

# Campaign Contribution Disclosure Report

## Georgia Government Transparency and Campaign Finance Commission

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

<b>1. Report Type</b> (Select One) <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Amendment Amendment # _____	<b>2. Filing is being made on behalf of: (Select One)</b> Candidate or Public Official Office Held or Sought <u>Mayor</u> (Include county, municipality, district, post, or judicial circuit) Filer ID <u>C2017000136</u> Report of Organization or Person Other than Candidate's Campaign Committee Committee Name: _____ Filer ID _____	Filing office use Only  Use Earlier of Post Mark or Hand Delivered Date
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### 3. Identifying and Contact Information

- (1) Kwanza Hall (2) 10/06/2017  
*Full Name of Candidate or Other Than Candidate Campaign Committee* *Today's Date*
- (3) Atlanta GA 30309  
*Mailing Address* *City* *State* *Zip Code*
- (4) \_\_\_\_\_ and / or \_\_\_\_\_  
*Primary Contact Phone Number* *E-Mail*
- (5) If a Candidate or Public Official, is there campaign committee (one or more persons) to make campaign transactions, keep the financial records of the campaign, or file the reports? ☒ Yes ☐ No
- (6) If so, is the Committee registered with the State Ethics Commission? ☒ Yes ☐ No
- (7) If so, complete the following: Mr. John Johnson Mr. John Johnson  
*Name of Committee Chairperson* *Name of Committee Treasurer*

### 4. Period for which you are Reporting

You Must Check Only One Box

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

### Verification by Oath or Affirmation

State of \_\_\_\_\_

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

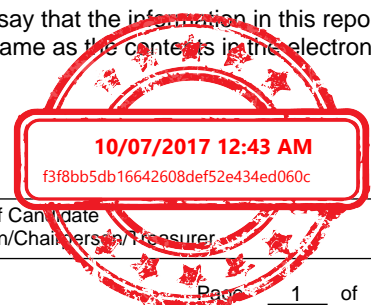
I, \_\_\_\_\_, being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on \_\_\_\_\_, 20\_\_\_\_

Signature of Notary Public

Commission Expiration

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



Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Summary Report

## CONTRIBUTIONS RECEIVED

1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	In-Kind Estimated Value	Cash Amount
2	A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns.	\$8,507.50	\$513,051.95
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$103,175.00
3a	All loans received this reporting period.		\$0.00
3b	Interest earned on campaign account this reporting period.		\$0.00
3c	Total amount of investments sold this reporting period.		\$0.00
3d	Total amount of cash dividends and interest paid out this reporting period.		
4	Total amount of all separate contributions of less than \$100.00 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	\$1,259.00
5	Total contributions reported this period (Line 3 + 3a + 3b + 3c + 3d + 4).	\$0.00	\$104,434.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$8,507.50	\$617,485.95

## EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures report:	In-Kind Estimated Value	Cash Amount
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	\$151,981.84
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$207,183.43
10	Total amount of all separate expenditures of less than \$100.00 that were made in this reporting period and not listed on the "Itemized Expenditures" page.	\$0.00	\$16,769.38
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$223,952.81
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$375,934.65

## INVESTMENTS

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

## TOTAL NET BALANCE ON HAND

15	Net Balance On Hand. (Line 6 - Line 12 + Line 14)		\$241,551.30
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\* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

## State of Georgia Campaign Contribution Disclosure Report 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 / Business Name The Galloway Law Group LLC	Date 07/24/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00			
Last Name								
Address 3500 Lenox Rs. NE Suite 760								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer			Description	
City Atlanta								
State GA								Zip 30326
Aff. Comm.								
First Name / Business Name Kimberly	Date 09/24/2017	Occupation Self employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$300.00	Est. Value \$0.00			
Last Name Coaxum								
Address 22 Larchwood Rd								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Self employed			Description	
City Larchmont								
State NY								Zip 10538-1245
Aff. Comm.								
First Name / Business Name Rita	Date 09/30/2017	Occupation Sales	<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  2017	Cash Amt. \$25.00	Est. Value \$0.00			
Last Name Davis								
Address 878 Peachtree St NE								
Address2 Apt 518		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Randstad			Description	
City Atlanta								
State GA								Zip 30309-4465
Aff. Comm.								

**Itemized Contribution Page Total**

\$1,325.00

\$0.00

# 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 / Business Name Genevieve	Date 07/07/2017	Occupation Private Equity	<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  2017	Cash Amt. \$1,400.00	Est. Value \$0.00
Last Name Sangudi					
Address 15 Gaslight Ln					
Address2					
City Framingham					
State MA					Zip 01702-5539
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer The Carlyle Group			
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				
First Name / Business Name Jeffrey	Date 07/01/2017	Occupation Consultant	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Dufresne					
Address 4550 Woodland Brook Dr SE					
Address2					
City Atlanta					
State GA					Zip 30339-5367
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer Dufresne Projects			
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				
First Name / Business Name Louis	Date 09/02/2017	Occupation Founder and Medical Director	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Prevosti					
Address 731 Berkeley Run					
Address2					
City Atlanta					
State GA					Zip 30342-4938
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer VEIN Atlanta			
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				

Itemized Contribution Page Total

\$2,500.00

\$0.00

# 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 / Business Name Myles Greene	Date 08/20/2017	Occupation Retired	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Smith					
Address 3747 Peachtree Rd NE	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired			Description
Address2 Apt 1802					
City Atlanta					
State GA				Zip 30319-1367	
Aff. Comm.					
First Name / Business Name Anthony	Date 08/30/2017	Occupation Associate Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Lobb					
Address 207 15th St NE	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Dzikowski Vaishnav, LLC			Description
Address2					
City Atlanta					
State GA				Zip 30309-3512	
Aff. Comm.					
First Name / Business Name Scott	Date 07/01/2017	Occupation Consultant	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Cullen					
Address 843 Argonne Ave NE	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer JLL			Description
Address2					
City Atlanta					
State GA				Zip 30308-1613	
Aff. Comm.					

Itemized Contribution Page Total

\$400.00

\$0.00

# 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 / Business Name Barbara C	Date 07/03/2017	Occupation retired	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00	
Last Name Meyer						
Address 75 Ponce De Leon Ave NE						
Address2 Apt 902					<input checked="" type="checkbox"/> Monetary	Employer retired
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30308-1997					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						
First Name / Business Name Sarah C	Date 08/07/2017	Occupation Psychologist	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Lopez						
Address 1214 Poplar Grove Dr NE						
Address2					<input checked="" type="checkbox"/> Monetary	Employer Self Employed
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30306-2211					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						
First Name / Business Name Charles	Date 07/27/2017	Occupation Dentist	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00	
Last Name Cooper						
Address 238 15th St NE						
Address2 Unit 6					<input checked="" type="checkbox"/> Monetary	Employer Self Employed
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30309-3594					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						

**Itemized Contribution Page Total**

\$1,350.00

\$0.00

# 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 / Business Name Harold V.	Date 08/02/2017	Occupation Realtor	<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  2017	Cash Amt. \$150.00	Est. Value \$0.00		
Last Name Shumacher							
Address 845 Spring St NW							
Address2 Ph 4					<input checked="" type="checkbox"/> Monetary	Employer The Shumacher Group, Inc.	
City Atlanta					<input type="checkbox"/> Inkind		Description
State GA					<input type="checkbox"/> Common Source		
Zip 30308-1051					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							
First Name / Business Name Darren	Date 07/04/2017	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$100.00	Est. Value \$0.00		
Last Name Joyner							
Address 401 Arnold St NE							
Address2					<input checked="" type="checkbox"/> Monetary	Employer Chow baby	
City Atlanta					<input type="checkbox"/> Inkind		Description
State GA					<input type="checkbox"/> Common Source		
Zip 30308-2912					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							
First Name / Business Name Benjamin	Date 08/26/2017	Occupation Aviation Consultant	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00		
Last Name DeCosta							
Address 1343 Cascade Falls Ct SW							
Address2					<input checked="" type="checkbox"/> Monetary	Employer DeCosta Consulting, LLC	
City Atlanta					<input type="checkbox"/> Inkind		Description
State GA					<input type="checkbox"/> Common Source		
Zip 30311-3674					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							

Itemized Contribution Page Total

\$350.00

\$0.00

## 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.  
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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 / Business Name Shun	Date 09/30/2017	Occupation Analyst	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Reynolds					
Address 102 Saintvry Way					
Address2					
City Atlanta					
State GA					Zip 30349-2066
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Bank of America			Description
First Name / Business Name Brandon Gary	Date 07/27/2017	Occupation Customer Service Senior Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Reese					
Address 1116 Lindridge Dr NE					
Address2					
City Atlanta					
State GA					Zip 30324-3708
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Verizon Wireless			Description
First Name / Business Name Herbert	Date 08/21/2017	Occupation Barber	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Williams					
Address PO Box 854					
Address2					
City Atlanta					
State GA					Zip 30301-0854
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Afro-Disiac Inc.			Description

Itemized Contribution Page Total

\$400.00

\$0.00



# 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.  
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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 / Business Name Christopher	Date 07/07/2017	Occupation President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Wilbanks					
Address 620 Peachtree St NE					
Address2 Apt 1613	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Digital Love Atlanta			Description
City Atlanta					
State GA				Zip 30308-2376	
Aff. Comm.					
First Name / Business Name Shari	Date 07/03/2017	Occupation Admin Asst	<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  2017	Cash Amt. \$25.00	Est. Value \$0.00
Last Name Simpson					
Address 1395 Athens Ave SW					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer FCBOE			Description
City Atlanta					
State GA				Zip 30310-4301	
Aff. Comm.					
First Name / Business Name Monique T	Date 07/31/2017	Occupation Educator, Realtor, Christian Counselor	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Brown					
Address 304 Peyton Pl SW					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Fulton County Board of Education			Description
City Atlanta					
State GA				Zip 30311-2128	
Aff. Comm.					

**Itemized Contribution Page Total**

\$1,125.00

\$0.00

# 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.  
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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 / Business Name Cascade Corners	Date 09/05/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$2,600.00	Est. Value \$0.00		
Last Name							
Address 3419 Cascade Rd,							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer	<input type="checkbox"/> Run-Off Special Primary	Description	
City Atlanta							
State GA							Zip 30311-3637
Aff. Comm.							
First Name / Business Name Veronica	Date 09/17/2017	Occupation Self Employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00		
Last Name Robinson							
Address 4940 S Lake Shore Dr							
Address2 Apt F		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Physician	<input type="checkbox"/> Run-Off Special Primary	Description	
City Chicago							
State IL							Zip 60615-3254
Aff. Comm.							
First Name / Business Name Justin	Date 07/07/2017	Occupation Entrepreneur	<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  2017	Cash Amt. \$2,000.00	Est. Value \$0.00		
Last Name Fox							
Address 93 E Lake Ter SE							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Fox Bros Bar-B-Q	<input type="checkbox"/> Run-Off Special Primary	Description	
City Atlanta							
State GA							Zip 30317-2629
Aff. Comm.							

**Itemized Contribution Page Total**

\$4,850.00

\$0.00

# 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 / Business Name Christopher	Date 07/31/2017	Occupation retired	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Dehmer					
Address 947 Underwood Ave SE					
Address2					
City Atlanta					
State GA					Zip 30316-2589
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer retired			Description
First Name / Business Name Priscilla	Date 09/28/2017	Occupation Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Borders					
Address PO Box 89164					
Address2					
City Atlanta					
State GA					Zip 30312-0164
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Government			Description
First Name / Business Name Tia	Date 09/01/2017	Occupation restaurant owner	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Landau					
Address 926 Waverly Way NE					
Address2 Apt B					
City Atlanta					
State GA					Zip 30307-2551
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer The Albert			Description

**Itemized Contribution Page Total**

\$1,600.00

\$0.00

# 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 / Business Name Weiliang	Date 08/26/2017	Occupation Student	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$2,600.00	Est. Value \$0.00
Last Name Liu					
Address 3159 St Ives Country Club Pkwy					
Address2					
City Duluth					
State GA					Zip 30097-2001
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer Student			Description
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				
First Name / Business Name Reginald	Date 09/29/2017	Occupation Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Snyder					
Address 863 Woodleaf Park Dr					
Address2					
City Mableton					
State GA					Zip 30126-7618
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer Dye Snyder, LLP			Description
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				
First Name / Business Name Michelle	Date 09/03/2017	Occupation Vice President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Mahoney					
Address 610 Montauk Way					
Address2					
City Alpharetta					
State GA					Zip 30022-4705
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer Southeast Energy Efficiency Alliance			Description
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				

Itemized Contribution Page Total

\$3,850.00

\$0.00

## 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 / Business Name Robert	Date 08/31/2017	Occupation Software Engineer	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00		
Last Name Cooper							
Address 840 Penn Ave NE							
Address2 Apt 5		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Thoughtworks		Description	
City Atlanta							
State GA							Zip 30308-1508
Aff. Comm.							
First Name / Business Name Ro	Date 09/10/2017	Occupation human Resources	<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  2017	Cash Amt. \$200.00	Est. Value \$0.00		
Last Name Lawson							
Address 782 Inman Mews Dr NE							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Accenture		Description	
City Atlanta							
State GA							Zip 30307-2499
Aff. Comm.							
First Name / Business Name Shari	Date 09/30/2017	Occupation Admin Asst	<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  2017	Cash Amt. \$25.00	Est. Value \$0.00		
Last Name Simpson							
Address 1395 Athens Ave SW							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer FCBOE		Description	
City Atlanta							
State GA							Zip 30310-4301
Aff. Comm.							

