

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

<p><b>1. Report Type</b> (Select One)</p> <p><input checked="" type="checkbox"/> Original</p> <p><input type="checkbox"/> Amendment</p> <p>Amendment # _____</p>	<p><b>2. Filing is being made on behalf of (Select One):</b></p> <p><b>Candidate or Public Official</b></p> <p>Office Held or Sought <u>Atlanta City Council President</u> <small>(Include county, municipality, district, post or judicial circuit)</small></p> <p>Filer ID _____ <small>(Filer ID that begins with the letter "C")</small></p> <p><b>Organization or Person Other than Candidate's Campaign Committee</b></p> <p>Committee Name: <u>Clarence Martin</u></p> <p>Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small></p>
--	---

**3. Identifying and Contact Information**

(1) Clarence Martin (2) 10/6/2017  
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) Atlanta GA 30311  
Mailing Address City State Zip Code

(4) \_\_\_\_\_ and/ or \_\_\_\_\_  
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: Clarence Martin \_\_\_\_\_  
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 <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"/> June 30, 2017 (year)	<input type="checkbox"/> January 31, 2017 (year) <input type="checkbox"/> March 31, 2017 (year) <input type="checkbox"/> June 30, 2017 (year) <input checked="" type="checkbox"/> September 30, 2017 (year) <input type="checkbox"/> October 25, 2017 (year) <input type="checkbox"/> Dec. 31, 2017 (year)	<input type="checkbox"/> 6 days before Primary Run-Off 2017 (year) <input type="checkbox"/> 6 days before General Run-Off 2017 (year) <input type="checkbox"/> 6 days before Special Primary Run-Off 2017 (year) <input type="checkbox"/> 6 days before Special Run-Off 2017 (year)	<input type="checkbox"/> 15 days before Special Primary, 2017 (year) <input type="checkbox"/> 15 days before Special, 2017 (year) <input type="checkbox"/> Dec. 31, 2017 (year)

**Supplemental Reporting**

June 30, 2017 (year)  
 December 31, 2017 (year)

\*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)

State of Georgia County of \_\_\_\_\_

I, Clarence Martin, 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 checked="" type="checkbox"/> I have no contributions to report. <input type="checkbox"/> I have the following contributions, including Common Source, to report:	<b>In-Kind Estimated Value</b>	<b>Cash Amount</b>
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	\$211,131.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$27,577.00
3a	All loans received this reporting period.		\$5,000.00
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	\$0.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$0.00	\$32,577.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$0.00	\$243,708.00

**EXPENDITURES MADE**

7	<input checked="" type="checkbox"/> I have no expenditures to report. <input type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	\$0.00	\$33,122.32
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$93,270.71
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	\$0.00
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$93,270.71
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$126,393.03

**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	\$115,715.57
----	--	--------	--------------

\* 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: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period.	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period.	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	

\* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)

Public Officer/Candidate/Other Than Candidate Committee Name

## State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

Must list contributions received by a single contributor for which the aggregate total more than \$100.00.  
Note: Loans are no longer reported in "Itemized Contributions" section. See Loan Reporting section below.

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions				
	Received Date Contribution Type*	Occupation & Employer			Estimated Value				
					Description				
First Name or Business Name Carroll	Date 9/8/2017	Occupation Founder & Chief Executive Officer	<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 <input type="checkbox"/> Primary	Cash Amt. \$1,000.00	Est. Value \$0.00				
Last Name Braddy									
Address 7265 Mount Zion Blvd.									
Address 2				<input checked="" type="checkbox"/> Monetary	Employer  Braddy Preparatory Academy	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Primary		Description	
City Jonesboro				<input type="checkbox"/> In-Kind					
State GA				Zip 30236-2519					<input type="checkbox"/> Common Source
Aff. Comm.				<input type="checkbox"/> Credit Received on Loan					
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 G. Prime Real Estate Group, LLC	Date 7/8/2017	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 <input type="checkbox"/> Primary	Cash Amt. \$500.00	Est. Value \$0.00				
Last Name									
Address 456 Bartram Street, SE									
Address 2				<input checked="" type="checkbox"/> Monetary	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 <input type="checkbox"/> Primary		Description	
City Atlanta				<input type="checkbox"/> In-Kind					
State GA				Zip 30316					<input type="checkbox"/> Common Source
Aff. Comm.				<input type="checkbox"/> Credit Received on Loan					

