

## Campaign Contribution Disclosure Report

## Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1402 West Tower | Atlanta, GA 30334 | 404-463-1980 | www.ethics.ga.gov

<b>1. Report Type</b> (Select One)  <input checked="" type="checkbox"/> Original  <input type="checkbox"/> Amendment  Amendment # _____	<b>2. Filing is being made on behalf of (Select One):</b> <b>Candidate or Public Official</b> Office Held or Sought <u>Atlanta City Council Member Post 2 At Large</u> <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID <u>C2017000002</u> <small>(Filer ID that begins with the letter "C")</small> <b>Organization or Person Other than Candidate's Campaign Committee</b> Committee Name: <u>Cory Ruth</u> Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>
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**3. Identifying and Contact Information**

(1) <u>Cory Ruth</u>	(2) <u>7/9/2017</u>
<i>Full Name of Candidate or Other Than Candidate Campaign Committee</i>	<i>Today's Date</i>
(3) <u>Atlanta</u>	<u>GA</u>
<i>Mailing Address</i>	<i>State</i>
<u>30326</u>	<u>30326</u>
<i>City</i>	<i>Zip Code</i>
(4) _____ and/ or _____	
<i>Primary Contact Phone Number</i>	<i>E-Mail</i>
(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>Cory Ruth</u>	<u>Daraka Satcher</u>
<i>Name of Committee Chairperson</i>	<i>Name of Committee Treasurer</i>

**4. Period for which you are Reporting****You Must Check Only One Box**

My Non Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Election
<input type="checkbox"/> January 31, 2017 (year)	<input type="checkbox"/> January 31, 2017 (year)	<input type="checkbox"/> 6 days before Primary Run-Off 2017 (year)	<input type="checkbox"/> 15 days before Special Primary, 2017 (year)
<input type="checkbox"/> June 30, 2017 (year)	<input type="checkbox"/> March 31, 2017 (year)	<input type="checkbox"/> 6 days before General Run-Off 2017 (year)	<input type="checkbox"/> 15 days before Special, 2017 (year)
<b>Supplemental Reporting</b>	<input checked="" type="checkbox"/> June 30, 2017 (year)	<input type="checkbox"/> 6 days before Special Primary Run-Off 2017 (year)	<input type="checkbox"/> Dec. 31, 2017 (year)
<input type="checkbox"/> June 30, 2017 (year)	<input type="checkbox"/> September 30, 2017 (year)	<input type="checkbox"/> 6 days before Special Run-Off 2017 (year)	
<input type="checkbox"/> December 31, 2017 (year)	<input type="checkbox"/> October 25, 2017 (year)		
<small>*Persons leaving office with excess funds until such funds are expended as provided in the Act *Unsuccessful candidates with excess funds, or who receive contributions to retire debt incurred, until such funds are expended, or such unpaid debts are satisfied (December 31 filing only)</small>	<input type="checkbox"/> Dec. 31, 2017 (year)		

State of Georgia

County of \_\_\_\_\_

I, Cory Ruth, 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.

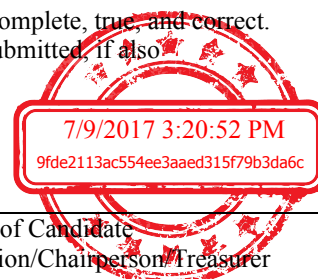
Sworn to and subscribed before me on \_\_\_\_\_, \_\_\_\_\_

Signature of Notary Public

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	\$40,046.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$12,910.00
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.	\$0.00	\$695.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$0.00	\$13,605.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$0.00	\$53,651.00

**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	\$34,214.20
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$14,039.85
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	\$0.00	\$262.21
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$14,302.16
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$48,516.36

**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)	\$0.00	\$5,134.64
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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*: <u>General</u> Election Year: <u>2017</u>		<b><u>Amount</u></b>
1	Outstanding indebtedness at the beginning of this reporting period.	\$7,963.00
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)	\$7,963.00

\* 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*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name <b>United Distributors Inc</b>	Date  4/12/2017	Occupation	<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	Cash Amt. \$2,600.00	Est. Value	
Last Name				\$0.00		
Address 5500 Unted Drive						
Address 2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	<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		Description	
City Smyrna						
State GA						Zip 30082
Aff. Comm.						
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 <b>Samuel</b>	Date  4/12/2017	Occupation	<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	Cash Amt. \$300.00	Est. Value	
Last Name <b>Gude III</b>				\$0.00		
Address 345 Regency Crest Court						
Address 2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	<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		Description	
City Atlanta						
State GA						Zip 30331
Aff. Comm.						