**Itemized Contribution Page Total**

\$325.00

\$0.00

## 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 / Business Name Jay Corell	Date 09/29/2017	Occupation Chief of Staff	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Tribby						
Address 57 Forsyth St NW						
Address2 Apt 3B					<input checked="" type="checkbox"/> Monetary	Employer City of Atlanta
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30303-2205					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						
First Name / Business Name Cathi	Date 07/01/2017	Occupation Retired	<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  2017	Cash Amt. \$300.00	Est. Value \$0.00	
Last Name Barlow						
Address 1041 North Ave NE						
Address2					<input checked="" type="checkbox"/> Monetary	Employer Retired
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30306-4414					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						
First Name / Business Name RE Mack Enterprises, Inc.	Date 07/27/2017	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 type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00	
Last Name						
Address 1747 Laurel Creek Trl SE						
Address2					<input checked="" type="checkbox"/> Monetary	Employer
City Smyrna					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30080-6435					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						

**Itemized Contribution Page Total**

\$1,400.00

\$0.00

# 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 / Business Name Russell	Date 08/07/2017	Occupation Business owner	<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  2017	Cash Amt. \$1,400.00	Est. Value \$0.00
Last Name Seifert					
Address PO Box 1077					
Address2					
City Kennesaw					
State GA					Zip 30156-8077
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Creative Solar USA, Inc.			Description
First Name / Business Name Lydia Mitcham	Date 09/28/2017	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Meredith					
Address 1301 McGill Park Ave NE					
Address2 Unit A					
City Atlanta					
State GA					Zip 30312-4218
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Lydia M Meredith, Inc			Description
First Name / Business Name George	Date 07/03/2017	Occupation Executive	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,400.00	Est. Value \$0.00
Last Name Kelly					
Address 4845 Collins Lake Dr					
Address2					
City Mableton					
State GA					Zip 30126-1794
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Printing Systems, LLC			Description

**Itemized Contribution Page Total**

\$2,850.00

\$0.00

## 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 / Business Name John	Date 09/28/2017	Occupation Real estate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Morrison					Description	
Address 1632 Ponce De Leon Ave NE						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed Morrison Properties, inc.				
City Atlanta						
State GA						Zip 30307-1680
Aff. Comm.						
First Name / Business Name T gene	Date 09/26/2017	Occupation Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00	
Last Name Lockard					Description	
Address 4521 Weldon Dr SE						
Address2 Ste C300	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Wingate				
City Smyrna						
State GA						Zip 30080-6468
Aff. Comm.						
First Name / Business Name Tolulope	Date 09/01/2017	Occupation TV Producer	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00	
Last Name Edwards					Description	
Address 433 Highland Ave NE						
Address2 1239	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer CNN				
City Atlanta						
State GA						Zip 30312-1391
Aff. Comm.						

**Itemized Contribution Page Total**

\$400.00

\$0.00



## 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 / Business Name Wayne	Date 09/30/2017	Occupation Retired	<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  2017	Cash Amt. \$200.00	Est. Value \$0.00
Last Name Lobb					
Address 223 Elsinore St					
Address2					
City Concord					
State MA					Zip 01742-2311
Aff. Comm.					
First Name / Business Name Darcy	Date 09/03/2017	Occupation Executive	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Prather					
Address 92 Elm St					
Address2					
City Milton					
State MA					Zip 02186-3111
Aff. Comm.					
First Name / Business Name Ankusb	Date 09/26/2017	Occupation Self employed	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Patel					
Address 4490 Outpost Ct					
Address2					
City Roswell					
State GA					Zip 30075-2084
Aff. Comm.					

**Itemized Contribution Page Total**

\$800.00

\$0.00

# 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 / Business Name Simon	Date 07/07/2017	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$2,600.00	Est. Value \$0.00
Last Name Guobadia					
Address 5610 Glenridge Connector Suite 200					
Address2 Ste 200					
City Atlanta					
State GA					Zip 30342
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Simcol Petroleum Limited Company			Description
First Name / Business Name Jon	Date 07/29/2017	Occupation Medical practice manager	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$2,600.00	Est. Value \$0.00
Last Name Grand					
Address 11751 Stonehaven Way					
Address2					
City West Palm Beach					
State FL					Zip 33412-1635
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Elite Ortho			Description
First Name / Business Name Norrene J	Date 08/27/2017	Occupation Small business owner	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Duffy					
Address 4810 Harris Trl					
Address2					
City Atlanta					
State GA					Zip 30327-4412
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Red Bridge Consulting			Description

**Itemized Contribution Page Total**

\$5,700.00

\$0.00

## 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 / Business Name Mylinh	Date 07/03/2017	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,500.00	Est. Value \$0.00	
Last Name Cao					Description	
Address 3019 Lake Park Dr						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Dua Vietnamese Noodle Soup				
City Jonesboro						
State GA						Zip 30236-4129
Aff. Comm.						
First Name / Business Name Edward	Date 08/07/2017	Occupation Financial Planner	<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  2017	Cash Amt. \$350.00	Est. Value \$0.00	
Last Name Wilcox					Description	
Address 1000 Gilbert St SE						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Rollins Financial, Inc.				
City Atlanta						
State GA						Zip 30316-2511
Aff. Comm.						
First Name / Business Name Frederick	Date 07/04/2017	Occupation Real estate Director	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Luster					Description	
Address 179 Douglas St SE						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Focus brands				
City Atlanta						
State GA						Zip 30317-2625
Aff. Comm.						

**Itemized Contribution Page Total**

\$1,950.00

\$0.00

# 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 / Business Name Keith	Date 09/14/2017	Occupation Wealth Management	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Spelmon					
Address 2163 Pine Forest Dr NE					
Address2					
City Atlanta					
State GA					Zip 30345-4155
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Harmony Grove Wealth Management			Description
First Name / Business Name TDC Systems Integration, INC	Date 07/25/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name					
Address 4355J Cobb Pkwy SE					
Address2 Ste 232					
City Atlanta					
State GA					Zip 30339-3811
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
First Name / Business Name Travia	Date 07/31/2017	Occupation Sales	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Charmont					
Address 2430 Poole Rd SW					
Address2					
City Atlanta					
State GA					Zip 30311-3204
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer CBSRadio			Description

**Itemized Contribution Page Total**

\$650.00

\$0.00

# 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 / Business Name Glenn	Date 09/19/2017	Occupation Attorney	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,400.00	Est. Value \$0.00
Last Name Cambre					
Address 2310 Parklake Drive NE Suite 300					
Address2					
City Atlanta					
State GA					Zip 30345
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Cambre & Associates			Description
First Name / Business Name Kelly	Date 08/01/2017	Occupation Real Estate Development	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name King					
Address 3535 Peachtree Rd NE					
Address2 Ste 520-206					
City Atlanta					
State GA					Zip 30326-3287
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self			Description
First Name / Business Name Darrell	Date 07/18/2017	Occupation Small business owner	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Anderson					
Address 2786 Autumn Lake La					
Address2					
City Decatur					
State GA					Zip 30034-3560
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer A National Limousines Service Inc			Description

**Itemized Contribution Page Total**

\$2,900.00

\$0.00

## 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 / Business Name Susana	Date 07/28/2017	Occupation Management	<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  2017	Cash Amt. \$400.00	Est. Value \$0.00
Last Name Chavez					
Address 553 Seminole Ave NE					
Address2					
City Atlanta					
State GA					Zip 30307-1417
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Parking Company of America			Description
First Name / Business Name Jacki	Date 09/01/2017	Occupation Software Engineer	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Viles					
Address 1829 Terry Mill Rd SE					
Address2					
City Atlanta					
State GA					Zip 30316-2342
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed			Description
First Name / Business Name J. Ralph	Date 07/28/2017	Occupation RE Development Consultant	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Cole					
Address PO Box 5343					
Address2					
City Midlothian					
State VA					Zip 23112-0023
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed			Description

Itemized Contribution Page Total

\$1,000.00

\$0.00

# 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 / Business Name Jay Corell	Date 08/31/2017	Occupation Chief of Staff	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Tribby						
Address 57 Forsyth St NW						
Address2 Apt 3B					<input checked="" type="checkbox"/> Monetary	Employer City of Atlanta
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30303-2205					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						
First Name / Business Name J. Anthony	Date 09/17/2017	Occupation Lawyer	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Clark						
Address 9753 S Yates Blvd						
Address2					<input checked="" type="checkbox"/> Monetary	Employer Clark Legal Group
City Chicago					<input type="checkbox"/> Inkind	
State IL					<input type="checkbox"/> Common Source	
Zip 60617-4973					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						
First Name / Business Name Travia	Date 09/30/2017	Occupation Sales	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00	
Last Name Charmont						
Address 2430 Poole Rd SW						
Address2					<input checked="" type="checkbox"/> Monetary	Employer CBSRadio
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30311-3204					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						

**Itemized Contribution Page Total**

\$250.00

\$0.00

## 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 / Business Name Delta Jet Bonding Company INC	Date 08/25/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name					Description
Address 4712 Memorial Dr					
Address2 Ste H	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			
City Decatur					
State GA					
Aff. Comm.					
First Name / Business Name Brickson E	Date 08/31/2017	Occupation COO	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Diamond					Description
Address 1351 N Crescent Heights Blvd					
Address2 Apt 219	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer The Executive Leadership Council			
City West Hollywood					
State CA					
Aff. Comm.					
First Name / Business Name Sean	Date 08/31/2017	Occupation Owner	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Lupton-Smith					Description
Address 460 Catalina Dr					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Electric Bike Company			
City Newport Beach					
State CA					
Aff. Comm.					

**Itemized Contribution Page Total**

\$1,600.00

\$0.00



# 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 / Business Name Matt	Date 09/27/2017	Occupation Project Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$750.00	Est. Value \$0.00	
Last Name Sheffield					Description	
Address 1935 E Lake Dr						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Paragon Distribution				
City Marietta						
State GA						Zip 30066-6521
Aff. Comm.						
First Name / Business Name Rembrandt Investments	Date 08/08/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$750.00	Est. Value \$0.00	
Last Name					Description	
Address 1100 Spring St NW						
Address2 Ste 550	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer				
City Atlanta						
State GA						Zip 30309-2857
Aff. Comm.						
First Name / Business Name Norman	Date 09/24/2017	Occupation Attorney At Law	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00	
Last Name Siegel					Description	
Address 260 Madison Ave						
Address2 Fl 22	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Siegel Teitelbaum&Evans, LLP				
City New York						
State NY						Zip 10016-2409
Aff. Comm.						

**Itemized Contribution Page Total**

\$1,750.00

\$0.00

## 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 / Business Name William	Date 08/02/2017	Occupation Architect	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name De St. Aubin					
Address 342 Marietta St NW					
Address2					
City Atlanta					
State GA					Zip 30313-1643
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Sizemore group			Description
First Name / Business Name Jon	Date 07/29/2017	Occupation Medical practice manager	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,400.00	Est. Value \$0.00
Last Name Grand					
Address 11751 Stonehaven Way					
Address2					
City West Palm Beach					
State FL					Zip 33412-1635
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Elite Ortho			Description
First Name / Business Name Sabina	Date 09/30/2017	Occupation Marketing	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Rahaman					
Address 221 E 21st St					
Address2 Apt LC					
City New York					
State NY					Zip 10010-6448
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Cargo Systems			Description

**Itemized Contribution Page Total**

\$2,000.00

\$0.00

# 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 / Business Name Robert	Date 07/17/2017	Occupation Software Engineer	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00		
Last Name Cooper							
Address 840 Penn Ave NE							
Address2 Apt 5		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Thoughtworks			
City Atlanta							
State GA							Zip 30308-1508
Aff. Comm.							
First Name / Business Name Lisa	Date 07/31/2017	Occupation Director of Client Development	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00		
Last Name Thompson							
Address 2865 Lenox Rd NE							
Address2 606		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer HNTB Corporation			
City Atlanta							
State GA							Zip 30324-2853
Aff. Comm.							
First Name / Business Name George	Date 07/03/2017	Occupation Executive	<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  2017	Cash Amt. \$2,600.00	Est. Value \$0.00		
Last Name Kelly							
Address 4845 Collins Lake Dr							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Printing Systems, LLC			
City Mableton							
State GA							Zip 30126-1794
Aff. Comm.							