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 Major Benjamin	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. \$150.00	Est. Value			
Last Name Barksdale	9/4/2017	Retired			\$0.00			
Address 2822 Chaucer Drive	<input checked="" type="checkbox"/> Monetary	Employer						
Address 2								
City Atlanta	<input type="checkbox"/> In-Kind	State of Georgia						
State GA	<input type="checkbox"/> Common Source							
Zip 30311	<input type="checkbox"/> Credit Received on Loan							
Aff. Comm.								
Description								
Description								
Description								

  

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 William	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. \$100.00	Est. Value			
Last Name Boddie	9/14/2017	State Representative			\$0.00			
Address 3755 Redwine Road Apt. 10324	<input checked="" type="checkbox"/> Monetary	Employer						
Address 2								
City East Point	<input type="checkbox"/> In-Kind	State of Georgia						
State GA	<input type="checkbox"/> Common Source							
Zip 30344-5973	<input type="checkbox"/> Credit Received on Loan							
Aff. Comm.								
Description								
Description								
Description								

Itemized Contributions Page Total \$250.00 \$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)  
 \*\* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)  
 \*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

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>Brenda</b>	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. \$100.00	Est. Value		
Last Name <b>James</b>	7/19/2017	Retired			\$0.00		
Address 135 Stillbrook Way							
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			<input type="checkbox"/> Run-Off Primary	Description	
City Fayetteville	<input type="checkbox"/> In-Kind				<input type="checkbox"/> Run-Off General		
State GA	Zip 30314-5358				<input type="checkbox"/> Common Source		<input type="checkbox"/> Run-Off Special
Aff. Comm.					<input type="checkbox"/> Credit Received on Loan		<input type="checkbox"/> Run-Off Special Primary
Full Name of Contributor Mailing Address (Affiliation of Committee if any)					Contributor		Election Cycle**
		Received Date Contribution Type*	Occupation & Employer		Estimated Value		
				Description			
First Name or Business Name <b>John</b>	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. \$100.00	Est. Value		
Last Name <b>Robinson</b>	7/11/2017	Retired			\$0.00		
Address 3885 Knotts Pass Road							
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			<input type="checkbox"/> Run-Off Primary	Description	
City Snellville	<input type="checkbox"/> In-Kind				<input type="checkbox"/> Run-Off General		
State GA	Zip 30039				<input type="checkbox"/> Common Source		<input type="checkbox"/> Run-Off Special
Aff. Comm.					<input type="checkbox"/> Credit Received on Loan		<input type="checkbox"/> Run-Off Special Primary

Itemized Contributions Page Total \$200.00 \$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 Thelma	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. \$100.00	Est. Value	
Last Name Glover	9/25/2017	Retired			\$0.00	
Address P.O. Box						
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			<input type="checkbox"/> Run-Off Primary	Description
City Atlanta	<input type="checkbox"/> In-Kind				<input type="checkbox"/> Run-Off General	
State GA	Zip 30311	<input type="checkbox"/> Common Source			<input type="checkbox"/> Run-Off Special	
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan	<input type="checkbox"/> Run-Off Special Primary				
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 Arnett	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. \$100.00	Est. Value	
Last Name Mumford	9/24/2017	Attorney			\$0.00	
Address 950 Forest Overlook Dr, SW						
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			<input type="checkbox"/> Run-Off Primary	Description
City Atlanta	<input type="checkbox"/> In-Kind				<input type="checkbox"/> Run-Off General	
State GA	Zip 30331	<input type="checkbox"/> Common Source			<input type="checkbox"/> Run-Off Special	
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan	The Molden Firm			<input type="checkbox"/> Run-Off Special Primary	

