

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): Candidate or Public Official Office Held or Sought <u>County Commissioner District 5</u> (Include county, municipality, district, post or judicial seat) Filer ID (Filer ID that begins with the letter "C")	Use Earlier of Post Mark or Hand-Delivered Date
<input type="checkbox"/> Original		
<input type="checkbox"/> Amendment		
Amendment # _____		
Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee To Elect Dexter L. Fisher</u> Filer ID: (Filer ID that begins with the letter "NC")		

3. Identifying and Contact Information

(1) <u>Dexter L. Fisher</u>	(2) <u>7/05/2022</u>		
Full Name of Candidate or Other Than Candidate Campaign Committee Name			
(3) <u>125 Melbourne Drive</u>	<u>Athens</u>	<u>GA.</u>	<u>30606</u>
Mailing Address		State	Zip Code
(4) <u>706-224-4313</u>	and/ or <u>dexterfisher@gmail.com</u>		
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? <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: <u>Jennifer Zwirn</u>		<u>Sterling Gardner</u>	
Name of Committee Chairperson		Name of Committee Treasurer	

4. Period for which you are Reporting

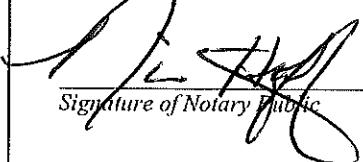
You Must Check Only One Box

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 type="checkbox"/> April 30, _____ (year) <input checked="" type="checkbox"/> June 30, <u>2022</u> (year) <input type="checkbox"/> September 30, _____ (year) <input type="checkbox"/> October 25, _____ (year) <input type="checkbox"/> Dec. 31, _____ (year)	<input checked="" type="checkbox"/> 6 days before Primary Run-Off <u>2022</u> (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)			

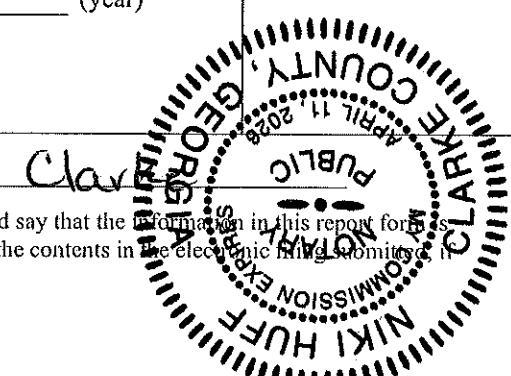
*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34

I, Dexter L. Fisher, 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.

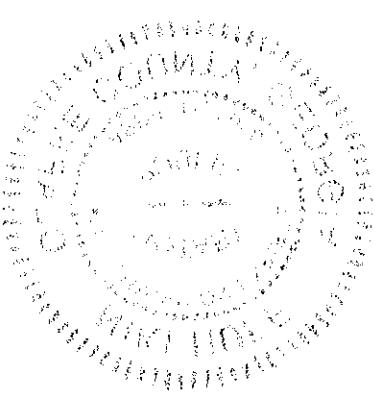
Sworn to and subscribed before me on 7/6, 20 22


Signature of Notary Public

4/11/2026
Commission Expiration


NICKI HUFF CLARKE COUNTY, GEORGIA
APRIL 11, 2026
MISSION STATEMENT
CLARKE COUNTY, GEORGIA
NOTARY PUBLIC

Dexter L. Fisher
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.		\$25,110.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		\$10,450.00
3a	All loans received this reporting period.		
3b	Interest earned on campaign account this reporting period.		
3c	Total amount of investments sold this reporting period.		
3d	Total amount of cash dividends and interest paid out this reporting period.		
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.	\$100.00	\$2465.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		\$12,915.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		\$38,025.00

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.		\$12,706.86
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		\$21,468.76
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	\$850.43	
11	Total expenditures reported this period. (Line 9 + 10)		\$22,319.16
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$35,026.02

INVESTMENTS

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

TOTAL NET BALANCE ON HAND			
15	Net balance on hand. (Line 6 - 12 + 14)		\$2998.98

* 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
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
First Name DGD Marketing	Date 6/12/2022	Occupation Employer	Mailers and Texting Services.	\$7629.00
Last Name				
Address PO Box 5761	<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 30604			
First Name CV House LLC	Date 6/13/2022	Occupation Employer	Video Services	\$2250.00
Last Name				
Address 550 Dearing Street Apt.29	<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				
State Ga.	Zip 30606			
First Name DGD Marketing	Date 6/21/2022	Occupation Employer	Consulting Services	\$2500.00
Last Name				
Address PO Box 5761	<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 30604			

\$12,379.00

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 DGD Marketing	Date	Occupation	Marketing Material	\$900.66 ✓
Last Name		Employer		
Address PO Box 5761	<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 Ga. 30804				
First Name WXAG	Date 6/15/2022 and 5/04/2022	Occupation	Radio Ads.	\$1000.00 ✓
Last Name		Employer		
Address 855 Sunset Drive Suite 16	<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 Ga. 30606				
First Name Joann	Date 5/14/2022	Occupation	<i>Reimbursement for CAR MAGNETS</i>	\$395.87 ✓
Last Name Echols		Employer		
Address 112 Wisteria Way	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2				
City Athens				
State Ga. Zip Ga. 30606				
First Name International Grill and Bar	Date 5/24/2022	Occupation	<i>CAMPAGN/Bar/</i> <i>Party</i>	\$1376.25 ✓
Last Name		Employer		
Address 1155 Mitchell Bridge Rd.	<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 Ga. 30605				