**Itemized Contribution Page Total**

\$2,800.00

\$0.00

# 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 / Business Name Larry	Date 08/30/2017	Occupation retired	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Hampton					
Address 3350 Arbor Run Pl					
Address2					
City Atlanta					
State GA					Zip 30349-8715
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer US ARMY			Description
First Name / Business Name Tolulope	Date 08/01/2017	Occupation TV Producer	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Edwards					
Address 433 Highland Ave NE					
Address2 1239					
City Atlanta					
State GA					Zip 30312-1391
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer CNN			Description
First Name / Business Name Sam	Date 07/31/2017	Occupation Retired	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Booher					
Address 4387 Roswell Rd NE					
Address2 Unit 1211					
City Atlanta					
State GA					Zip 30342-3315
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired			Description

Itemized Contribution Page Total

\$1,150.00

\$0.00

# 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 / Business Name Georgia Event Specialist, INC	Date 09/29/2017	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00		
Last Name							
Address 1103 Clifton Rd NE							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Description	
City Atlanta							
State GA							Zip 30307-1229
Aff. Comm.							
First Name / Business Name Glenn	Date 09/19/2017	Occupation  Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$2,600.00	Est. Value \$0.00		
Last Name Cambre							
Address 2310 Parklake DriveNE Suite 300							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Cambre & Associates	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Description	
City Atlanta							
State GA							Zip 30345
Aff. Comm.							
First Name / Business Name Lisa	Date 09/27/2017	Occupation  Director of Client Delovelment	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00		
Last Name Thompson							
Address 2865 Lenox Rd NE							
Address2 606		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer HNTB Corporation	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Description	
City Atlanta							
State GA							Zip 30324-2853
Aff. Comm.							

**Itemized Contribution Page Total**

\$3,700.00

\$0.00

## 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 / Business Name Darrell	Date 07/18/2017	Occupation Small business owner	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00		
Last Name Anderson							
Address 2786 Autumn Lake La							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer A National Limousines Service Inc	<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 Decatur							
State GA							Zip 30034-3560
Aff. Comm.							
First Name / Business Name Herbert	Date 07/21/2017	Occupation Barber	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00		
Last Name Williams							
Address PO Box 854							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Afro-Disiac Inc.	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Description	
City Atlanta							
State GA							Zip 30301-0854
Aff. Comm.							
First Name / Business Name Cara	Date 07/24/2017	Occupation Architect	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00		
Last Name Cummins							
Address 765 East Ave NE							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer TaC studios	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Description	
City Atlanta							
State GA							Zip 30312-1409
Aff. Comm.							

**Itemized Contribution Page Total**

\$1,350.00

\$0.00

# 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 / Business Name Tingxia	Date 07/10/2017	Occupation Accountant	<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  2017	Cash Amt. \$2,600.00	Est. Value \$0.00
Last Name Sun					
Address 280 Wembley Cir					
Address2					
City Atlanta					
State GA					Zip 30328-6757
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Pwc			
First Name / Business Name Charles	Date 09/17/2017	Occupation Consultant	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Lay					
Address 11117 S Longwood Dr					
Address2 Apt 2					
City Chicago					
State IL					Zip 60643-4005
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer ORT			
First Name / Business Name Clifton WAYNE	Date 09/09/2017	Occupation Architect	<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  2017	Cash Amt. \$2,000.00	Est. Value \$0.00
Last Name Jones					
Address 5 Krog St NE					
Address2 Unit C					
City Atlanta					
State GA					Zip 30307-2488
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer MSTSD			

**Itemized Contribution Page Total**

\$4,850.00

\$0.00

## 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 / Business Name Kemal Gazi	Date 08/17/2017	Occupation Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Karsli					
Address 794 Juniper St NE					
Address2					
City Atlanta					
State GA					Zip 30308-1337
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Owner			
First Name / Business Name Liz	Date 08/09/2017	Occupation PR	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Lapidus					
Address 772 Edgewood Ave NE					
Address2					
City Atlanta					
State GA					Zip 30307-2482
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer LLPR			
First Name / Business Name Monica	Date 07/11/2017	Occupation Consultant	<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  2017	Cash Amt. \$200.00	Est. Value \$0.00
Last Name Woods					
Address 2814 Oxford Dr					
Address2					
City Decatur					
State GA					Zip 30034-1049
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Canaan permit services			

**Itemized Contribution Page Total**

\$950.00

\$0.00



# 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 / Business Name David N	Date 09/06/2017	Occupation Broker	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00	
Last Name Patton IV						
Address 561 Auburn Ave NE						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Prudential			Description	
City Atlanta						
State GA						Zip 30312-1941
Aff. Comm.						
First Name / Business Name Norman	Date 07/24/2017	Occupation Attorney At Law	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00	
Last Name Siegel						
Address 260 Madison Ave						
Address2 Fl 22	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Siegel Teitelbaum&Evans, LLP			Description	
City New York						
State NY						Zip 10016-2409
Aff. Comm.						
First Name / Business Name Diana Jones	Date 09/30/2017	Occupation Nonprofit Director	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Wilson						
Address PO Box 20642						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Faith Partnerships			Description	
City Raleigh						
State NC						Zip 27619-0642
Aff. Comm.						

**Itemized Contribution Page Total**

\$850.00

\$0.00

# 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 / Business Name Derrick W	Date 09/01/2017	Occupation PE	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Parker					
Address 495 North Ave NE					
Address2					
City Atlanta					
State GA					Zip 30308-2720
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Defender Security and Communications			Description
First Name / Business Name Scott D	Date 07/11/2017	Occupation Chief of Surgery	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Miller					
Address 28 Ball Mill Pl					
Address2					
City Sandy Springs					
State GA					Zip 30350-4319
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Northside Hospital			Description
First Name / Business Name Terry	Date 07/27/2017	Occupation President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Harps					
Address 140 Dink Scott Ct					
Address2					
City Ellenwood					
State GA					Zip 30294-3172
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Global Concessions, Inc.			Description

**Itemized Contribution Page Total**

\$1,600.00

\$0.00

## 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 / Business Name Meghan	Date 09/27/2017	Occupation Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Kiernan					
Address 4470 Shoshone St					
Address2					
City Denver					
State CO					Zip 80211-1543
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Nordstrom			
First Name / Business Name Mike	Date 09/06/2017	Occupation Marketing Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Davison					
Address 3764 Tuxedo Rd NW					
Address2					
City Atlanta					
State GA					Zip 30305-1069
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer AirNav, LLC			
First Name / Business Name Kelly	Date 09/28/2017	Occupation Creative Director	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Nelson					
Address 1919 New Haven Ct SE					
Address2					
City Smyrna					
State GA					Zip 30080-1616
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer L.E.D			

**Itemized Contribution Page Total**

\$2,100.00

\$0.00

## 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 / Business Name Sam S.	Date 07/14/2017	Occupation  Certified Public Accountant	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,400.00	Est. Value \$0.00	
Last Name Lee						
Address 7705 Sarahs Meadow Ct						
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Windham Brannon		Description
City Suwanee						
State GA					Zip 30024-8640	
Aff. Comm.						
First Name / Business Name Corregan	Date 09/30/2017	Occupation  Software Engineer	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Brown						
Address 3556 Beachhill Dr						
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Self Employed		Description
City Doraville						
State GA					Zip 30340-4151	
Aff. Comm.						
First Name / Business Name Center for plastic surgery inc	Date 07/07/2017	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 type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,400.00	Est. Value \$0.00	
Last Name						
Address 5 Pointe Ridge Dr						
Address2 Center for plastic surgery inc.		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer		Description
City Atlanta						
State GA					Zip 30328-2755	
Aff. Comm.						

Itemized Contribution Page Total

\$2,900.00

\$0.00

# 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 / Business Name Kate	Date 09/28/2017	Occupation Lawyer	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Merrill					Description
Address 45 Corte De Sabla					
Address2					
City Greenbrae					
State CA					
Aff. Comm.					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan
First Name / Business Name Myles Greene	Date 07/20/2017	Occupation Retired	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Smith					Description
Address 3747 Peachtree Rd NE					
Address2 Apt 1802					
City Atlanta					
State GA					
Aff. Comm.					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan
First Name / Business Name Gordon	Date 08/30/2017	Occupation Real Estate Agent	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Bunchmiller					Description
Address 3101 Howell Mill Rd NW					
Address2 Unit 217					
City Atlanta					
State GA					
Aff. Comm.					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan

**Itemized Contribution Page Total**

\$1,550.00

\$0.00

## 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 / Business Name Sonia	Date 08/22/2017	Occupation Interpreter	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Swartz					
Address 1030 W Wesley Rd NW					
Address2					
City Atlanta					
State GA					Zip 30327-1312
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self employed			
First Name / Business Name Clifford	Date 07/31/2017	Occupation Self Employed	<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  2017	Cash Amt. \$300.00	Est. Value \$0.00
Last Name Hall					
Address 12203 Crestwood Ct					
Address2					
City Fayetteville					
State GA					Zip 30215-1101
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self employed			
First Name / Business Name D HADDON	Date 08/31/2017	Occupation Retired	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name FOSTER II					
Address 155 Stewart Dr					
Address2					
City Atlanta					
State GA					Zip 30342-1907
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired			

Itemized Contribution Page Total

\$500.00

\$0.00

# 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 / Business Name Becky J	Date 08/08/2017	Occupation Executive	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00	
Last Name Cronister						
Address 75 Ponce De Leon Ave NE						
Address2 Apt 200					<input checked="" type="checkbox"/> Monetary	Employer Action Capital Corporation
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30308-1967					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						
First Name / Business Name Benjamin	Date 08/16/2017	Occupation Aviation Consultant	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name DeCosta						
Address 1343 Cascade Falls Ct SW						
Address2					<input checked="" type="checkbox"/> Monetary	Employer DeCosta Consulting, LLC
City Atlanta					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30311-3674					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						
First Name / Business Name Karen	Date 07/08/2017	Occupation Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$2,000.00	Est. Value \$0.00	
Last Name Wilbanks						
Address 3428 Paces Ferry Cir SE						
Address2					<input checked="" type="checkbox"/> Monetary	Employer The Robert and Polly Dunn Foundation
City Smyrna					<input type="checkbox"/> Inkind	
State GA					<input type="checkbox"/> Common Source	
Zip 30080-3127					<input type="checkbox"/> Credit Received on Loan	
Aff. Comm.						

**Itemized Contribution Page Total**

\$2,600.00

\$0.00

# 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 / Business Name Kevin	Date 07/01/2017	Occupation EVP	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Grass					
Address 1129 Hampton Hall Dr NE					
Address2					
City Brookhaven					
State GA					Zip 30319-1911
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Noble			Description
First Name / Business Name Larry	Date 09/05/2017	Occupation Self Employed	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Hanes					
Address 2434 Gresham Rd SE					
Address2 Ste H					
City Atlanta					
State GA					Zip 30316-4130
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed			Description
First Name / Business Name Paul	Date 07/01/2017	Occupation Painter	<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  2017	Cash Amt. \$200.00	Est. Value \$0.00
Last Name McPherson					
Address 117 MacDonough St					
Address2 Brooklyn					
City Brooklyn					
State NY					Zip 11216-2501
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self			Description

**Itemized Contribution Page Total**

\$700.00

\$0.00



# 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 / Business Name Norrene J	Date 09/30/2017	Occupation Small business owner	<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  2017	Cash Amt. \$1,600.00	Est. Value \$0.00	
Last Name Duffy						
Address 4810 Harris Trl						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Red Bridge Consulting			Description	
City Atlanta						
State GA						Zip 30327-4412
Aff. Comm.						
First Name / Business Name Carl L.	Date 09/27/2017	Occupation Real Estate Developer	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00	
Last Name Powell						
Address 13170 Addison Rd						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Integral			Description	
City Roswell						
State GA						Zip 30075-6819
Aff. Comm.						
First Name / Business Name FEIJI	Date 09/30/2017	Occupation Telecom Specialist	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name MCKAY						
Address 1911 GRAYSON PARKWAY						
Address2 SUITE 8 #149	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer AT&T			Description	
City Grayson						
State GA						Zip 30017-1178
Aff. Comm.						

Itemized Contribution Page Total

\$1,950.00

\$0.00

## 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 / Business Name Janet Sue	Date 08/28/2017	Occupation Nurse	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00	
Last Name Berry					Description	
Address 905 Bernina Ave NE						
Address2 Ste A	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self employed				
City Atlanta						
State GA						Zip 30307-8601
Aff. Comm.						
First Name / Business Name Bayram	Date 08/22/2017	Occupation Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00	
Last Name Coskun					Description	
Address 3681 N Decatur Rd						
Address2 Apt M10	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Cafe agora				
City Decatur						
State GA						Zip 30032-1017
Aff. Comm.						
First Name / Business Name Demetrius	Date 08/23/2017	Occupation International Flight Attendant	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Hall					Description	
Address 3388 Rock Creek Dr						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Omni Air International Airlines				
City Rex						
State GA						Zip 30273-2451
Aff. Comm.						