Itemized Contributions Page Total \$200.00 \$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>John</b>	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 <b>Stephens</b>	8/15/2017	CEO		\$2,600.00	\$0.00	
Address 5173 Pelican Drive						
Address 2	<input checked="" type="checkbox"/> Monetary	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 College Park	<input type="checkbox"/> In-Kind	Stephens Industries, LP				
State GA	Zip 30349					<input type="checkbox"/> Common Source
Aff. Comm.						<input type="checkbox"/> Credit Received on Loan
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>Carol</b>	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. \$1,600.00	Est. Value	
Last Name <b>Hojeij</b>	9/27/2017			\$1,600.00	\$0.00	
Address 305 Westbourne Drive						
Address 2	<input checked="" type="checkbox"/> Monetary	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 Tyrone	<input type="checkbox"/> In-Kind	Hojeij Branded Food				
State GA	Zip 3029					<input type="checkbox"/> Common Source
Aff. Comm.						<input type="checkbox"/> Credit Received on Loan

Itemized Contributions Page Total                      \$4,200.00                      \$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 McAfee 3 Architects	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. \$250.00	Est. Value	
Last Name	7/12/2017				\$0.00	
Address 121 M. L. King Jr. Drive, SW Suite 301						
Address 2	<input checked="" type="checkbox"/> Monetary	Employer				Description
City Atlanta	<input type="checkbox"/> In-Kind					
State GA	<input type="checkbox"/> Common Source					
Zip 30303	<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 Larry	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. \$100.00	Est. Value	
Last Name Martin	7/23/2017				\$0.00	
Address 2503 Ozark Trl, SW						
Address 2	<input checked="" type="checkbox"/> Monetary	Employer				Description
City Atlanta	<input type="checkbox"/> In-Kind					
State GA	<input type="checkbox"/> Common Source					
Zip 30031-7029	<input type="checkbox"/> Credit Received on Loan					
Aff. Comm.						

Itemized Contributions Page Total \$350.00 \$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 AECOM Technology Corporation	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 \$0.00
Last Name	7/12/2017				
Address 1360 Peachtree St NE #500					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30309	<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 Holland Management LLC	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. \$500.00	Est. Value \$0.00
Last Name	9/20/2017				
Address 4119 Hillhouse Road, SW					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Smyrna	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30082-3545	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total \$3,100.00 \$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 755 Restaurant Corp.	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. \$500.00	Est. Value \$0.00
Last Name	8/16/2017				
Address 3466 Buffington Center					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30349	<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 Victor	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. \$1,000.00	Est. Value \$0.00
Last Name Haydel	8/16/2017	President			
Address 3441 Rugby Circle					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City College Park	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source	755 Restaurant Corp			
Zip 30337	<input type="checkbox"/> Credit Received on Loan				
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 B & L Wrecker Service Inc	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. \$1,500.00	Est. Value \$0.00
Last Name	8/16/2017				
Address 150 Milton Avenue, SE					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind				
State GA	Zip 30315				
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				
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 Zelma	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. \$100.00	Est. Value \$0.00
Last Name Payne	7/15/2017	Retired			
Address 938 Redbud Lane, SW					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind				
State GA	Zip 30311				
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				

Itemized Contributions Page Total                      \$1,600.00                      \$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>Arthur</b>	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 <b>Blank</b>	9/28/2017	Owner & Chairman		\$2,600.00	\$0.00
Address 3223 Howell Mill Road, NW					
Address 2	<input checked="" type="checkbox"/> Monetary	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	<input type="checkbox"/> In-Kind	Atlanta Falcons			
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 <b>Benjamin</b>	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. \$25.00	Est. Value
Last Name <b>Dickerson</b>	8/12/2017	Retired		\$25.00	\$0.00
Address 1733 Detroit Court, NW					
Address 2	<input checked="" type="checkbox"/> Monetary	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	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30314	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total                      \$2,625.00                      \$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 Pyper	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. \$1,000.00	Est. Value \$0.00
Last Name Johnson	8/12/2017				
Address 5308 Sweetsprings Ln SW					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Power Springs, GA 30127	<input type="checkbox"/> In-Kind				Description
State GA	Zip 30127-8401				
Aff. Comm.	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				
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 Donald	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. \$100.00	Est. Value \$0.00
Last Name Webster	8/12/2017	Retired			
Address 371 Fielding Lane, SW					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind				Description
State GA	Zip 30311				
Aff. Comm.	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				