Itemized Contributions Page Total

\$2,900.00

\$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

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 Egbert	Date  4/12/2017	Occupation  CEO	<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	Cash Amt. \$500.00	Est. Value	
Last Name Perry				\$0.00		
Address 541 Centennial Lane NW						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  The Integral Group	<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		Description	
City Atlanta						
State GA						Zip 30313
Aff. Comm.						
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 Matthew	Date  4/12/2017	Occupation  President	<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	Cash Amt. \$800.00	Est. Value	
Last Name Samuelson				\$0.00		
Address 150 Peachtree Battle Ave NW						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  Gude Management	<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		Description	
City Atlanta						
State GA						Zip 30303
Aff. Comm.						

Itemized Contributions Page Total

\$1,300.00

\$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

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 <b>Richard</b>	Date  4/12/2017	Occupation  Attorney	<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	Cash Amt. \$200.00	Est. Value	
Last Name <b>Russell</b>				Description		
Address 295 W Wesley Rd NW					\$0.00	
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  King & Spalding	<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		Description	
City Atlanta						
State GA						Zip 30305
Aff. Comm.						
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 <b>Kevin</b>	Date  4/12/2017	Occupation  Senior Manager	<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	Cash Amt. \$300.00	Est. Value	
Last Name <b>Simmons</b>				Description		
Address 614 McGruder St.					\$0.00	
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  Deloitte Consulting	<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		Description	
City Atlanta						
State GA						Zip 30312
Aff. Comm.						

Itemized Contributions Page Total

\$500.00

\$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

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 Michael	Date  4/12/2017	Occupation  President & CEO	<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	Cash Amt. \$1,000.00	Est. Value	
Last Name Leven				\$0.00		
Address 7295 Ballantrae Ct						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  The Georgia Aquarium	<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		Description	
City Boca Raton						
State FL						Zip 33496
Aff. Comm.						
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 Ed	Date  5/3/2017	Occupation  Partner	<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	Cash Amt. \$500.00	Est. Value	
Last Name Lindsey				\$0.00		
Address 1150 Angelo CT						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  Dentons	<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		Description	
City Atlanta						
State GA						Zip 30319
Aff. Comm.						

Itemized Contributions Page Total

\$1,500.00

\$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

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 Jackson Healthcare	Date  5/15/2017	Occupation	<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	Cash Amt. \$1,000.00	Est. Value	
Last Name				\$0.00		
Address 2655 Northwinds Parkway						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<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		Description	
City Alpharetta						
State GA						Zip 30004
Aff. Comm.						
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 Levell for a Better America	Date  5/15/2017	Occupation	<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	Cash Amt. \$150.00	Est. Value	
Last Name				\$0.00		
Address 4780 Ashford Dunwoody Rd Ste 600						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<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		Description	
City Atlanta						
State GA						Zip 30326
Aff. Comm.						

Itemized Contributions Page Total

\$1,150.00

\$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



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 Christopher	Date  5/17/2017	Occupation  Student	<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	Cash Amt. \$40.00	Est. Value		
Last Name Ruth					\$0.00		
Address 474 N. Coral Canyon Loop, Apt 229					Description		
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  University of Arkansas					
City Fayetteville							
State AR							
Zip 72704							
Aff. Comm.							
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 Ed	Date  6/1/2017	Occupation  Partner	<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	Cash Amt. \$500.00	Est. Value		
Last Name Lindsey					\$0.00		
Address 1150 Angelo CT					Description		
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  Dentons					
City Atlanta							
State GA							
Zip 30319							
Aff. Comm.							

Itemized Contributions Page Total

\$540.00

\$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

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 Mark	Date	Occupation	<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	Cash Amt. \$2,600.00	Est. Value
Last Name Hennessy	6/5/2017	President			\$0.00
Address 4272 Garmon Road					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta	<input type="checkbox"/> In-Kind	Hennessy Automobile Companies			
State GA	<input type="checkbox"/> Common Source				
Zip 30327	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
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 James	Date	Occupation	<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	Cash Amt. \$125.00	Est. Value
Last Name Hanna	6/29/2017	Real Estate			\$0.00
Address 487 Chateaugay Lane					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta	<input type="checkbox"/> In-Kind	TPA Group			
State GA	<input type="checkbox"/> Common Source				
Zip 30342	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total