Itemized Contribution Page Total

\$850.00

\$0.00

## 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 / Business Name Gregg	Date 09/17/2017	Occupation Senior Vice President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Lunceford						
Address 3123 Hedgerow Ln						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Mesirow Financial			Description	
City Homewood						
State IL						Zip 60430-2830
Aff. Comm.						
First Name / Business Name Barbara C	Date 09/29/2017	Occupation retired	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00	
Last Name Meyer						
Address 75 Ponce De Leon Ave NE						
Address2 Apt 902	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer retired			Description	
City Atlanta						
State GA						Zip 30308-1997
Aff. Comm.						
First Name / Business Name Roberto	Date 08/29/2017	Occupation Businesses development	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Young						
Address 3130 Esplanade Cir SW						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Ncr			Description	
City Atlanta						
State GA						Zip 30311-4221
Aff. Comm.						

**Itemized Contribution Page Total**

\$700.00

\$0.00

# 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 / Business Name Cascade Corners	Date 09/05/2017	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 type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,400.00	Est. Value \$0.00			
Last Name								
Address 3419 Cascade Rd,								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer	<input type="checkbox"/> Run-Off Special Primary		Description	
City Atlanta								
State GA								Zip 30311-3637
Aff. Comm.								
First Name / Business Name Bayram	Date 09/27/2017	Occupation  Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$100.00	Est. Value \$0.00			
Last Name Coskun								
Address 3681 N Decatur Rd								
Address2 Apt M10		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Cafe agora	<input type="checkbox"/> Run-Off Special Primary		Description	
City Decatur								
State GA								Zip 30032-1017
Aff. Comm.								
First Name / Business Name G Galore Phase 2 INC	Date 07/03/2017	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 type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,400.00	Est. Value \$0.00			
Last Name								
Address 2625 Piedmont Rd NE								
Address2 Ste 56-332		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer	<input type="checkbox"/> Run-Off Special Primary		Description	
City Atlanta								
State GA								Zip 30324-3086
Aff. Comm.								

**Itemized Contribution Page Total**

\$2,900.00

\$0.00

# 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 / Business Name Wendy	Date 07/01/2017	Occupation Political Strategist	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Davis					
Address 19 Vocational Dr SW					
Address2					
City Rome					
State GA					Zip 30161-6795
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self			Description
First Name / Business Name Natalie	Date 08/09/2017	Occupation Organizer	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Foster					
Address 441 37th St					
Address2					
City Oakland					
State CA					Zip 94609-2812
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Natalie Foster			Description
First Name / Business Name Barbara C	Date 07/31/2017	Occupation retired	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Meyer					
Address 75 Ponce De Leon Ave NE					
Address2 Apt 902					
City Atlanta					
State GA					Zip 30308-1997
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer retired			Description

**Itemized Contribution Page Total**

\$1,100.00

\$0.00

## 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 / Business Name Jianjun	Date 09/25/2017	Occupation Jc trading Inc	<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  2017	Cash Amt. \$2,600.00	Est. Value \$0.00	
Last Name Chen						
Address 2159 Mission View Dr						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Owner			Description	
City Lawrenceville						
State GA						Zip 30043-1710
Aff. Comm.						
First Name / Business Name Doddy	Date 07/01/2017	Occupation Accountant	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Ward						
Address PO Box 2962						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer M & S Homecare Services			Description	
City Duluth						
State GA						Zip 30096-0051
Aff. Comm.						
First Name / Business Name John	Date 08/18/2017	Occupation President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00	
Last Name Lundeen						
Address 3715 Northside Pkwy NW						
Address2 Bldg 400-100	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Coro Realty Advisors, LLC			Description	
City Atlanta						
State GA						Zip 30327-2853
Aff. Comm.						

**Itemized Contribution Page Total**

\$3,700.00

\$0.00

## 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 / Business Name Ben	Date 07/01/2017	Occupation Record producer	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Allen					
Address 858 Ashland Ave NE					
Address2					
City Atlanta					
State GA					Zip 30307-2423
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self employed			Description
First Name / Business Name John	Date 07/22/2017	Occupation Real estate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$200.00	Est. Value \$0.00
Last Name Morrison					
Address 1632 Ponce De Leon Ave NE					
Address2					
City Atlanta					
State GA					Zip 30307-1680
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed Morrison Properties, inc.			Description
First Name / Business Name RODERICK	Date 09/29/2017	Occupation ATTORNEY/PHYSICIAN	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name EDMOND					
Address 344 Woodward Ave SE					
Address2					
City Atlanta					
State GA					Zip 30312-2240
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer EDMOND, LINDAY & HOFFLER, LLP			Description

**Itemized Contribution Page Total**

\$1,700.00

\$0.00

## 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 / Business Name Mitchell A	Date 07/27/2017	Occupation Principal	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00			
Last Name Martin								
Address 167 Trinity Ave SW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Martin Harps Sypho			Description	
City Atlanta								
State GA								Zip 30303-3648
Aff. Comm.								
First Name / Business Name Sam S.	Date 07/14/2017	Occupation Certified Public Accountant	<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  2017	Cash Amt. \$2,600.00	Est. Value \$0.00			
Last Name Lee								
Address 7705 Sarahs Meadow Ct								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Windham Brannon			Description	
City Suwanee								
State GA								Zip 30024-8640
Aff. Comm.								
First Name / Business Name Evelyn	Date 07/28/2017	Occupation Retired	<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  2017	Cash Amt. \$20.00	Est. Value \$0.00			
Last Name Hall								
Address 1456 Pinehurst Dr SW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Retired			Description	
City Atlanta								
State GA								Zip 30311-3448
Aff. Comm.								

**Itemized Contribution Page Total**

\$3,620.00

\$0.00



## 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 / Business Name Stanley	Date 09/30/2017	Occupation Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00	
Last Name Foster						
Address 260 Peachtree St NW						
Address2 Ste 2000	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Hollowell Foster&Herring, P.C.			Description	
City Atlanta						
State GA						Zip 30303-1239
Aff. Comm.						
First Name / Business Name Kamal	Date 08/30/2017	Occupation Self employed	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Nufarov						
Address 444 Highland Ave NE						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self employed			Description	
City Atlanta						
State GA						Zip 30312-1301
Aff. Comm.						
First Name / Business Name Matthew	Date 09/28/2017	Occupation Real estate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00	
Last Name Short						
Address 481 George St						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self			Description	
City New Haven						
State CT						Zip 06511-5403
Aff. Comm.						

**Itemized Contribution Page Total**

\$1,100.00

\$0.00

# 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 / Business Name Egypt	Date 07/02/2017	Occupation Real Estate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00		
Last Name Sherrod Real Estate Group					Description		
Address 1400 Veterans Memorial Hwy SE							
Address2 Ste 134-389							
City Mableton							
State GA							
Zip 30126-2945					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Egypt Sherrod Real Estate	
Aff. Comm.							
First Name / Business Name Blessin	Date 09/24/2017	Occupation Senior Case Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00			Est. Value \$0.00
Last Name Mccoy							Description
Address 135 N River Dr							
Address2							
City Sandy Spgs							
State GA							
Zip 30350-1906					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Heritage Personal Injury Firm	
Aff. Comm.							
First Name / Business Name Maureen	Date 08/30/2017	Occupation Nurse	<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  2017	Cash Amt. \$1,000.00			Est. Value \$0.00
Last Name Lobb							Description
Address 3414 Peachtree Rd NE							
Address2 Ste 1200							
City Atlanta							
State GA							
Zip 30326-1114					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Emory School of Nursing	
Aff. Comm.							

**Itemized Contribution Page Total**

\$2,250.00

\$0.00

# 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 / Business Name Bertram	Date 09/27/2017	Occupation Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Levy					
Address 4700 Harris Trl					
Address2					
City Atlanta					
State GA					Zip 30327-4410
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Arnall Golden Gregory LLP			Description
First Name / Business Name Charles	Date 07/03/2017	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Lively					
Address 1705 Virginia Ave					
Address2					
City Atlanta					
State GA					Zip 30337-2013
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer College Perk, LLC			Description
First Name / Business Name Richard	Date 09/07/2017	Occupation Broker	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Bowers					
Address 6 Ascot Mnr					
Address2					
City Atlanta					
State GA					Zip 30327-4246
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Richard Bowers Co.			Description

**Itemized Contribution Page Total**

\$1,600.00

\$0.00

# 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 / Business Name Myles Greene	Date 09/20/2017	Occupation Retired	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Smith					
Address 3747 Peachtree Rd NE					
Address2 Apt 1802	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired			Description
City Atlanta					
State GA				Zip 30319-1367	
Aff. Comm.					
First Name / Business Name Gary	Date 07/01/2017	Occupation Developer	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Brock					
Address 3533 Roxboro Rd NE					
Address2 Unit 5	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Traditions Links, LLC			Description
City Atlanta					
State GA				Zip 30326-3290	
Aff. Comm.					
First Name / Business Name David	Date 09/19/2017	Occupation Consultant	<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  2017	Cash Amt. \$300.00	Est. Value \$0.00
Last Name Nichols					
Address 1408 S Emerald St					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed			Description
City Chicago					
State IL				Zip 60607-4440	
Aff. Comm.					

**Itemized Contribution Page Total**

\$850.00

\$0.00

# 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 / Business Name D HADDON	Date 09/29/2017	Occupation Retired	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00		
Last Name FOSTER II							
Address 155 Stewart Dr							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Retired			
City Atlanta							
State GA							Zip 30342-1907
Aff. Comm.							
First Name / Business Name Kenneth M	Date 09/30/2017	Occupation Lawyer	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00		
Last Name Neighbors							
Address 35 Randolph St NE							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Greenberg Traurig, LLP			
City Atlanta							
State GA							Zip 30312-1928
Aff. Comm.							
First Name / Business Name Venkatesh	Date 08/07/2017	Occupation Systems Engineer	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00		
Last Name Babu							
Address 444 Highland Ave NE							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer TCS Ltd			
City Atlanta							
State GA							Zip 30312-1301
Aff. Comm.							

Itemized Contribution Page Total

\$850.00

\$0.00

# 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 / Business Name Brad	Date 07/09/2017	Occupation Banker	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Watkins					
Address 1360 Paces Forest Dr NW					
Address2					
City Atlanta					
State GA					Zip 30327-2236
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer State Bank			
First Name / Business Name Area 51 Presents LLC	Date 09/29/2017	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name					
Address 1103 Clifton Rd NE					
Address2					
City Atlanta					
State GA					Zip 30307-1229
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			
First Name / Business Name Lydia Mitcham	Date 08/30/2017	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Meredith					
Address 1301 McGill Park Ave NE					
Address2 Unit A					
City Atlanta					
State GA					Zip 30312-4218
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Lydia M Meredith, Inc			

**Itemized Contribution Page Total**

\$2,500.00

\$0.00

# 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 / Business Name George	Date 09/23/2017	Occupation Retired	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name N					
Address 460 Peyton Rd SW					
Address2					
City Atlanta					
State GA					Zip 30311-2165
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired			
First Name / Business Name Kenneth D	Date 09/23/2017	Occupation Self Employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Driggs					
Address PO Box 1687					
Address2					
City Atlanta					
State GA					Zip 30301-1687
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self employed			
First Name / Business Name Julie	Date 09/03/2017	Occupation Senior Account Executive	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Hairston					
Address 1028 Berne St SE					
Address2					
City Atlanta					
State GA					Zip 30316-1808
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer ABOA			

**Itemized Contribution Page Total**

\$700.00

\$0.00

# 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 / Business Name Jacqueline	Date 09/29/2017	Occupation retired educator	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00		
Last Name Brown					Description		
Address 3676 Tampa Trl SW							
Address2							
City Atlanta							
State GA							
Zip 30331-5308					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired	
Aff. Comm.							
First Name / Business Name Center for plastic surgery inc	Date 07/07/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$2,600.00			Est. Value \$0.00
Last Name							Description
Address 5 Pointe Ridge Dr							
Address2 Center for plastic surgery inc.							
City Atlanta							
State GA							
Zip 30328-2755					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	
Aff. Comm.							
First Name / Business Name Law at Last inc	Date 09/17/2017	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$200.00			Est. Value \$0.00
Last Name							Description
Address 2023 Hickory Road Suite 102							
Address2							
City Homewood							
State IL							
Zip 60430-2122					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	
Aff. Comm.							

**Itemized Contribution Page Total**

\$3,300.00

\$0.00



# 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 / Business Name G Galore Phase 2 INC	Date 07/03/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$2,600.00	Est. Value \$0.00	
Last Name					Description	
Address 2625 Piedmont Rd NE						
Address2 Ste 56-332	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer				
City Atlanta						
State GA						Zip 30324-3086
Aff. Comm.						
First Name / Business Name Scott	Date 08/03/2017	Occupation  Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00	
Last Name Wandstrat					Description	
Address 121 Ansley St						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Arnall Golden Gregory LLP				
City Decatur						
State GA						Zip 30030-5211
Aff. Comm.						
First Name / Business Name Herbert	Date 09/21/2017	Occupation  Barber	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Williams					Description	
Address PO Box 854						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Afro-Disiac Inc.				
City Atlanta						
State GA						Zip 30301-0854
Aff. Comm.						