Itemized Contributions Page Total                      \$1,100.00                      \$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 Nicole	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. \$250.00	Est. Value \$0.00		
Last Name Adams	9/9/2017	Account Manager					
Address 3454 Rugby Circle							
Address 2	<input checked="" type="checkbox"/> Monetary	Employer				<input type="checkbox"/> Run-Off Primary	Description
City College Park	<input type="checkbox"/> In-Kind	Enterprise				<input type="checkbox"/> Run-Off General	
State GA	<input type="checkbox"/> Common Source					<input type="checkbox"/> Run-Off Special	
Zip 30337	<input type="checkbox"/> Credit Received on Loan					<input type="checkbox"/> Run-Off Special Primary	
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 P. Gaston Restaurants, LLC	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. \$300.00	Est. Value \$0.00		
Last Name	7/7/2017						
Address 4560 Harris Trail							
Address 2	<input checked="" type="checkbox"/> Monetary	Employer				<input type="checkbox"/> Run-Off Primary	Description
City Atlanta	<input type="checkbox"/> In-Kind					<input type="checkbox"/> Run-Off General	
State GA	<input type="checkbox"/> Common Source					<input type="checkbox"/> Run-Off Special	
Zip 30327-3824	<input type="checkbox"/> Credit Received on Loan					<input type="checkbox"/> Run-Off Special Primary	
Aff. Comm.							

Itemized Contributions Page Total \$550.00 \$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>Keith</b>	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. \$150.00	Est. Value	
Last Name <b>Gammage</b>	9/28/2017	Solicitor			\$0.00	
Address 141 Pryor Street, SW						
Address 2	<input checked="" type="checkbox"/> Monetary	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	<input type="checkbox"/> In-Kind	Fulton County				
State GA	<input type="checkbox"/> Common Source					
Zip 30303	<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 <b>H. Jerome</b>	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. \$500.00	Est. Value	
Last Name <b>Russell</b>	10/4/2017	President			\$0.00	
Address 18 Inman Circle						
Address 2	<input checked="" type="checkbox"/> Monetary	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	<input type="checkbox"/> In-Kind	H. J. Russell				
State GA	<input type="checkbox"/> Common Source					
Zip 30309	<input type="checkbox"/> Credit Received on Loan					
Aff. Comm.						

Itemized Contributions Page Total \$650.00 \$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	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. \$2,000.00	Est. Value \$0.00	
Last Name Turpeau	9/29/2017	President				
Address 1266 Spring Park Drive	<input checked="" type="checkbox"/> Monetary	Employer				Description
Address 2						
City Atlanta	<input type="checkbox"/> Common Source	The Aaron Group				
State GA						Zip 30331
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor					Election Cycle**
Received Date Contribution Type*	Occupation & Employer	Estimated Value				
		Description				
First Name or Business Name Ernest	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. \$250.00	Est. Value \$0.00	
Last Name Greer	9/30/2017	President				
Address 3333 Piedmont Road, SE #2500	<input checked="" type="checkbox"/> Monetary	Employer				Description
Address 2						
City Atlanta	<input type="checkbox"/> Common Source	Greenberg Traurig				
State GA						Zip 30305
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan					

Itemized Contributions Page Total                      \$2,250.00                      \$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)  
 \*\* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)  
 \*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

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>Felker</b>	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. \$750.00	Est. Value		
Last Name <b>Ward</b>	9/27/2017	Principal			\$0.00		
Address 1745 Phoenix Blvd., Suite #340							
Address 2	<input checked="" type="checkbox"/> Monetary	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 College Park	<input type="checkbox"/> In-Kind	Pinnacle Investment Advisors					
State GA	Zip 30349						<input type="checkbox"/> Common Source
Aff. Comm.							<input type="checkbox"/> Credit Received on Loan
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**				Cash Amount
Received Date Contribution Type*	Occupation & Employer	Estimated Value					
		Description					
First Name or Business Name <b>Mary</b>	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 <b>Parker</b>	9/28/2017	President			\$0.00		
Address 3915 Cascade Road, SW Suite 340							
Address 2	<input checked="" type="checkbox"/> Monetary	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	<input type="checkbox"/> In-Kind	All N One Security Services, Inc.					
State GA	Zip 30031						<input type="checkbox"/> Common Source
Aff. Comm.							<input type="checkbox"/> Credit Received on Loan
Itemized Contributions Page Total							\$3,350.00

