

## 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](http://www.ethics.ga.gov)

<b>1. Report Type</b> (Select One)	<b>2. Filing is being made on behalf of (Select One):</b> Candidate or Public Official Office Held or Sought <u>ACC District 8 Commissioner</u> (include county, municipality, district, post or judicial seat)	Use Earlier of Post Mark or Hand-Delivered Date
<input checked="" type="checkbox"/> Original	Filer ID  (Filer ID that begins with the letter "C")	
<input type="checkbox"/> Amendment	Organization or Person Other than Candidate's Campaign Committee Committee Name: _____	
Amendment # _____	Filer ID: _____  (Filer ID that begins with the letter "NC")	APR 30 2024 PM 3:52

## 3. Identifying and Contact Information

(1) Sidney Waters (2) \_\_\_\_\_  
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) 6 S. Stratford Dr. Athens GA 30605  
Mailing Address City State Zip Code

(4) 706-207-2844 and/or mamasid620@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: Sidney Waters | James Waters  
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, <u>2024</u> (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)
<b>Supplemental Reporting</b>			
<input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)			

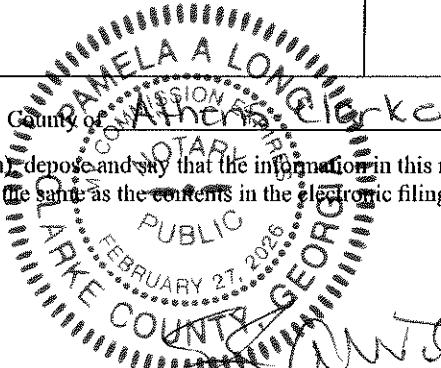
\*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34i

I, Sidney Waters, being duly sworn (affirm) to 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 April 30, 2024

Signature of Notary Public

2/26/27  
Commission Expiration



a. Signature of Candidate  
b. Organization/Chairperson/Treasurer

**State of Georgia**  
**Campaign Contribution Disclosure Report**  
**Summary Report**

**CONTRIBUTIONS RECEIVED**

		In-Kind Estimated Value	Cash Amount
1	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.		∅
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		\$3450 <sup>00</sup>
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.		\$530 <sup>00</sup>
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		\$3980 <sup>00</sup>
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		\$3980 <sup>00</sup>

**EXPENDITURES MADE**

7	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.		∅
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		\$2921 <sup>58</sup>
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		∅
11	Total expenditures reported this period. (Line 9 + 10)		\$2921 <sup>58</sup>
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$2921 <sup>58</sup>

**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)		\$1058 <sup>42</sup>
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\* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

**State of Georgia**  
**Campaign Contribution Disclosure Report**  
**Outstanding Indebtness**

Election Cycle*:		Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		∅
2	Loans received this reporting period.		∅
3	Deferred payment of expenses this reporting period		∅
4	Payments made on loans this reporting period.		∅
5	Credits received on loans this reporting period		∅
6	Payments this reporting period on previously deferred expenses.		∅
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		∅
Election Cycle*:		Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		
Election Cycle*:		Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		

\* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)  
 Public Officer/Candidate/Other Than Candidate Committee Name

**State of Georgia**  
**Campaign Contribution Disclosure Report**  
**Itemized Contributions**

Must list contributions received by a single contributor for which the aggregate total more than \$100.00.

Note: Loans are no longer reported in "Itemized Contributions" section. See Loan Reporting section below.

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value
	Contribution Type*				
First Name or Business Name  <i>Jamie Loftin</i>	Date  <i>4/7/2024</i>	Occupation  <i>Rest. Owner</i>	<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	<i>\$100.00</i>	Est. Value
Last Name  <i>Loftin</i>		Employer  <i>Loco's Grill</i>	<input type="checkbox"/> Run-Off Special Primary		Description
Address  <i>3605 Gaines School Rd Ste A</i>	Address2  <i>Ste A</i>				
City  <i>Athens</i>	City  <i>Athens</i>				
State  <i>GA</i>	Zip  <i>30605</i>				
Aff. Comm.					
First Name or Business Name  <i>Charles Worthy</i>	Date  <i>3/26/2024</i>	Occupation  <i>Retired</i>	<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	<i>\$500.00</i>	Est. Value
Last Name  <i>Worthy</i>		Employer	<input type="checkbox"/> Run-Off Special Primary		Description
Address  <i>120 Melbourne Dr</i>	Address2  <i>120 Melbourne Dr</i>				
City  <i>Athens</i>	City  <i>Athens</i>				
State  <i>GA</i>	Zip  <i>30606</i>				
Aff. Comm.					
First Name or Business Name  <i>John Gurley</i>	Date  <i>3/26/2024</i>	Occupation  <i>Retired</i>	<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	<i>\$300.00</i>	Est. Value
Last Name  <i>Gurley</i>		Employer			Description
Address  <i>140 W Huntington Rd</i>	Address2  <i>140 W Huntington Rd</i>				
City  <i>Bogart</i>	City  <i>Bogart</i>				
State  <i>GA</i>	Zip  <i>30622</i>				
Aff. Comm.					