**Itemized Contribution Page Total**

\$3,200.00

\$0.00

# 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 / Business Name FEIJI	Date 08/29/2017	Occupation Telecom Specialist	<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  2017	Cash Amt. \$80.00	Est. Value \$0.00
Last Name MCKAY					
Address 1911 GRAYSON PARKWAY	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer AT&T			Description
Address2 SUITE 8 #149					
City Grayson					
State GA					
Zip 30017-1178					
Aff. Comm.					
First Name / Business Name Sheri S.	Date 07/31/2017	Occupation Attorney	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$300.00	Est. Value \$0.00
Last Name Labovitz					
Address 5655 Glen Errol Rd	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self			Description
Address2					
City Atlanta					
State GA					
Zip 30327-4853					
Aff. Comm.					
First Name / Business Name Tara	Date 08/25/2017	Occupation Publicist	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Murphy					
Address 1040 Boulevard SE	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer 360 Media, Inc.			Description
Address2 Ste C					
City Atlanta					
State GA					
Zip 30312-3812					
Aff. Comm.					

**Itemized Contribution Page Total**

\$880.00

\$0.00

## 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 / Business Name Clifton WAYNE	Date 08/05/2017	Occupation Architect	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00	
Last Name Jones						
Address 5 Krog St NE						
Address2 Unit C	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> Inkind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer MSTSD			Description	
City Atlanta						
State GA						Zip 30307-2488
Aff. Comm.						

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/03/2017	Occupation	Transportation	\$19.65
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/05/2017	Occupation	Transporation	\$7.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 09/29/2017	Occupation	Transaction Fee	\$2,350.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$2,376.65

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name APPLE	Date 08/31/2017	Occupation	Software	\$25.99
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name Charles	Date 08/12/2017	Occupation Information Requested	Supplies	\$700.00
Last Name Cullen	<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 Information Requested		
Address 269 Ralph David Abernathy Blvd SW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/14/2017	Occupation	Transporation	\$7.59
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$733.58

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name JR CRICKETS	Date 08/28/2017	Occupation	Team Meeting	\$50.95
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	Employer		
Address 129 North Ave NE				
Address2				
City Atlanta				
State GA				
First Name Chalmers Pak Burch & Adams LLC	Date 07/20/2017	Occupation	Legal	\$2,102.74
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	Employer		
Address 5805 State Bridge Rd				
Address2 # G77				
City Duluth				
State GA				
First Name Uber Technologies	Date 08/11/2017	Occupation	Transporation	\$7.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$2,160.94

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name NGP Software, Inc	Date 08/02/2017	Occupation	Software	\$225.00
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	Employer		
Address 595 Piedmont Ave NE				
Address2 Ste 320-222				
City Atlanta				
State GA				
Zip 30308-2478				
First Name Wells Fargo Bank	Date 07/18/2017	Occupation	Transaction Fee	\$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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name Uber Technologies	Date 08/28/2017	Occupation	Transporation	\$15.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$4,240.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/11/2017	Occupation	Transaction Fee	\$2,000.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 07/03/2017	Occupation	Transportation	\$6.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name H&F Burger & Hop's Chicken	Date 09/22/2017	Occupation	Team Meeting	\$36.18
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$2,043.13

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/15/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name APPLE	Date 07/19/2017	Occupation	Software	\$6.99
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
Zip 95014-2084				
First Name Uber Technologies	Date 09/27/2017	Occupation	Transportation	\$10.34
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$19.33

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Val D	Date 07/20/2017	Occupation Uber	Canvassing	\$108.00
Last Name Glover	<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 Driver		
Address 4908 Windmill Ln				
Address2				
City Ellenwood				
State GA				
First Name Zoom Printer Worldwide Inc	Date 07/31/2017	Occupation	Printing	\$978.00
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 07/25/2017	Occupation	Transaction Fee	\$210.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$1,296.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name MISO IZAKAYA ATLANTA GA	Date 09/27/2017	Occupation	Team Meeting	\$66.00
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	Employer		
Address 619 Edgewood Ave SE				
Address2 Ste 200				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/29/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Mediterranea	Date 07/25/2017	Occupation	Team Meeting	\$63.00
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	Employer		
Address 332 Ormond St SE				
Address2				
City Atlanta				
State GA				

Page Total \$131.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Delta Airlines		Date 09/18/2017	Occupation	Airline Ticket	\$648.40
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	Employer		
Address PO Box 20706					
Address2					
City Atlanta					
State GA	Zip 30320-6001				
First Name Tasty China Jia		Date 07/31/2017	Occupation	Donor Meeting	\$33.00
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	Employer		
Address 675 Ponce De Leon Ave NE					
Address2 Ste N135					
City Atlanta					
State GA	Zip 30308-1884				
First Name Uber Technologies		Date 08/03/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St					
Address2 Fl 14					
City San Francisco					
State CA	Zip 94103-1365				

Page Total \$682.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Campaign Contribution Disclosure Report**  
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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name H&F Burger & Hop's Chicken	Date 07/26/2017	Occupation	Donor Meeting	\$46.10
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name Grand Central Star Cafe	Date 09/24/2017	Occupation	Event Supplies	\$332.47
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	Employer		
Address 463 Lexington Ave				
Address2				
City New York				
State NY				
First Name Uber Technologies	Date 07/10/2017	Occupation	Transportation	\$6.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$384.57

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/08/2017	Occupation	Transaction Fee	\$1,500.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name MAKIMONO	Date 09/11/2017	Occupation	Team Meeting	\$17.00
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	Employer		
Address Krog Street Market, 99 Krog St NE Suite X				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/08/2017	Occupation	Transporation	\$15.59
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$1,532.59

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/04/2017	Occupation	Transportation	\$7.65
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name United Airlines	Date 09/25/2017	Occupation	Transportation	\$396.40
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	Employer		
Address 233 S Wacker Dr				
Address2				
City Chicago				
State IL				
Zip 60606-7147				
First Name Cassandra	Date 09/22/2017	Occupation Information Requested	Field Operations	\$875.00
Last Name Odum	<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 Information Requested		
Address 572 Edgewood Ave SE				
Address2 Unit 118				
City Atlanta				
State GA				
Zip 30312-1994				

Page Total \$1,279.05

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Extra Space Storage	Date 09/13/2017	Occupation	Campaign Supplies Storage	\$174.00
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	Employer		
Address 660 Edgewood Ave SE				
Address2				
City Atlanta				
State GA				
Zip 30312-1934				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$8.22
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 09/13/2017	Occupation	Transaction Fee	\$30.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				

Page Total \$212.22

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/06/2017	Occupation	Transportation	\$20.21
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Uber Technologies	Date 07/21/2017	Occupation	Transporation	\$15.08
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Uber Technologies	Date 09/11/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$37.29

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name ACTBLUE	Date 09/28/2017	Occupation	Transaction Fee	\$10.00
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	Employer		
Address 366 Summer St				
Address2				
City Somerville				
State MA				
First Name Uber Technologies	Date 09/19/2017	Occupation	Transporation	\$22.45
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Whole Foods Market-10196	Date 08/14/2017	Occupation	Event Supplies	\$9.81
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	Employer		
Address 650 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$42.26

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Quick Pick	Date 08/24/2017	Occupation	Event Supplies	\$44.73
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	Employer		
Address 215 Forsyth St SW				
Address2				
City Atlanta				
State GA				
First Name Valena	Date 09/22/2017	Occupation Information Requested	Data Entry	\$600.00
Last Name Catron	<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 Information Requested		
Address 1867 Grove Way				
Address2				
City Hampton				
State GA				
First Name Uber Technologies	Date 07/12/2017	Occupation	Transportation	\$10.18
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$654.91

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/23/2017	Occupation	Transportation	\$8.85
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Codename, LLC	Date 07/03/2017	Occupation	Campaign Support	\$4,200.00
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	Employer		
Address 5206 Jameson Pass				
Address2				
City Alpharetta				
State GA				
First Name Uber Technologies	Date 07/25/2017	Occupation	Transportation	\$7.37
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$4,216.22

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/20/2017	Occupation	Transportation	\$7.42
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Spiller Park Coffee	Date 08/04/2017	Occupation	Team Meeting	\$8.67
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
Zip 30308-1884				
First Name A Mano	Date 07/26/2017	Occupation	Team Meeting	\$148.00
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	Employer		
Address 587 Ralph McGill Blvd NE				
Address2				
City Atlanta				
State GA				
Zip 30312-1110				

Page Total \$164.09

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Trisha	Date 09/28/2017	Occupation Receiving -Forklift	Field Operations	\$200.00
Last Name Thornton	<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 Macy Logistics		
Address 2023 Sandtown Rd SW				
Address2				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 08/21/2017	Occupation	Transaction Fee	\$260.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 09/01/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$462.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Zoom Printer Worldwide Inc	Date 07/13/2017	Occupation	Printing	\$1,298.75
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
First Name City of Atlanta	Date 08/28/2017	Occupation	Parking	\$1.75
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	Employer		
Address 55 Trinity Ave SW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/11/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$1,302.50

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Google Services	Date 09/05/2017	Occupation	Digital Services	\$100.00
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	Employer		
Address 1600 Amphitheatre Pkwy				
Address2				
City Mountain View				
State CA				
First Name Wells Fargo Bank	Date 08/24/2017	Occupation	Transaction Fee	\$360.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Juniperus	Date 09/09/2017	Occupation	Communications/Media services	\$55.45
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	Employer		
Address 275 Alaska Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$515.45

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Allianz Travel Insurance	Date 09/18/2017	Occupation	Travel Insurance	\$84.30
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	Employer		
Address 9950 Mayland Dr				
Address2				
City Richmond				
State VA				
First Name Uber Technologies	Date 07/28/2017	Occupation	Transporation	\$7.26
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/25/2017	Occupation	Transporation	\$10.38
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$101.94

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name CBS Radio	Date 09/08/2017	Occupation	Field Operations	\$2,175.00
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	Employer		
Address				
Address2				
City				
State      Zip				
First Name Wells Fargo Bank	Date 08/29/2017	Occupation	Transaction Fee	\$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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State      Zip OR      97228-6995				
First Name Lillian	Date 09/03/2017	Occupation Information Requested	Communications/Media services	\$700.00
Last Name Govus	<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 Information Requested		
Address PO Box 160135				
Address2				
City Atlanta				
State      Zip GA      30316-1003				

Page Total      \$3,375.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name      Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/05/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Image Works	Date 09/09/2017	Occupation	Campaign Materials	\$749.75
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	Employer		
Address 6649 Peachtree Industrial Blvd				
Address2 Ste M				
City Peachtree Corners				
State GA				
First Name Uber Technologies	Date 08/03/2017	Occupation	Transportation	\$7.46
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$759.21

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
<div style="border-bottom: 1px solid black; padding-bottom: 2px;">First Name Uber Technologies</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Last Name</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address 1455 Market St</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address2 Fl 14</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">City San Francisco</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; padding-bottom: 2px;"> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">State CA</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Zip 94103-1365</div> </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Date 08/22/2017</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;"> <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         </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Occupation</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Employer</div>	Transporation	\$2.00
<div style="border-bottom: 1px solid black; padding-bottom: 2px;">First Name Farm to Ladle</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Last Name</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address 675 Ponce De Leon Ave NE</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address2</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">City Atlanta</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; padding-bottom: 2px;"> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">State GA</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Zip 30308-1884</div> </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Date 07/17/2017</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;"> <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         </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Occupation</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Employer</div>	Team Meeting	\$24.93
<div style="border-bottom: 1px solid black; padding-bottom: 2px;">First Name MAILCHIMP</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Last Name</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address 675 Ponce De Leon Ave NE</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address2 Ste 5000</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">City Atlanta</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; padding-bottom: 2px;"> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">State GA</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Zip 30308-1884</div> </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Date 07/10/2017</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;"> <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         </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Occupation</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Employer</div>	Digital Service	\$65.00

Page Total  \$91.93

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name  Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/05/2017	Occupation	Transaction Fee	\$1,400.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Ernest	Date 09/29/2017	Occupation Information Requested	Field Operations	\$1,000.00
Last Name Boston	<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 Information Requested		
Address 2800 Camp Creek Pkwy				
Address2 C-8				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 07/06/2017	Occupation	Transaction Fee	\$7,738.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$10,138.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/06/2017	Occupation	Transportation	\$7.65
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Uber Technologies	Date 09/15/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name ARDENS GARDEN	Date 09/19/2017	Occupation	Transportation	\$188.02
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	Employer		
Address 267 Marietta St NW				
Address2				
City Atlanta				
State GA				
Zip 30313-1626				

Page Total \$197.67

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/22/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Metro PCS	Date 09/25/2017	Occupation	Software	\$180.00
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	Employer		
Address 100 Peachtree St NW				
Address2 Ste 2450				
City Atlanta				
State GA				
Zip 30303-1936				
First Name Zoom Printer Worldwide Inc	Date 09/06/2017	Occupation	Printing	\$1,467.00
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
Zip 30339-3372				

Page Total \$1,649.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name HUMAN RIGHTS CAMPAIGN WA	Date 09/21/2017	Occupation	Event Support	\$100.00
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	Employer		
Address 1640 Rhode Island Ave NW				
Address2				
City Washington				
State DC				
First Name Wells Fargo Bank	Date 07/03/2017	Occupation	Transaction Fee	\$442.05
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Prima Atlanta Printer	Date 07/28/2017	Occupation	Campaign Materials	\$744.73
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	Employer		
Address 191 14th St NW				
Address2				
City Atlanta				
State GA				