\* 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 Carol	Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input checked="" 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 \$0.00
Last Name Hojeij	10/27/2017				
Address 305 Westbourne Drive					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Tyrone	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source	Hojeij Branded Food			
Zip 30290	<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 Georgia Council of Deliberation	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. \$200.00	Est. Value \$0.00
Last Name	7/15/2017				
Address 135 Stillbrook Way					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City Fayetteville	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30214-5358	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total                      \$1,200.00                      \$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 Hojeij Branded Foods, LLC Last Name Address 1750 The Exchange SE, Suite 200 Address 2 City Atlanta State GA Zip 30339 Aff. Comm.	Date 9/18/2017 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer City of Atlanta	<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. \$2,500.00	Est. Value \$0.00 Description
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Received Date Contribution Type*	Occupation & Employer	Election Cycle**	Cash Amount	In-Kind Contributions Estimated Value Description
First Name or Business Name Amber Last Name Robinson Address 8111 Carlton Road Address 2 City Riverdale State GA Zip 30296 Aff. Comm.	Date 8/25/2017 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Attorney City of Atlanta	<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. \$101.00	Est. Value \$0.00 Description

Itemized Contributions Page Total                      \$2,601.00                      \$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>Anita</b>	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. \$101.00	Est. Value
Last Name <b>Leopold</b>	8/31/2017				\$0.00
Address 2854 N. Hills Drive NE					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta	<input type="checkbox"/> In-Kind	Self Employed			
State GA	<input type="checkbox"/> Common Source				
Zip 30309	<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 <b>Robert</b>	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. \$250.00	Est. Value
Last Name <b>Ferrell</b>	9/29/2017	Energy Manager			\$0.00
Address 3070 Staglin Dr					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Power Springs	<input type="checkbox"/> In-Kind	Atlanta Gas and Light			
State GA	<input type="checkbox"/> Common Source				
Zip 30127	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total \$351.00 \$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

<b>Loan Reporting</b>				
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.) <b>Clarence</b>		1. 9/17/2017	First Name <b>Committee To Elect C. T. Martin</b>	1. Councilmember
Lender Last Name <b>Martin</b>		2. \$5,000.00	Last Name	2. City of Atlanta
Address <b>561 Peyton Road</b>		3. <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	Address <b>P.O. Box 4416</b>	3.  <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address 2			Address 2	
City <b>Atlanta</b>			City <b>Atlanta</b>	
State <b>GA</b>	Zip <b>30311</b>		State <b>GA</b>	Zip <b>30303</b>
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total		\$5,000.00

\* 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 Committee To Elect C. T. Martin  Last Name  Address P.O. Box 4416  Address 2  City Atlanta  State GA Zip 30303	Date  7/18/2017  <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	Occupation   Employer	Field and Administrative Operations	\$500.00
First Name Carl  Last Name Lee  Address 2352 Meadow Pond Trail  Address 2  City Grayson  State GA Zip 30017	Date  7/20/2017  <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	Occupation  Owner  Employer  Screen Flex	Campaign Signs	\$1,500.00
First Name Committee to Elect C. T. Martin  Last Name  Address P.O. Box 4416  Address 2  City Atlanta  State GA Zip 30303	Date  7/21/2017  <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	Occupation   Employer	Field and Administrative Operations	\$4,750.00

Page Total \$6,750.00

\* 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

First Name Clash Graphic		Date 7/20/2017	Occupation Graphics	Campaign Hand Bill	\$670.81
Last Name					<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
Address 2140 Peachtree Road Northeast #301			Employer		
Address 2					
City Atlanta					
State GA	Zip 30309				
First Name Committee to Elect C. T. Martin		Date 7/7/2017	Occupation	Field and Administrative Operations	\$1,375.00
Last Name					<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
Address P.O. Box 4416			Employer		
Address 2					
City Atlanta					
State GA	Zip 30303				
First Name Dewellie		Date 7/27/2017	Occupation ROA	Consultant	\$130.00
Last Name Hines					<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
Address 4725 Walton Crossing, SW			Employer City of Atlanta		
Address 2					
City					
State GA	Zip 30331				
				Page Total	\$2,175.81