\$2,725.00

\$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

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 Christopher	Date  6/26/2017	Occupation  Student	<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	Cash Amt. \$20.00	Est. Value			
Last Name Ruth					\$0.00			
Address 474 N. Coral Canyon Loop, Apt 229					Description			
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  University of Arkansas						
City Fayetteville								
State AR								
Zip 72704								
Aff. Comm.								
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 Deborah	Date  6/26/2017	Occupation  State Representative	<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	Cash Amt. \$150.00	Est. Value			
Last Name Silcox					\$0.00			
Address 725 Tanglewood Trail NW					Description			
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  Georgia General Assembly						
City Atlanta								
State GA								
Zip 30327								
Aff. Comm.								

Itemized Contributions Page Total

\$170.00

\$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

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 Sugarbrand LLC	Date  6/26/2017	Occupation	<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	Cash Amt. \$1,000.00	Est. Value	
Last Name				\$0.00		
Address 1960 Satellite Blvd, Ste 1300						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<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		Description	
City Duluth						
State GA						Zip 30097
Aff. Comm.						
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 James	Date  6/12/2017	Occupation  Real Estate	<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	Cash Amt. \$125.00	Est. Value	
Last Name Hanna				\$0.00		
Address 487 Chateaugay Lane						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<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		Description	
City Atlanta						
State GA						Zip 30342
Aff. Comm.						

Itemized Contributions Page Total

\$1,125.00

\$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
Address 2			Address 2	
City			City	
State	Zip		State	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total		\$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

**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	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid	
First Name Raise the Money	Date 6/30/2017	Occupation	Online Contribution Processing	\$141.27	
Last Name					
Address P.O. Box 26466	<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			
Address 2					
City Little Rock					
State AR			Zip 72221		
First Name Patriot Public Affairs	Date 4/24/2017	Occupation	C	\$1,000.00	
Last Name					
Address 1000 Melody 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	Employer			
Address 2					
City Roswell					
State GA			Zip 30075		
First Name ROAM Atlanta	Date 4/14/2017	Occupation	Office Expense	\$50.00	
Last Name					
Address 3365 Piedmont Rd NE #1400	<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			
Address 2					
City Atlanta					
State GA			Zip 30305		

Page Total \$1,191.27

\* 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

First Name AIA Atlanta		Date 4/7/2017	Occupation	Event Fee	\$105.00
Last Name					
Address 100 Edgewood Avenue NE, Suite 175		<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		
Address 2					
City Atlanta					
State GA	Zip 30303				
First Name Paschal's Restaurant		Date 4/28/2017	Occupation	Restaurant	\$394.43
Last Name					
Address 180 Northside Dr SW #B		<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		
Address 2					
City Atlanta					
State GA	Zip 30313				
First Name Diversified Resolutions, Inc		Date 7/9/2017	Occupation	Consulting Expense	\$1,250.00
Last Name					
Address 1718 Fairburn Road, SW		<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		
Address 2					
City Atlanta					
State GA	Zip 30331				
Page Total					\$1,749.43

\* 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

First Name <b>Patriot Public Affairs</b>		Date <b>4/3/2017</b>	Occupation	Consulting Expense	\$1,290.00
Last Name					
Address <b>1000 Melody Lane</b>		<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		
Address 2					
City <b>Roswell</b>					
State <b>GA</b>	Zip <b>30075</b>				
First Name <b>Satcher Strategic Analysis Group</b>		Date <b>4/5/2017</b>	Occupation	Consulting Expense	\$1,750.00
Last Name					
Address <b>4279 Roswell Rd NE</b>		<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		
Address 2					
City <b>Atlanta</b>					
State <b>GA</b>	Zip <b>30342</b>				
First Name <b>Stoneridge Group</b>		Date <b>5/1/2017</b>	Occupation	Marketing	\$39.90
Last Name <b>4400 North Point Parkway</b>					
Address <b>4400 North Point Parkway</b>		<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		
Address 2					
City <b>Alpharetta</b>					
State <b>GA</b>	Zip <b>30022</b>				