Page Total \$1,286.78

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies Last Name Address 1455 Market St Address2 Fl 14 City San Francisco State CA      Zip 94103-1365	Date 07/18/2017 <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	Transportation	\$38.16
First Name H&F Burger & Hop's Chicken Last Name Address 675 Ponce De Leon Ave NE Address2 City Atlanta State GA      Zip 30308-1884	Date 07/17/2017 <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	Team Meeting	\$6.58
First Name TASSIL'S RAW REALITY Last Name Address 1059 Ralph David Abernathy Blvd SW Address2 City Atlanta State GA      Zip 30310-1825	Date 08/28/2017 <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	Team Meeting	\$40.07

Page Total                     \$84.81                    

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/18/2017	Occupation	Transportation	\$22.17
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Baker Taxx and Insurance INC	Date 09/15/2017	Occupation	Office Space	\$1,000.00
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	Employer		
Address				
Address2				
City				
State				
Zip				
First Name Uber Technologies	Date 08/30/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$1,024.17

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
**Campaign Contribution Disclosure Report**  
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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/13/2017	Occupation	Transportation	\$6.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 08/04/2017	Occupation	Transaction Fee	\$650.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name MEETEDGAR	Date 08/17/2017	Occupation	Digital Services	\$49.00
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	Employer		
Address 2211 N 1st St				
Address2				
City San Jose				
State CA				
Zip 95131-2021				

Page Total \$705.95

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Staples	Date 07/31/2017	Occupation	Supplies	\$449.20
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	Employer		
Address 650 Ponce De Leon NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/08/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/10/2017	Occupation	Transaction Fee	\$70.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$521.20

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/20/2017	Occupation	Transaction Fee	\$300.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 08/31/2017	Occupation	Transporation	\$7.69
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/11/2017	Occupation	Transporation	\$13.44
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$321.13

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/10/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Prima Atlanta Printer	Date 07/31/2017	Occupation	Printing	\$50.00
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	Employer		
Address 191 14th St NW				
Address2				
City Atlanta				
State GA				
Zip 30318-7827				
First Name Whole Foods Market-10196	Date 09/22/2017	Occupation	Donor Meeting	\$24.24
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	Employer		
Address 650 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
Zip 30308-1804				

Page Total \$76.24

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/23/2017	Occupation	Transportation	\$8.87
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 09/26/2017	Occupation	Transaction Fee	\$250.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name Hilton International	Date 09/20/2017	Occupation	Travel Accommodations	\$979.80
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	Employer		
Address 720 S Michigan Ave				
Address2				
City Chicago				
State IL				
Zip 60605-3428				

Page Total \$1,238.67

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/13/2017	Occupation	Transportation	\$5.88
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Kroger Ponce	Date 09/14/2017	Occupation	Office Supplies	\$818.35
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	Employer		
Address Ponce De Leon				
Address2				
City Atlanta				
State GA				
Zip 30306				
First Name APPLE	Date 09/05/2017	Occupation	Software	\$35.67
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
Zip 95014-2084				

Page Total \$859.90

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/25/2017	Occupation	Transportation	\$12.12
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Biltong Bar	Date 07/11/2017	Occupation	Donor Meeting	\$23.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2 # NE152				
City Atlanta				
State GA				
First Name Poor Calvins	Date 09/15/2017	Occupation	Donor Meeting	\$74.00
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	Employer		
Address 510 Piedmont Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$109.12

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Farm to Ladle	Date 07/12/2017	Occupation	Team Meeting	\$24.75
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/25/2017	Occupation	Transporation	\$9.30
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/14/2017	Occupation	Transporation	\$7.65
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$41.70

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name KEN'S EVENTS	Date 09/25/2017	Occupation	Event Supplies	\$249.31
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	Employer		
Address 6981 Peachtree Industrial Blvd				
Address2				
City Norcross				
State GA				
First Name APPLE	Date 09/05/2017	Occupation	Software	\$44.82
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name Uber Technologies	Date 08/11/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$296.13

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Shoba and the Octopus Bar  Last Name  Address 560 Gresham Ave SE  Address2  City Atlanta  State GA      Zip 30316-1961	Date 09/05/2017  <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	Team Meeting	\$104.40
First Name NGP Software, Inc  Last Name  Address 595 Piedmont Ave NE  Address2 Ste 320-222  City Atlanta  State GA      Zip 30308-2478	Date 09/05/2017  <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	Software	\$225.00
First Name Georgia restaurant association  Last Name  Address 260 Peachtree St NW  Address2 Ste 1901  City Atlanta  State GA      Zip 30303-1202	Date 09/05/2017  <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	Event Support	\$300.00

Page Total \$629.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name DRUG POLICY ALLIANCE	Date 09/11/2017	Occupation	Event Support	\$15.00
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	Employer		
Address 131 W 33rd St				
Address2 Fl 15				
City New York				
State NY				
First Name Uber Technologies	Date 08/28/2017	Occupation	Transporation	\$52.57
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 07/11/2017	Occupation	Transaction Fee	\$8,450.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$8,517.57

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/03/2017	Occupation	Transportation	\$6.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name APPLE	Date 07/31/2017	Occupation	Software	\$19.98
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name Uber Technologies	Date 09/15/2017	Occupation	Transporation	\$8.50
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$35.43

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name BaughmanMerrill	Date 09/07/2017	Occupation	Campaign Supplies	\$6,739.00
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	Employer		
Address 1592 Union St				
Address2 Ste 401				
City San Francisco				
State CA				
Zip 94123-4505				
First Name Dana	Date 07/20/2017	Occupation Driver	Canvassing	\$108.00
Last Name White	<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 Uber		
Address 700 Park Regency Pl NE				
Address2 Apt 1201				
City Atlanta				
State GA				
Zip 30326-4212				
First Name Zoom Printer Worldwide Inc	Date 07/31/2017	Occupation	Printing	\$520.77
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
Zip 30339-3372				

Page Total \$7,367.77

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/24/2017	Occupation	Transaction Fee	\$55.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR		Zip 97228-6995		
First Name Delta Airlines	Date 09/18/2017	Occupation	Airline Ticket	\$648.40
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	Employer		
Address PO Box 20706				
Address2				
City Atlanta				
State GA		Zip 30320-6001		
First Name Uber Technologies	Date 08/03/2017	Occupation	Transporation	\$6.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA		Zip 94103-1365		

Page Total \$710.35

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/10/2017	Occupation	Transportation	\$30.55
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 08/01/2017	Occupation	Transaction Fee	\$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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name Alan	Date 09/06/2017	Occupation CEO	Research	\$2,405.00
Last Name Secrest	<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 Secrest Strategies		
Address 10065 Groomsbridge Rd				
Address2				
City Alpharetta				
State GA				
Zip 30022-5644				

Page Total \$6,435.55

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/07/2017	Occupation	Transaction Fee	\$250.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 08/29/2017	Occupation	Transporation	\$17.55
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name BURSH SUSHI	Date 07/24/2017	Occupation	Team Meeting	\$130.00
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	Employer		
Address 316 Church St				
Address2				
City Decatur				
State GA				

Page Total \$397.55

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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State of Georgia  
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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/08/2017	Occupation	Transporation	\$8.23
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Ring Central	Date 08/23/2017	Occupation	Software	\$65.79
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	Employer		
Address 20 Davis Dr				
Address2				
City Belmont				
State CA				
First Name Uber Technologies	Date 08/04/2017	Occupation	Transporation	\$7.31
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$81.33

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name FACEBOOK	Date 08/01/2017	Occupation	Software	\$108.39
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	Employer		
Address 1 Hacker Way				
Address2				
City Menlo Park				
State CA				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 09/13/2017	Occupation	Transaction Fee	\$70.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$180.39

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/06/2017	Occupation	Transportation	\$7.22
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/11/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name MAILCHIMP	Date 09/08/2017	Occupation	Digital Services	\$50.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2 Ste 5000				
City Atlanta				
State GA				

Page Total \$59.22

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Bellina Alimentari		Date 09/28/2017	Occupation	Team Meeting	\$127.00
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	Employer		
Address 131 Ponce De Leon Ave NE					
Address2 Ponce City Market 675					
City Atlanta					
State GA	Zip 30308-1962				
First Name ACTBLUE		Date 09/28/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address 366 Summer St					
Address2					
City Somerville					
State MA	Zip 02144-3132				
First Name Uber Technologies		Date 09/19/2017	Occupation	Transporation	\$6.00
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	Employer		
Address 1455 Market St					
Address2 Fl 14					
City San Francisco					
State CA	Zip 94103-1365				

Page Total \$233.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Quick Pick	Date 08/21/2017	Occupation	Event Supplies	\$54.15
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	Employer		
Address 215 Forsyth St SW				
Address2				
City Atlanta				
State GA				
First Name Val D	Date 09/13/2017	Occupation Uber	Field Operations	\$96.00
Last Name Glover	<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 Driver		
Address 4908 Windmill Ln				
Address2				
City Ellenwood				
State GA				
First Name UPS Store	Date 08/07/2017	Occupation	Supplies	\$210.00
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	Employer		
Address 925B Peachtree St NE				
Address2				
City Atlanta				
State GA				

Page Total \$360.15

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Ernest	Date 09/22/2017	Occupation Information Requested	Field Operations	\$1,000.00
Last Name Boston	<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 Information Requested		
Address 2800 Camp Creek Pkwy				
Address2 C-8				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/12/2017	Occupation	Transportation	\$7.58
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$1,009.58

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Codename, LLC	Date 08/30/2017	Occupation	Campaign Support	\$5,000.00
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	Employer		
Address 5206 Jameson Pass				
Address2				
City Alpharetta				
State GA		Zip 30022-3037		
First Name Uber Technologies	Date 07/24/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA		Zip 94103-1365		
First Name Uber Technologies	Date 09/20/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA		Zip 94103-1365		

Page Total \$5,003.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Paloma Marketing Group	Date 09/24/2017	Occupation	Supplies	\$377.50
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	Employer		
Address 1306 Saint Nicholas Ave				
Address2				
City New York				
State NY				
First Name Val D	Date 09/28/2017	Occupation Uber	Field Operations	\$80.00
Last Name Glover	<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 Driver		
Address 4908 Windmill Ln				
Address2				
City Ellenwood				
State GA				
First Name City of Atlanta	Date 09/11/2017	Occupation	Parking	\$3.75
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	Employer		
Address 55 Trinity Ave SW				
Address2				
City Atlanta				
State GA				

Page Total \$461.25

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 08/21/2017	Occupation	Transaction Fee	\$2.50
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 09/01/2017	Occupation	Transporation	\$8.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Zoom Printer Worldwide Inc	Date 07/13/2017	Occupation	Printing	\$400.00
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				

Page Total \$410.75

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Don	Date 07/10/2017	Occupation Retired	Canvassing	\$50.00
Last Name Sellers	<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 Retired		
Address 2979 Deleher Ct SE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/26/2017	Occupation	Transporation	\$22.67
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/10/2017	Occupation	Transporation	\$8.58
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$81.25

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Google Services	Date 09/13/2017	Occupation	Digital Services	\$350.00
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	Employer		
Address 1600 Amphitheatre Pkwy				
Address2				
City Mountain View				
State CA				
First Name Spiller Park Coffee	Date 07/24/2017	Occupation	Donor Meeting	\$14.52
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 08/23/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$464.52

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Marckist	Date 09/28/2017	Occupation Not employed	Field Operations	\$80.00
Last Name Carraway	<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 Not employed		
Address 700 Atlanta Ave				
Address2				
City Decatur				
State GA				
First Name Uber Technologies	Date 07/03/2017	Occupation	Transportation	\$34.34
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/05/2017	Occupation	Transporation	\$7.98
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$122.32

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/28/2017	Occupation	Transaction Fee	\$750.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Allianz Travel Insurance	Date 09/25/2017	Occupation	Travel Insurance	\$48.80
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	Employer		
Address 9950 Mayland Dr				
Address2				
City Richmond				
State VA				
First Name Uber Technologies	Date 07/28/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$799.80

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/25/2017	Occupation	Transportation	\$8.66
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name MEETEDGAR	Date 09/17/2017	Occupation	Digital Services	\$49.00
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	Employer		
Address 2211 N 1st St				
Address2				
City San Jose				
State CA				
Zip 95131-2021				
First Name Extra Space Storage	Date 07/13/2017	Occupation	Campaign Supplies Storage	\$174.00
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	Employer		
Address 660 Edgewood Ave SE				
Address2				
City Atlanta				
State GA				
Zip 30312-1934				

Page Total \$231.66

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 08/29/2017	Occupation	Transaction Fee	\$600.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Chevron Foodmart	Date 07/20/2017	Occupation	Gasoline	\$60.01
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	Employer		
Address 371 Boulevard SE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/11/2017	Occupation	Transportation	\$8.84
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$668.85