\* 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 Committee to Elect C. T. Martin		Date 7/24/2017	Occupation	Field and Administrative Operations	\$500.00
Last Name			Employer		
Address P.O. Box 4416		<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	Field and Administrative Operations
Address 2					
City Atlanta					
State GA	Zip 30303				
First Name Dwellie		Date 8/2/2017	Occupation	Consultant	\$150.00
Last Name Hines			Employer		ROA
Address 4725 Walton Crossing, 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		City of Atlanta	Consultant
Address 2					
City Atlanta					
State GA	Zip 30331				
First Name Committee To Elect C. T. Martin		Date 8/1/2017	Occupation	Field and Administrative Operations	\$680.00
Last Name			Employer		
Address P.O. Box 4416		<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	Field and Administrative Operations
Address 2					
City Atlanta					
State GA	Zip 30303				

Page Total \$1,330.00

\* 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 James		Date 8/2/2017	Occupation Self Employed	Consultant	\$300.00
Last Name Finley			Employer		
Address 3409 Fineese Drive		<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	Social Media
Address 2					
City Decatur					
State GA	Zip 30032				
First Name M320 Consulting					
Last Name					
Address 2806 N. Martin Street		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer	Campaign T-Shirts	\$455.00
Address 2					
City East Point					
State GA	Zip 30334				
First Name Frank					
Last Name Turpin					
Address 8066 Woodlake Drive		<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	Owner  Employer  Vulcan Princess	Campaign T-Shirts	\$455.00
Address 2					
City Riverdale					
State GA	Zip 30274				

Page Total \$3,755.00

\* 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 Creative Data Design		Date 7/27/2017	Occupation	Polling Precinct Data	\$2,000.00
Last Name					
Address 565 Regency Park, 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				
First Name Committee C. T. Martin		Date 8/17/2017	Occupation	Field and Administrative Operations	\$2,660.00
Last Name					
Address P.O. Box 4416		<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 John		Date 8/17/2017	Occupation	Balloons for Campaign Kick Off	\$200.00
Last Name Southall					
Address 1145 Reunion Place		<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	Artist		
Address 2					
City Atlanta					
State GA	Zip 30331		Balloons by J Wesley		

Page Total \$4,860.00

\* 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 Alesia		Date 8/10/2017	Occupation Unemployed	Administrative	\$520.00
Last Name Watkins					<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
Address 4962 Portsmouth CT					
Address 2					
City Lithonia					
State GA	Zip 30038				
First Name Committee to Elect C. T. Martin		Date 8/22/2017	Occupation	Council President 2017 Qualifying Fee	\$1,860.00
Last Name					<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
Address 561 Peyton Road, SW					
Address 2					
City Atlanta					
State GA	Zip 30311				
First Name Committee C. T. Martin		Date 8/22/2017	Occupation	Field and Administrative Operations	\$200.00
Last Name					<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
Address P.O. Box 4416					
Address 2					
City Atlanta					
State GA	Zip 30303				

Page Total \$2,580.00

\* 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 Drinking Partners, LLC		Date 8/16/2017	Occupation	Ice Cream for Campaign Kick off	\$300.00
Last Name					
Address 2722 Altavista Drive		<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 30354				
First Name Tony		Date 8/24/2017	Occupation DJ	Sound System for Campaign Kick Off	\$300.00
Last Name Rambo					
Address 7050 Connell Road		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer Ram Sound		
Address 2					
City Fairburn					
State GA	Zip 30213				
First Name Committee to Elect C. T. Martin		Date 8/30/2017	Occupation	Field and Administrative Operations	\$300.00
Last Name					
Address P.O. Box 4416		<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				