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First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Michael			\$250 <sup>00</sup>	
McClelland				
Address				
201-9 Hamilton Rd	4/15/2024	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
WA & SA			\$200 <sup>00</sup>	
Last Name				
Jarrett				
Address				
145 Middleton Pl	4/19/2024	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Gordon			\$100 <sup>00</sup>	
Last Name				
Rhoden				
Address				
340 Heather Cove	4/10/2024	Ins/Fin. Plan.		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Joan			\$100 <sup>00</sup>	
Last Name				
Rhoden				
Address				
340 Heather Cove	4/10/2024	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				

Itemized Contributions Page Total \$7050<sup>00</sup> \$3450<sup>00</sup> 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

CFC-CCDR 10/19

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Cesar			\$100 <sup>00</sup>	
Last Name				
Toledo				
Address				
185 Greencrest Dr	3/26/2024	Technology		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	Zip 30605	<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Thomas			\$100 <sup>00</sup>	
Last Name				
Chasteen				
Address				
395 Tidywood Dr	3/26/2024	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	Zip 30605	<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
David			\$100 <sup>00</sup>	
Last Name				
Kee				
Address				
39 N Stratford Dr	3/26/2024	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	Zip 30605	<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Ashley			\$100 <sup>00</sup>	
Last Name				
Rentz				
Address				
124 Falling Shallows Dr	3/26/2024	Program Coord		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	Zip 30605	<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.				

Itemized Contributions Page Total \$400<sup>00</sup> \$3450<sup>00</sup>

\* 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

total

CFC-CCDR 10/19

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Bill Crane	3/21/2024	Consultant	\$100 <sup>00</sup>	
Address		Employer		Description
Address2	<input checked="" type="checkbox"/> Monetary			
City	<input type="checkbox"/> In-Kind			
State	<input type="checkbox"/> Common Source			
Zip	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.		CSI Crane		
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Jeffery Jowdy	3/28/2024	Retired	\$100 <sup>00</sup>	
Address		Employer		Description
Address2	<input checked="" type="checkbox"/> Monetary			
City	<input type="checkbox"/> In-Kind			
State	<input type="checkbox"/> Common Source			
Zip	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Dan McKenzie	4/7/2024	Retired	\$100 <sup>00</sup>	
Address		Employer		Description
Address2	<input checked="" type="checkbox"/> Monetary			
City	<input type="checkbox"/> In-Kind			
State	<input type="checkbox"/> Common Source			
Zip	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Deborah Boyles	4/8/2024	Retired	\$100 <sup>00</sup>	
Address		Employer		Description
Address2	<input checked="" type="checkbox"/> Monetary			
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 \$ 400<sup>00</sup> \$ 3450<sup>00</sup>  
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

CFC-CCDR 10/19

First Name or Business Name Gloria	Date 4/10/2024	Occupation Retired	Cash Amt. \$100 <sup>00</sup>	Est. Value
Last Name Pylant				
Address 333 Ashbrook Ln		Employer		Description
Address2	<input checked="" type="checkbox"/> Monetary			
City Athens	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30605	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name Sander	Date 4/10/2024	Occupation Retired	Cash Amt. \$100 <sup>00</sup>	Est. Value
Last Name Heilig		Employer		Description
Address 320 Caldwell Cir				
Address2	<input checked="" type="checkbox"/> Monetary			
City Athens	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30605	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Last Name				
Address				Description
Address2	<input type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State	<input type="checkbox"/> Common Source			
Zip	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Last Name				
Address				Description
Address2	<input type="checkbox"/> Monetary	Employer		
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 \$4200<sup>00</sup> \$43450<sup>00</sup>

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

## 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

NA -  
No Loans

Sidney Waters Page 1 of 1

**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 <i>ACC Board of</i>	Date	Occupation		
Last Name <i>Elections</i>	<i>3/7/2024</i>			<i>\$867.00</i>
Address <i>155 E Washington St</i>	<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 <i>Athens</i>				
State <i>GA</i>	Zip <i>30601</i>			
First Name <i>Hi Tech Signs</i>	Date	Occupation		
Last Name	<i>3/22/2024</i>			<i>\$1278.45</i>
Address <i>1018 N 5th Ave</i>	<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 <i>Rome</i>				
State <i>GA</i>	Zip <i>30165</i>			
First Name <i>Vista Print</i>	Date	Occupation		
Last Name	<i>3/22/2024</i>			<i>\$458.83</i>
Address	<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				
State	Zip			
				<i>Business Cards</i>

Page Total \$ *42204.48*

\* 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 <i>Squarespace</i>	Date <i>3/21/2024</i>	Occupation		\$12 <sup>00</sup>
Last Name				
Address	<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	Employer		
Address2				
City				
State	Zip	<input type="checkbox"/> Investment		
First Name <i>Wix.com</i>	Date <i>3/21/2024</i>	Occupation		\$24 <sup>00</sup>
Last Name				
Address	<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	Employer		
Address2				
City				
State	Zip	<input type="checkbox"/> Investment		
First Name <i>Wix.com</i>	Date <i>3/21/2024</i>	Occupation		\$36 <sup>00</sup>
Last Name				
Address	<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	Employer		
Address2				
City				
State	Zip	<input type="checkbox"/> Investment		
First Name <i>UPS STORE #3862</i>	Date <i>3/28/2024</i>	Occupation		\$361 <sup>90</sup>
Last Name				
Address	<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	Employer		
Address2 <i>1720 Epps Bridge PKWY</i>				
City <i>Ste 10B</i>				
Athens				
State <i>GA</i>	Zip <i>30601</i>	<input type="checkbox"/> Investment		
Door Hangers				

\* 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 \$ *423.90*

CFC-CCDR 10/19

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>Wix.com</i>	Last Name	Date <i>4/22/2024</i>	Occupation		<i>\$24.00</i>
Address		<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					
State	Zip				
First Name <i>UPS STORE #3862</i>	Last Name	Date <i>4/10/2024</i>	Occupation		<i>\$259.20</i>
Address <i>1720 Epps Bridge Pkwy</i>	Address2 <i>Ste 108</i>	<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		
City <i>Athens</i>					
State <i>GA</i>	Zip <i>30606</i>				
First Name	Last Name	Date	Occupation		
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	Last Name	Date	Occupation		
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 \$ *4283.20*

Sidney Waters Page 3 of 3

**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: \$ _____			

*NO Investments*

**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.

All expenses were  
listed on the  
Expense Report.