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
<div>First Name Uber Technologies</div> <div>Last Name</div> <div>Address 1455 Market St</div> <div>Address2 Fl 14</div> <div>City San Francisco</div> <div> <div>State CA</div> <div>Zip 94103-1365</div> </div>	<div>Date 09/05/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Transporation	<div>\$30.27</div> <div style="background-color: #cccccc; height: 100px;"></div>
<div>First Name Uber Technologies</div> <div>Last Name</div> <div>Address 1455 Market St</div> <div>Address2 Fl 14</div> <div>City San Francisco</div> <div> <div>State CA</div> <div>Zip 94103-1365</div> </div>	<div>Date 07/28/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Transporation	<div>\$6.95</div> <div style="background-color: #cccccc; height: 100px;"></div>
<div>First Name Farm to Ladle</div> <div>Last Name</div> <div>Address 675 Ponce De Leon Ave NE</div> <div>Address2</div> <div>City Atlanta</div> <div> <div>State GA</div> <div>Zip 30308-1884</div> </div>	<div>Date 07/31/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Team Meeting	<div>\$20.18</div> <div style="background-color: #cccccc; height: 100px;"></div>

Page Total \$57.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/14/2017	Occupation	Transporation	\$13.37
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/26/2017	Occupation	Transporation	\$88.22
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name SERPAS TRUE FOOD	Date 08/17/2017	Occupation	Team Meeting	\$281.00
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	Employer		
Address 659 Auburn Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$382.59

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Bar Taco	Date 07/11/2017	Occupation	Donor Meeting	\$27.00
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	Employer		
Address 299 N Highland Ave NE				
Address2				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 09/05/2017	Occupation	Transaction Fee	\$706.19
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Baker Taxx and Insurance INC	Date 09/08/2017	Occupation	Office Space	\$1,500.00
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	Employer		
Address				
Address2				
City				
State				

Page Total \$2,233.19

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Mediterranea	Date 07/31/2017	Occupation	Team Meeting	\$40.00
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	Employer		
Address 332 Ormond St SE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/06/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/15/2017	Occupation	Transporation	\$7.82
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$49.82

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name AMAZON MKTPLACE PMTS,AMZN	Date 07/28/2017	Occupation	Office Supplies	\$12.81
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	Employer		
Address PO Box 81226				
Address2				
City Seattle				
State WA				
First Name SouthWest Airlines	Date 08/24/2017	Occupation	Transportation	\$409.96
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	Employer		
Address 2702 Love Field Dr				
Address2				
City Dallas				
State TX				
First Name Uber Technologies	Date 08/22/2017	Occupation	Transporation	\$7.13
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$429.90

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Metro PCS	Date 09/25/2017	Occupation	Software	\$180.00
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	Employer		
Address 100 Peachtree St NW				
Address2 Ste 2450				
City Atlanta				
State GA				
First Name Zoom Printer Worldwide Inc	Date 09/06/2017	Occupation	Printing	\$1,782.00
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
First Name Delta Airlines	Date 09/18/2017	Occupation	Airline Ticket	\$417.40
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	Employer		
Address PO Box 20706				
Address2				
City Atlanta				
State GA				

Page Total \$2,379.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/03/2017	Occupation	Transaction Fee	\$4,625.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 07/18/2017	Occupation	Transporation	\$11.43
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name AGILE CRM	Date 09/21/2017	Occupation	Software	\$149.97
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	Employer		
Address First Floor, Plot No. 8 & 9, Jubilee Enclave,, Opp. HITEX Entrance,				
Address2				
City Hyderabad				
State Te				

Page Total \$4,786.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
<div>First Name Uber Technologies</div> <div>Last Name</div> <div>Address 1455 Market St</div> <div>Address2 Fl 14</div> <div>City San Francisco</div> <div> <div>State CA</div> <div>Zip 94103-1365</div> </div>	<div>Date 09/18/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Transportation	<div>\$2.00</div> <div style="background-color: #cccccc; height: 100px;"></div>
<div>First Name CBS Radio</div> <div>Last Name</div> <div>Address</div> <div>Address2</div> <div>City</div> <div> <div>State</div> <div>Zip</div> </div>	<div>Date 09/27/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Campaign Outreach	<div>\$2,075.00</div> <div style="background-color: #cccccc; height: 100px;"></div>
<div>First Name Uber Technologies</div> <div>Last Name</div> <div>Address 1455 Market St</div> <div>Address2 Fl 14</div> <div>City San Francisco</div> <div> <div>State CA</div> <div>Zip 94103-1365</div> </div>	<div>Date 08/30/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Transportation	<div>\$2.00</div> <div style="background-color: #cccccc; height: 100px;"></div>

Page Total \$2,079.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/13/2017	Occupation	Transportation	\$7.83
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 08/03/2017	Occupation	Transaction Fee	\$550.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name Metro PCS	Date 08/24/2017	Occupation	Software	\$242.07
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	Employer		
Address 100 Peachtree St NW				
Address2 Ste 2450				
City Atlanta				
State GA				
Zip 30303-1936				

Page Total \$799.90

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name CONRAD CHICAGO	Date 09/26/2017	Occupation	Travel Accommodations	\$115.00
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	Employer		
Address 101 E Erie St				
Address2				
City Chicago				
State IL				
First Name Uber Technologies	Date 07/20/2017	Occupation	Transporation	\$7.54
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Staples	Date 08/07/2017	Occupation	Supplies	\$241.23
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	Employer		
Address 650 Ponce De Leon NE				
Address2				
City Atlanta				
State GA				

Page Total \$363.77

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/07/2017	Occupation	Transportation	\$8.12
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/31/2017	Occupation	Transportation	\$8.97
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Chil Media	Date 07/07/2017	Occupation	Photography	\$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	Employer		
Address 144 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$217.09

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 08/09/2017	Occupation	Transaction Fee	\$1,940.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Wells Fargo Bank	Date 09/19/2017	Occupation	Transaction Fee	\$10.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 09/11/2017	Occupation	Transporation	\$6.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$1,956.25

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies  Last Name  Address 1455 Market St  Address2 Fl 14  City San Francisco  State CA      Zip 94103-1365	Date 08/10/2017  <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	Transportation	\$6.00   <div style="background-color: #cccccc; height: 100px;"></div>
First Name Prima Atlanta Printer  Last Name  Address 191 14th St NW  Address2  City Atlanta  State GA      Zip 30318-7827	Date 07/31/2017  <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	Printing	\$694.73   <div style="background-color: #cccccc; height: 100px;"></div>
First Name Whole Foods Market-10196  Last Name  Address 650 Ponce De Leon Ave NE  Address2  City Atlanta  State GA      Zip 30308-1804	Date 09/22/2017  <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	Donor Meeting	\$37.02   <div style="background-color: #cccccc; height: 100px;"></div>

Page Total \$737.75

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Spiller Park Coffee	Date 08/25/2017	Occupation	Donor Meeting	\$13.35
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name GYU-KAKU	Date 09/26/2017	Occupation	Team Meeting	\$129.00
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	Employer		
Address 1380 Atlantic Dr NW				
Address2 Ste 14250				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$144.35

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Bar Taco	Date 07/05/2017	Occupation	Team Meeting	\$62.00
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	Employer		
Address 299 N Highland Ave NE				
Address2				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 09/25/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 09/13/2017	Occupation	Transporation	\$8.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$170.25

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name APPLE	Date 09/05/2017	Occupation	Software	\$42.67
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name A Mano	Date 09/28/2017	Occupation	Team Meeting	\$158.00
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	Employer		
Address 587 Ralph McGill Blvd NE				
Address2				
City Atlanta				
State GA				
First Name H&F Burger & Hop's Chicken	Date 07/11/2017	Occupation	Donor Meeting	\$20.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$220.67

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Poor Calvins	Date 09/18/2017	Occupation	Team Meeting	\$67.97
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	Employer		
Address 510 Piedmont Ave NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/25/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Advocacy Data	Date 09/12/2017	Occupation	Campaign Materials	\$2,625.00
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	Employer		
Address 1629 K St NW				
Address2 Ste 300				
City Washington				
State DC				

Page Total \$2,694.97

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Sotto Sotto Cucina Italiana	Date 09/21/2017	Occupation	Team Meeting	\$123.00
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	Employer		
Address 313 N Highland Ave NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/11/2017	Occupation	Transporation	\$8.33
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name NGP Software, Inc	Date 08/02/2017	Occupation	Software	\$1,650.00
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	Employer		
Address 595 Piedmont Ave NE				
Address2 Ste 320-222				
City Atlanta				
State GA				

Page Total \$1,781.33

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Good Guys Signs	Date 08/14/2017	Occupation	Printing	\$3,500.00
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	Employer		
Address 1032 E Hillsborough Ave				
Address2				
City Tampa				
State FL				
First Name DRUG POLICY ALLIANCE	Date 09/11/2017	Occupation	Event Support	\$45.00
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	Employer		
Address 131 W 33rd St				
Address2 Fl 15				
City New York				
State NY				
First Name Uber Technologies	Date 07/03/2017	Occupation	Transportation	\$17.47
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$3,562.47

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/13/2017	Occupation	Transaction Fee	\$70.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name APPLE	Date 08/04/2017	Occupation	Software	\$25.99
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name Uber Technologies	Date 09/15/2017	Occupation	Transporation	\$8.85
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$104.84

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Morgan	Date 07/20/2017	Occupation Expo Manager	Canvassing	\$108.00
Last Name Stovall	<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 World Congress Center		
Address 4441 Woodbank Ln				
Address2				
City Decatur				
State GA				
First Name Zoom Printer Worldwide Inc	Date 07/31/2017	Occupation	Printing	\$400.00
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 07/21/2017	Occupation	Transaction Fee	\$35.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$543.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Campaign Contribution Disclosure Report**  
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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/29/2017	Occupation	Transportation	\$7.65
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 07/10/2017	Occupation	Transaction Fee	\$2,600.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name TEXACO	Date 07/31/2017	Occupation	Gasoline	\$41.64
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	Employer		
Address 2710 Bouldercrest Rd SE				
Address2				
City Atlanta				
State GA				
Zip 30316-4800				

Page Total \$2,649.29

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/03/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name H&F Burger & Hop's Chicken	Date 08/07/2017	Occupation	Donor Meeting	\$10.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
Zip 30308-1884				
First Name Uber Technologies	Date 09/29/2017	Occupation	Transporation	\$11.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$22.95

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/10/2017	Occupation	Transportation	\$7.94
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 07/31/2017	Occupation	Transaction Fee	\$250.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name Alan	Date 08/22/2017	Occupation CEO	Research	\$20,000.00
Last Name Secrest	<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 Secrest Strategies		
Address 10065 Groomsbridge Rd				
Address2				
City Alpharetta				
State GA				
Zip 30022-5644				

Page Total \$20,257.94

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/07/2017	Occupation	Transaction Fee	\$30.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 08/29/2017	Occupation	Transporation	\$51.11
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/08/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$83.11

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name TASSIL'S RAW REALITY	Date 08/01/2017	Occupation	Team Meeting	\$12.52
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	Employer		
Address 1059 Ralph David Abernathy Blvd SW				
Address2				
City Atlanta				
State GA				
First Name Ring Central	Date 07/24/2017	Occupation	Software	\$65.79
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	Employer		
Address 20 Davis Dr				
Address2				
City Belmont				
State CA				
First Name Uber Technologies	Date 08/04/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$79.31

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name FACEBOOK	Date 08/01/2017	Occupation	Software	\$74.72
Last Name	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund	Employer		
Address 1 Hacker Way	<input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2				
City Menlo Park				
State CA	Zip 94025-1456			
First Name Uber Technologies	Date 08/22/2017	Occupation	Transporation	\$8.29
Last Name	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund	Employer		
Address 1455 Market St	<input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2 Fl 14				
City San Francisco				
State CA	Zip 94103-1365			
First Name Uber Technologies	Date 07/10/2017	Occupation	Transportation	\$10.57
Last Name	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund	Employer		
Address 1455 Market St	<input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2 Fl 14				
City San Francisco				
State CA	Zip 94103-1365			

Page Total                     \$93.58                    

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/12/2017	Occupation	Transaction Fee	\$50.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name MAKIMONO	Date 07/21/2017	Occupation	Team Meeting	\$45.00
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	Employer		
Address Krog Street Market, 99 Krog St NE Suite X				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/11/2017	Occupation	Transporation	\$10.42
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$105.42

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Bread & Butterfly		Date 08/24/2017	Occupation	Team Meeting	\$22.00
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	Employer		
Address 299 Elizabeth Street					
Address2					
City Atlanta					
State GA	Zip 30307				
First Name Codename, LLC		Date 07/31/2017	Occupation	Campaign Support	\$5,000.00
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	Employer		
Address 5206 Jameson Pass					
Address2					
City Alpharetta					
State GA	Zip 30022-3037				
First Name Jessica		Date 09/13/2017	Occupation Not employed	Field Operations	\$96.00
Last Name Wright		<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 Not employed		
Address 700 Atlanta Ave					
Address2					
City Decatur					
State GA	Zip 30030-3047				