* 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 \$ 3672.78

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 Quintaevious	Date 6/21/2022	Occupation	Sign Holder	\$200.00
Last Name Clay				
Address 2901 Green Ln Unit 2932	<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 30606			
First Name Mikaya	Date 6/21/2022	Occupation	Sign Holder	\$113.00
Last Name Cooler				
Address 112 Wisteria 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		
Address2				
City Athens				
State Ga	Zip 30606			
First Name Social Sphere Media LLC	Date 6/6/2022	Occupation	Social Media Ad Campaign	\$2500.00
Last Name				
Address 1116 Brookstone Estates Dr.	<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 Loganville				
State Ga	Zip 30052			

Page Total \$ 2813.00

* 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

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 Audrey	Date 5/01/2022	Occupation	Campagin Materials	\$428.17
Last Name Fisher				
Address 125 Melbourne Drive	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Athens				
State Ga.	Zip 30606			
First Name Audrey	Date 5/27/2022	Occupation	T-Shirts for the Campagin	\$155.87
Last Name Fisher				
Address 125 Melbourne Drive	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Athens				
State Ga.	Zip 30606			
First Name Rashe's Cuisine	Date 5/23/2022	Occupation	Meet and Greet Garthering	\$516.40
Last Name				
Address 585 Vine Street, Suite 3	<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 30601			

1100.44

Page Total \$ 1100.44

* 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 Joann	Date 6/13/2022	Occupation	Reimbursement for paying Sign Holders	\$525.00
Last Name Echols		Employer		
Address 112 Wisteria Way	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2				
City Athens				
State Ga	Zip 30606			
First Name Tyreon	Date 6/21/2022	Occupation	Sign Holder	\$200.00
Last Name Millsap		Employer		
Address 135 Peachtree Lane	<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 30606			
First Name Masi	Date 6/23/2022	Occupation	Sign Holder	\$188.00
Last Name Mack		Employer		
Address 135 Peachtree Lane	<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 30606			
First Name Javaan	Date 6/23/2022	Occupation	Sign Holder	\$188.00
Last Name Mack		Employer		
Address 135 Peachtree Lane	<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				
City Athens				
State Ga	Zip 30606			

* 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 \$ 1101.00

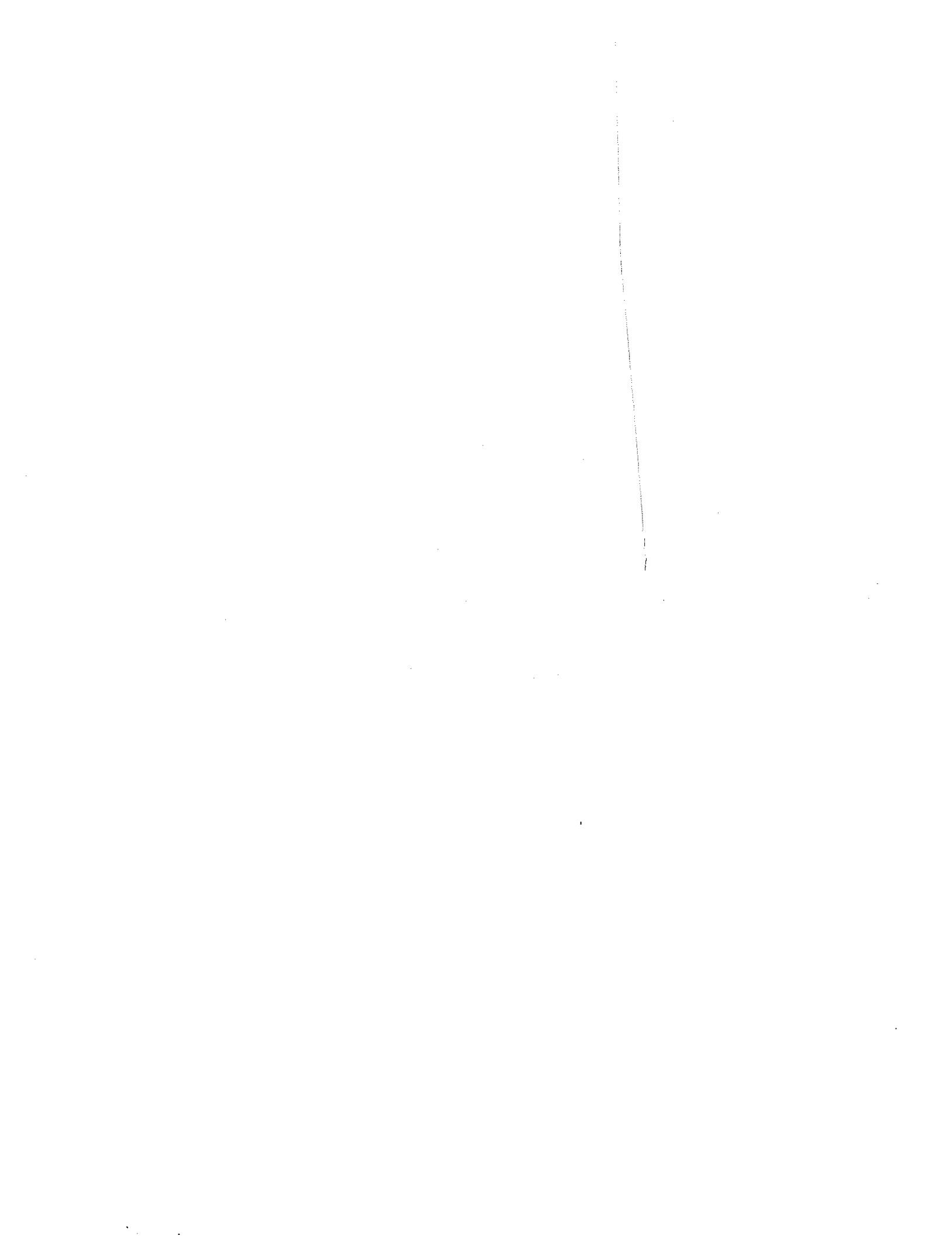
**State of Georgia
Gift Contribution Disclosure Report
Itemized Expenditures**

