. 24, 2020 | 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 | Cash Amt. | Est. Value \$400 |
| | | Employer | <input type="checkbox"/> Run-Off Special Primary | | |
| | | | | | Description Campaign supplies/signs |
| First Name or Business Name Robert Last Name Hare Address 185 Stillwood Ct Address2 City Athens State GA Zip 30605 Aff. Comm. Candidate/Treasurer | Date March 2, 2020 | 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 | Cash Amt. | Est. Value 3,250 |
| | | Employer | <input type="checkbox"/> Run-Off Special Primary | | |
| | | | | | Description |
| First Name or Business Name Wendy Last Name Hare Address 1695 West Hancock Ave Address2 City Athens State GA Zip 30601 Aff. Comm. Volunteer | Date March 9, 2020 | Occupation Student | <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 \$600 |
| | | Employer | <input type="checkbox"/> Run-Off Special Primary | | |
| | | | | | Description Photo shoot for website, social media and set-up for fundraisers. |
| Itemized Contributions Page Total \$ 3,250.00 \$ 1,000.00 | | | | | |

CFC-CCDR 10/19

| First Name or Business Name Larry | Date April 13, 2020 | Occupation Truck Driver | Cash Amt. 250.00 | Est. Value |
|--|--|--|----------------------------|-------------|
| Last Name Hare | | | | |
| Address 757 Normal Avenue | | | | |
| Address2 #E-7 | <input checked="" type="checkbox"/> Monetary | Employer Self | | Description |
| City Burley | <input type="checkbox"/> In-Kind | | | |
| State ID | Zip 83318 | <input type="checkbox"/> Common Source | | |
| Aff. Comm. None | | <input type="checkbox"/> Credit Received on Loan | | |
| First Name or Business Name | Date | Occupation | Cash Amt. | Est. Value |
| Last Name | | | | |
| Address | | | | |
| Address2 | <input type="checkbox"/> Monetary | Employer | | Description |
| City | <input type="checkbox"/> In-Kind | | | |
| State Zip | <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 |
| Last Name | | | | |
| Address | | | | |
| Address2 | <input type="checkbox"/> Monetary | Employer | | Description |
| City | <input type="checkbox"/> In-Kind | | | |
| State Zip | <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 |
| Last Name | | | | |
| Address | | | | |
| Address2 | <input type="checkbox"/> Monetary | Employer | | Description |
| City | <input type="checkbox"/> In-Kind | | | |
| State Zip | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | |
| Itemized Contributions Page Total \$ 250.00 \$ 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

| 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 Vista Print | Date Feb. 4, 2020 | Occupation | Flyers | 126.35 |
| Last Name | | Employer | | |
| Address 275 Wyman 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 | | | |
| Address2 | | | | |
| City Waltham | | | | |
| State MA | Zip 02451 | | | |
| First Name UZ Marketing | Date Feb. 4, 2020 | Occupation | Yard Signs | 397.72 |
| Last Name | | Employer | | |
| Address 5900 Bingle 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 | | | | |
| City Houston | | | | |
| State TX | Zip 77092 | | | |
| First Name Board of Elections | Date March 2, 2020 | Occupation | Qualifying Fees | 2424.59 |
| Last Name | | Employer | | |
| Address 155 East 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 | | | |
| Address2 | | | | |
| City Athens | | | | |
| State GA | Zip 30601 | | | |

Page Total \$ 2948.66

* 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 Poker Depot | Date March 10, 2020 | Occupation | Campaign Poker Chips | 115.37 |
| Last Name | | | | |
| Address 4301 31st Street, North | <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 | | |
| Address2 | | | | |
| City St. Petersburg | | | | |
| State FL | Zip 33714 | | | |
| First Name The Pen Factory | Date March 10, 2020 | Occupation | Promotional Pens | 109.63 |
| Last Name | | | | |
| Address 205 Maywood Avenue | <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 | | |
| Address2 | | | | |
| City Maywood | | | | |
| State NJ | Zip 07607 | | | |
| First Name Loco's East | Date March 9, 2020 | Occupation | Meet & Greet Fundraiser | 351.00 |
| Last Name | | | | |
| Address 1985 Barnett Shoals 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 | Employer | | |
| Address2 | | | | |
| City Athens | | | | |
| State GA | Zip 30605 | | | |
| 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 \$ 576.00

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 \$ _____ | | |
| 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: \$ <u>0.00</u> | | |
| Total value of investments at end of reporting period \$ _____ | | | Page Total Interest Paid Out: \$ <u>0.00</u> | | |
| Total difference in value \$ _____ | | | Page Total Profit: \$ <u>0.00</u> | | |
| | | | Page Total Loss: \$ <u>0.00</u> | | |

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.

No additional information to provide.