Page Total \$900.00

\* 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 Committee to Elect C. T. Martin		Date 8/31/2017	Occupation	Photo Shoot	\$1,600.00
Last Name					
Address P.O. Box 4416		<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 Heg, LLC		Date 8/17/2017	Occupation	Consultant	\$2,500.00
Last Name					
Address 2774 Royal Oaks Drive		<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 Tallahassee					
State FL	Zip 32309				
First Name Committee to Elect C. T. Martin		Date 9/6/2017	Occupation	Field and Administrative Operations	\$910.00
Last Name					
Address P.O. Box 4416		<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				
Page Total					\$5,010.00

\* 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 James		Date 8/31/2017	Occupation Self Employed	Consultant	\$300.00
Last Name Finley					<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
Address 3409 Finesse Drive					
Address 2					
City Decatur					
State GA	Zip 30032				
First Name Diversified Resolutions, Inc		Date 9/7/2017	Occupation Field Operations	Field Operations	\$4,000.00
Last Name					<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
Address 1820 Lake Cove Dr SW					
Address 2					
City Atlanta					
State GA	Zip 30331				
First Name Dewellie		Date 9/7/2017	Occupation ROA	Consultant	\$30.00
Last Name Hines					<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
Address 4725 Walton Crossing, SW					
Address 2					
City Atlanta					
State GA	Zip 30331				

Page Total \$4,330.00

\* 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 APN		Date 9/7/2017	Occupation	Campaign Ad	\$500.00
Last Name					
Address 2897 N. Druid Hills Road #316		<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 30329				
First Name William		Date 8/31/2017	Occupation Photographer	Campaign Photos	\$1,200.00
Last Name Adler					
Address 1184 14th Pl 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 30309				
First Name Lindley Home Improvement		Date 9/15/2017	Occupation	Installed Campaign Headquarter Sign	\$221.00
Last Name					
Address 4397 Yates Drive		<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 College Park					
State GA	Zip 30349				

Page Total \$1,921.00

\* 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 Committee to Elect C. T. Martin		Date 9/15/2017	Occupation	Field and Administrative operations	\$200.00
Last Name					
Address P.O. Box 4416		<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					
State GA	Zip 30303				
First Name Bouchard Gold Communications		Date 9/20/2017	Occupation	Campaign Mailers	\$50,000.00
Last Name					
Address 2125 E. Cesar Chavez Street		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 2					
City Austin					
State TX	Zip 78702				
First Name Ajoy Design		Date 9/14/2017	Occupation	Design Campaign Material	\$350.00
Last Name					
Address 130 LeConte' Highway		<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					\$50,550.00

\* 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 Keith		Date 9/13/2017	Occupation Senior Project Manager	Consultant	\$4,000.00
Last Name Hillsman			Employer City of Atlanta		
Address 85 Fulton Street		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address 2					
City Atlanta					
State GA	Zip 30312				
First Name Jonathan		Date 9/15/2017	Occupation Administrative Assistant	Consultant	\$75.00
Last Name Brown			Employer City of Atlanta		
Address 993 Woodbourne Drive, 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			
Address 2					
City Atlanta					
State GA	Zip 30310				
First Name Margretta		Date 9/21/2017	Occupation Unemployed	Administrative	\$30.00
Last Name King			Employer		
Address 1383 Downs Drive		<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			
Address 2					
City Atlanta					
State GA	Zip 30311				

Page Total \$4,105.00

\* 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 Committee to Elect C. T. Martin		Date 9/22/2017	Occupation	Field and Administrative Operations	\$300.00
Last Name			Employer		
Address P.O. Box 4416		<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 Irene		Date 9/21/2017	Occupation	Administrative	\$35.00
Last Name McCullers			Retired		Employer
Address 3813 Mays Court		<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				
First Name Jonathan		Date 9/19/2017	Occupation	Consultant	\$75.00
Last Name Brown			Administrative Assistant		Employer
Address 993 Woodbourne Drive, 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		City of Atlanta	
Address 2					
City Atlanta					
State GA	Zip 30310				
Page Total					\$410.00