Must list expenditures 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 Department of Revenue	Date 3/25/2022	Occupation	Tax ID Number	\$279.00
Last Name		Employer		
Address 1800 Century Boulevard N	<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 Atlanta				
State Ga	Zip 30345			
First Name Joann	Date 3/28/2022	Occupation	Printing of Flyers	\$123.54
Last Name		Employer		
Address 112 Wisteria Way	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2				
City Athens				
State Ga	Zip 30606			
First Name	Date	Occupation		
Last Name		Employer		
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				
City Loganville				
State	Zip			

Page Total \$ 402.54

* 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



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) <i>See Attached</i>	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value
	Contribution Type*				Description
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.					
First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Last Name			<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
Address			<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 \$



Dexter Fisher
Champaign Contributions

NAME	ADDRESS	OCCUPATION	EMPLOYER	CONTRIBUTIONS
Joseph Douglas	432 River Bottom Circle, Athens, Ga. 30606	Retired		\$250.00
Dr. James & Lynn Brown	1081 Riverside Drive, Walkersville, Ga. 30877-5130	Physician & Educator	Private Practice	\$150.00
Jessica Bailey	995 Heards Ferry Road, Atlanta, Ga. 30328	Retired		\$250.00
Daryl Blountaw	2342 Autumn Maple Drive, Braselton, Ga. 30517	Senior Pastor	Ebenezer Baptist Church, West	\$250.00
Jason Leonard	318 E. Washington Street, Athens, Ga. 30606	Business Owner		\$200.00
Dwight Perry	768 Harvest Brook Drive, Lawrenceville, Ga. 30043	Business Consultant		\$200.00
Nancy Hart	150 Colonial Drive, Athens, Ga. 30606	Retired		\$200.00
Robert Locklin	910 James Huff Road, Monroe, Ga. 30556	Manager		\$200.00
Dexter Fisher	125 Melbourne Drive	Retired		\$300.00
Michael Buchholz	194 Holman Ave, Athens, Ga.	Retired		\$150.00
Wayne and Fran Dean	655 Kings Road, Athens, Ga.	Retired		\$200.00
Kathy Hoard	248 Springdale Street, Athens, Ga.	Retired		\$250.00
Vincent Hamby	375 West Rutherford Street, Athens, Ga. 30606	Business Owner		\$200.00
Edward Gardner	1129 Oak Grove Road, Athens, Ga. 30607	CEO Work Force Development	Boys & Girls Club	\$300.00
Committee to Elect John Culpepper	575 Fortson Road, Athens, Ga.	Business Owner		\$1,000.00
Richard Boone	430 Riverbottom Road, Athens, Ga.	Retired		\$500.00
April Hughes	11605 Jefferson Rd., Athens, Ga.	Business Owner		\$1,500.00
Steve Middlebrook	274 Moss Side Dr., Athens, Ga. 30607	Business Owner		\$1,000.00
Edwin Lowe	1130 Knob Creek Dr, Athens, Ga.	CPA		\$250.00
Walter Wiloughby	193 Ponderosa Drive, Athens, Ga.	Contractor		\$250.00
Robert Scott	1457 Ruth Jackson Rd, Bogart, Ga.	Business Owner		\$500.00
Alan Reddish	107 Indigo Ln, Athens, Ga.	Retired		\$500.00
Georgia Association of Realtors	6085 Barfield Road, Atlanta, Ga.		Athens Area Association of Realtors	\$1,500.00
Bob Carson	560 Hill Street, Athens, Ga. 30605	Business Owner	Carson Advisory Group	\$250.00
			Total Contributions over \$100.00	\$10,450.00