Page Total \$3,079.90

\* 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



First Name Fulton Co. Republican Party		Date 5/17/2017	Occupation	Event Fee	\$105.00
Last Name					
Address 5920 Roswell Road #A208		<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		
Address 2					
City Sandy Springs					
State GA	Zip 30328				
First Name Stoneridge Group		Date 5/19/2017	Occupation	Marketing	\$39.90
Last Name					
Address 4400 North Point Parkway		<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		
Address 2					
City Alpharetta					
State GA	Zip 30022				
First Name ROAM Atlanta		Date 5/22/2017	Occupation	Office Expense	\$50.00
Last Name					
Address 3365 Piedmont Rd NE #1400		<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		
Address 2					
City Atlanta					
State GA	Zip 30305				

Page Total \$194.90

\* 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

First Name <b>ROAM Atlanta</b>		Date <b>5/30/2017</b>	Occupation	Office Expense	\$102.17
Last Name					
Address <b>3365 Piedmont Rd NE #1400</b>		<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		
Address 2					
City <b>Atlanta</b>					
State <b>GA</b>	Zip <b>30305</b>				
First Name <b>Diversified Resolutions, Inc</b>		Date <b>5/8/2017</b>	Occupation	Consulting Expense	\$1,250.00
Last Name					
Address <b>1718 Fairburn Road, SW</b>		<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		
Address 2					
City <b>Atlanta</b>					
State <b>GA</b>	Zip <b>30331</b>				
First Name <b>Patriot Public Affairs</b>		Date <b>5/4/2017</b>	Occupation	Consulting Expense	\$1,080.00
Last Name					
Address <b>1000 Melody Lane</b>		<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		
Address 2					
City <b>Roswell</b>					
State <b>GA</b>	Zip <b>30075</b>				

Page Total \$2,432.17

\* 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

First Name Satcher Strategic Analysis Group		Date 5/8/2017	Occupation	Consulting Expense	\$1,750.00
Last Name					
Address 4279 Roswell Rd NE		<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		
Address 2					
City Atlanta					
State GA	Zip 30342				
First Name Patriot Public Affairs		Date 5/26/2017	Occupation	Consulting Expense	\$600.00
Last Name					
Address 1000 Melody 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	Employer		
Address 2					
City Roswell					
State GA	Zip 30075				
First Name Chism Strategies		Date 5/12/2017	Occupation	Consulting Expense	\$1,000.00
Last Name					
Address 2906 N. State Street; Suite 106		<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		
Address 2					
City Jackson					
State MS	Zip 39216				
Page Total					\$3,350.00

\* 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

First Name ROAM Atlanta		Date 6/2/2017	Occupation	Office Expense	\$202.38
Last Name					
Address 3365 Piedmont Rd NE #1400		<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		
Address 2					
City Atlanta					
State GA	Zip 30305				
First Name Stoneridge Group		Date 6/19/2017	Occupation	Marketing	\$39.90
Last Name					
Address 4400 North Point Parkway		<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		
Address 2					
City Alpharetta					
State GA	Zip 30022				
First Name ROAM Atlanta		Date 6/23/2017	Occupation	Office Expense	\$50.00
Last Name					
Address 3365 Piedmont Rd NE #1400		<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		
Address 2					
City Atlanta					
State GA	Zip 30305				
Page Total					\$292.28

\* 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

First Name Satcher Strategic Analysis Group		Date 6/1/2017	Occupation	Consulting Expense	\$1,750.00
Last Name					
Address 4279 Roswell Rd NE		<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		
Address 2					
City Atlanta					
State GA	Zip 30342				

Page Total \$1,750.00

\* 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**  
**Investments Statement**

1. Investment Name		Account #			
Institution/Person Holding Account _____  Mailing Address _____  Address2 _____  <div style="display: flex; justify-content: space-between;"> <span>City _____</span> <span>State _____</span> <span>Zip _____</span> </div>		Value at beginning of reporting period \$			
		Value at end of reporting period \$			
		Difference in value \$			
		Interest Paid Out \$			
		Cash Dividends \$			
Investment Transactions					
<u>Date</u>	<u>Person(s) Involved in Transaction</u>	<u>Value of investment purchased</u>	<u>Value of investment sold</u>	<u>Profit</u>	<u>Loss</u>
<u>Total value of investments at beginning of reporting period</u>			<b>\$0.00</b>	Page Total Cash Dividends: <b><u>\$0.00</u></b>	
<u>Total value of investments at end of reporting period</u>			<b>\$0.00</b>	Page Total Interest Paid Out: <b><u>\$0.00</u></b>	
<u>Total difference in value</u>			<b>\$0.00</b>	Page Total Profit: <b><u>\$0.00</u></b>	
				Page Total Loss: <b><u>\$0.00</u></b>	

**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.