\* 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 Clash Graphics		Date 9/21/2017	Occupation Graphics	Campaign Hand Bill	\$463.90
Last Name			Employer		
Address 2140 Peachtree Road Northeast #301		<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 30309				
First Name Sandra		Date 9/21/2017	Occupation Administrative Assistant	Administrative	\$40.00
Last Name Kelly			Employer		
Address Information Requested		<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	City of Atlanta		
Address 2					
City					
State	Zip				
First Name Jarrod		Date 9/19/2017	Occupation President	Consultant	\$600.00
Last Name Jordan			Employer		
Address 3447 Oregon Trail		<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	Sovereign Executive Transportation		
Address 2					
City Decatur					
State GA	Zip 30032				

Page Total \$1,103.90

\* 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 Sandra		Date 9/22/2017	Occupation Administrative Assistant	Administrative	\$40.00
Last Name Kelly			Employer City of Atlanta		
Address Information Requested		<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			
Address 2					
City					
State	Zip				
First Name Creative Data Design		Date 9/19/2017	Occupation	Campaign Data	\$800.00
Last Name			Employer		
Address 565 Regency Park, 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			
Address 2					
City Atlanta					
State GA	Zip 30331				
First Name Keriana		Date 9/21/2017	Occupation Unemployed	Administrative	\$35.00
Last Name Briley			Employer		
Address 2591 Etheridge Dr. Apt. B421		<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			
Address 2					
City Atlanta					
State GA	Zip 30318				

Page Total \$875.00

\* 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 Tiffany		Date 9/21/2017	Occupation Unemployed	Administrative	\$65.00
Last Name Larkins			Employer		
Address Information Requested		<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			
Address 2					
City					
State	Zip				
First Name Shirley		Date 9/21/2017	Occupation Retired	Administrative	\$35.00
Last Name Holmes			Employer		
Address 405 Fairburn Road, Unit #4		<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			
Address 2					
City Atlanta					
State GA	Zip 30331				
First Name Charmain		Date 9/21/2017	Occupation Unemployed	Administrative	\$65.00
Last Name Lawson			Employer		
Address 959 Peyton Road		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address 2					
City Atlanta					
State GA	Zip 30311				

Page Total \$165.00

\* 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 Clemmie		Date 9/21/2017	Occupation Unemployed	Administrative	\$65.00
Last Name McDonnough			Employer		
Address 3843 Chimney Ridge Drive		<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			
Address 2					
City Ellenwood					
State GA	Zip 30294				
First Name Carl		Date 9/22/2017	Occupation Owner	Campaign Signs	\$1,500.00
Last Name Lee			Employer Screen Flex		
Address 2352 Meadow Pond Trail		<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			
Address 2					
City Grayson					
State GA	Zip 30317				
First Name Cristy		Date 9/21/2017	Occupation Unemployed	Administrative	\$35.00
Last Name King			Employer		
Address 2591 Etheridge Dr.		<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			
Address 2					
City Atlanta					
State GA	Zip 30318				

Page Total \$1,600.00

\* 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 <b>Clemmie</b>		Date <b>9/23/2017</b>	Occupation <b>Unemployed</b>	Administrative	\$30.00
Last Name <b>McDonnough</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
Address <b>3843 Chimney Ridge Drive</b>					
Address 2					
City <b>Ellenwood</b>					
State <b>GA</b>	Zip <b>30294</b>				
First Name <b>Charmain</b>		Date <b>9/28/2017</b>	Occupation <b>Unemployed</b>	Administrative	\$120.00
Last Name <b>Lawson</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
Address <b>959 Peyton Road</b>					
Address 2					
City <b>Atlanta</b>					
State <b>GA</b>	Zip <b>30311</b>				
First Name <b>Committee to Elect C. T. Martin</b>		Date <b>10/5/2017</b>	Occupation <b>Unemployed</b>	Field and Administrative Operations	\$500.00
Last Name					<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
Address <b>P.O. Box 4416</b>					
Address 2					
City <b>Atlanta</b>					
State <b>GA</b>	Zip <b>30303</b>				

Page Total \$650.00

\* 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 _____		Value at beginning of reporting period \$
Mailing Address _____		Value at end of reporting period \$
Address2 _____		Difference in value \$
City _____ State _____ Zip _____		Interest Paid Out \$
		Cash Dividends \$

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
<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.