Page Total \$5,118.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name United Airlines	Date 09/25/2017	Occupation	Transportation	\$27.00
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	Employer		
Address 233 S Wacker Dr				
Address2				
City Chicago				
State IL				
Zip 60606-7147				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$6.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Uber Technologies	Date 07/24/2017	Occupation	Transportation	\$33.35
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$66.35

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/20/2017	Occupation	Transportation	\$6.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name V's Customs	Date 07/22/2017	Occupation	Transportation	\$1,000.00
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	Employer		
Address				
Address2				
City				
State				
Zip				
First Name Uber Technologies	Date 09/01/2017	Occupation	Transportation	\$7.33
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$1,013.33

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Zoom Printer Worldwide Inc	Date 07/13/2017	Occupation	Printing	\$400.00
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
Zip 30339-3372				
First Name Wells Fargo Bank	Date 08/18/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name Morgan	Date 07/10/2017	Occupation Expo Manager	Canvassing	\$50.00
Last Name Stovall	<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 World Congress Center		
Address 4441 Woodbank Ln				
Address2				
City Decatur				
State GA				
Zip 30034-6341				

Page Total \$550.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Angelo	Date 08/15/2017	Occupation Media Consultant	Supplies	\$350.00
Last Name Fuster	<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 Self-Employed		
Address 1379 The By Way NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/26/2017	Occupation	Transporation	\$6.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/10/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$358.95

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/25/2017	Occupation	Transportation	\$5.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Spiller Park Coffee	Date 09/27/2017	Occupation	Donor Meeting	\$10.72
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
Zip 30308-1884				
First Name Google Services	Date 09/27/2017	Occupation	Digital Services	\$259.42
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	Employer		
Address 1600 Amphitheatre Pkwy				
Address2				
City Mountain View				
State CA				
Zip 94043-1351				

Page Total \$275.14

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 08/22/2017	Occupation	Transaction Fee	\$50.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Morgan	Date 09/28/2017	Occupation Expo Manager	Field Operations	\$120.00
Last Name Stovall	<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 World Congress Center		
Address 4441 Woodbank Ln				
Address2				
City Decatur				
State GA				
First Name City of Atlanta	Date 07/20/2017	Occupation	Parking	\$1.50
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	Employer		
Address 55 Trinity Ave SW				
Address2				
City Atlanta				
State GA				

Page Total \$171.50

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Spiller Park Coffee	Date 07/12/2017	Occupation	Donor Meeting	\$8.31
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name FACEBOOK	Date 07/03/2017	Occupation	Software	\$50.00
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	Employer		
Address 1 Hacker Way				
Address2				
City Menlo Park				
State CA				
First Name Uber Technologies	Date 09/05/2017	Occupation	Transporation	\$9.05
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$67.36

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Kroger Ponce		Date 07/31/2017	Occupation	Office Supplies	\$31.29
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	Employer		
Address Ponce De Leon					
Address2					
City Atlanta					
State GA	Zip 30306				
First Name City of Atlanta		Date 08/22/2017	Occupation	Qualifying fees	\$5,529.00
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	Employer		
Address 55 Trinity Ave SW					
Address2					
City Atlanta					
State GA	Zip 30303-3543				
First Name Uber Technologies		Date 09/14/2017	Occupation	Transporation	\$10.34
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	Employer		
Address 1455 Market St					
Address2 Fl 14					
City San Francisco					
State CA	Zip 94103-1365				

Page Total \$5,570.63

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name APPLE	Date 09/05/2017	Occupation	Software	\$12.57
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name Uber Technologies	Date 09/25/2017	Occupation	Transporation	\$3.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/29/2017	Occupation	Transaction Fee	\$2,600.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$2,615.57

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/11/2017	Occupation	Transportation	\$7.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Uber Technologies	Date 09/05/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Uber Technologies	Date 08/28/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$11.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name GUITAR CENTER #761 ATLAN	Date 09/10/2017	Occupation	Campaign Supplies	\$581.54
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	Employer		
Address 1485 Northeast Expy NE				
Address2				
City Brookhaven				
State GA				
First Name H&F Burger & Hop's Chicken	Date 09/22/2017	Occupation	Team Meeting	\$87.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name Flying Biscuit	Date 08/03/2017	Occupation	Donor Meeting	\$28.48
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	Employer		
Address 3280 Peachtree Rd NE				
Address2 Ste 145				
City Atlanta				
State GA				

Page Total \$697.02

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/28/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/14/2017	Occupation	Transporation	\$18.04
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/26/2017	Occupation	Transporation	\$15.12
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$34.16

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/01/2017	Occupation	Transaction Fee	\$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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Biltong Bar	Date 07/12/2017	Occupation	Donor Meeting	\$23.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2 # NE152				
City Atlanta				
State GA				
First Name Joy	Date 09/08/2017	Occupation Marketing Communications	Campaign Support	\$500.00
Last Name Barnes	<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 Self-employed		
Address 994 Lena St NW				
Address2				
City Atlanta				
State GA				

Page Total \$1,023.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/06/2017	Occupation	Transportation	\$7.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name AMAZON MKTPLACE PMTS,AMZN	Date 07/28/2017	Occupation	Office Supplies	\$496.56
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	Employer		
Address PO Box 81226				
Address2				
City Seattle				
State WA				
Zip 98108-1300				
First Name Uber Technologies	Date 08/22/2017	Occupation	Transportation	\$7.47
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$511.28

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Delta Airlines	Date 09/18/2017	Occupation	Airline Ticket	\$417.40
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	Employer		
Address PO Box 20706				
Address2				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 07/05/2017	Occupation	Transaction Fee	\$1,050.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 07/17/2017	Occupation	Transporation	\$7.11
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$1,474.51

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Juniperus	Date 07/28/2017	Occupation	Photography	\$750.00
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	Employer		
Address 275 Alaska Ave NE				
Address2				
City Atlanta				
State GA				
First Name AGILE CRM	Date 08/21/2017	Occupation	Software	\$149.97
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	Employer		
Address First Floor, Plot No. 8 & 9, Jubilee Enclave,, Opp. HITEX Entrance,				
Address2				
City Hyderabad				
State Te				
First Name Uber Technologies	Date 09/18/2017	Occupation	Transporation	\$15.08
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$915.05

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Joy	Date 07/29/2017	Occupation Marketing Communications	Campaign Outreach	\$500.00
Last Name Barnes	<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 Self-employed		
Address 994 Lena St NW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/30/2017	Occupation	Transporation	\$26.28
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/02/2017	Occupation	Transaction Fee	\$785.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$1,311.28

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/13/2017	Occupation	Transportation	\$7.36
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Metro PCS	Date 08/24/2017	Occupation	Software	\$242.07
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	Employer		
Address 100 Peachtree St NW				
Address2 Ste 2450				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/19/2017	Occupation	Transporation	\$8.93
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$258.36

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Staples	Date 08/07/2017	Occupation	Supplies	\$373.00
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	Employer		
Address 650 Ponce De Leon NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/07/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/19/2017	Occupation	Transporation	\$14.73
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$389.73

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Cassandra	Date 09/15/2017	Occupation Information Requested	Campaign Support	\$525.00
Last Name Odum	<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 Information Requested		
Address 572 Edgewood Ave SE				
Address2 Unit 118				
City Atlanta				
State GA				
First Name Ladorien	Date 09/28/2017	Occupation Not employed	Field Operations	\$120.00
Last Name Head	<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 Not employed		
Address 2023 Sandtown Rd SW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/31/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$647.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/12/2017	Occupation	Transportation	\$6.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/08/2017	Occupation	Transaction Fee	\$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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 09/11/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$508.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/10/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Whole Foods Market-10196	Date 09/21/2017	Occupation	Office Supplies	\$9.81
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	Employer		
Address 650 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name 248 TRINITY AVENUE PARKING LOT	Date 08/21/2017	Occupation	Parking	\$103.00
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	Employer		
Address 248 Trinity Ave., SW				
Address2 Unit 1211				
City Atlanta				
State GA				

Page Total \$114.81

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/22/2017	Occupation	Transaction Fee	\$50.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 07/05/2017	Occupation	Transportation	\$37.67
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/13/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$89.67

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name APPLE	Date 09/06/2017	Occupation	Software	\$22.57
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name Poor Calvins	Date 08/31/2017	Occupation	Team Meeting	\$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	Employer		
Address 510 Piedmont Ave NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/25/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$224.57

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/27/2017	Occupation	Transaction Fee	\$2,600.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name BaughmanMerrill	Date 08/18/2017	Occupation	Campaign Supplies	\$6,739.00
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	Employer		
Address 1592 Union St				
Address2 Ste 401				
City San Francisco				
State CA				
First Name Uber Technologies	Date 07/27/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$9,340.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/11/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Good Guys Signs	Date 08/17/2017	Occupation	Printing	\$1,968.40
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	Employer		
Address 1032 E Hillsborough Ave				
Address2				
City Tampa				
State FL				
First Name DRUG POLICY ALLIANCE	Date 09/11/2017	Occupation	Event Support	\$120.00
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	Employer		
Address 131 W 33rd St				
Address2 Fl 15				
City New York				
State NY				

Page Total \$2,090.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/12/2017	Occupation	Transaction Fee	\$2,600.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 07/03/2017	Occupation	Transportation	\$46.31
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name JR CRICKETS	Date 09/11/2017	Occupation	Event Supplies	\$427.00
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	Employer		
Address 129 North Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$3,073.31

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/14/2017	Occupation	Transportation	\$6.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name APPLE	Date 08/08/2017	Occupation	Software	\$19.99
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name Don	Date 07/20/2017	Occupation Retired	Canvassing	\$132.00
Last Name Sellers	<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 Retired		
Address 2979 Deleher Ct SE				
Address2				
City Atlanta				
State GA				

Page Total \$157.99

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
**Campaign Contribution Disclosure Report**  
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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/20/2017	Occupation	Transaction Fee	\$2,000.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Juniperus	Date 08/08/2017	Occupation	Campaign Support	\$300.00
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	Employer		
Address 275 Alaska Ave NE				
Address2				
City Atlanta				
State GA				
First Name YEAH! BURGER	Date 08/28/2017	Occupation	Team Meeting	\$89.00
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	Employer		
Address 1017 N Highland Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$2,389.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
**Campaign Contribution Disclosure Report**  
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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/29/2017	Occupation	Transportation	\$8.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 07/12/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name TEXACO	Date 08/11/2017	Occupation	Gasoline	\$41.40
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	Employer		
Address 2710 Bouldercrest Rd SE				
Address2				
City Atlanta				
State GA				
Zip 30316-4800				

Page Total \$149.65

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/03/2017	Occupation	Transporation	\$121.34
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/15/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name H&F Burger & Hop's Chicken	Date 08/18/2017	Occupation	Donor Meeting	\$8.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$131.34

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Synapse Advertising, LLC	Date 09/23/2017	Occupation	Advertising	-\$15,190.00
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	Employer		
Address				
Address2				
City				
State				
First Name Uber Technologies	Date 09/28/2017	Occupation	Transporation	\$7.71
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 07/10/2017	Occupation	Transportation	\$8.46
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total -\$15,173.83

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name MISO IZAKAYA ATLANTA GA	Date 08/03/2017	Occupation	Team Meeting	\$63.00
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	Employer		
Address 619 Edgewood Ave SE				
Address2 Ste 200				
City Atlanta				
State GA				
First Name Zoom Printer Worldwide Inc	Date 09/05/2017	Occupation	Printing	\$2,740.00
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 07/26/2017	Occupation	Transaction Fee	\$250.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$3,053.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Derrick	Date 09/29/2017	Occupation Self Employed	Field Operations	\$156.00
Last Name Boone	<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 Self employed		
Address 201 Washington St SW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/29/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/07/2017	Occupation	Transporation	\$8.33
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$166.33

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name TASSIL'S RAW REALITY	Date 08/01/2017	Occupation	Donor Meeting	\$61.95
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	Employer		
Address 1059 Ralph David Abernathy Blvd SW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/04/2017	Occupation	Transporation	\$16.33
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name RONNY'S STEAK HOUSE	Date 09/18/2017	Occupation	Team Meeting	\$116.11
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	Employer		
Address 100 W Randolph St				
Address2				
City Chicago				
State IL				

Page Total \$194.39

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name FACEBOOK	Date 09/05/2017	Occupation	Software	\$81.99
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	Employer		
Address 1 Hacker Way				
Address2				
City Menlo Park				
State CA				
First Name Uber Technologies	Date 07/10/2017	Occupation	Transportation	\$7.09
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 09/12/2017	Occupation	Transaction Fee	\$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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$289.08

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
<div>First Name Bread &amp; Butterfly</div> <div>Last Name</div> <div>Address 299 Elizabeth Street</div> <div>Address2</div> <div>City Atlanta</div> <div>State GA</div> <div>Zip 30307</div>	<div>Date 08/25/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Donor Meeting	<div>\$27.00</div> <div style="background-color: #cccccc; height: 100px;"></div>
<div>First Name MAKIMONO</div> <div>Last Name</div> <div>Address Krog Street Market, 99 Krog St NE Suite X</div> <div>Address2</div> <div>City Atlanta</div> <div>State GA</div> <div>Zip 30307</div>	<div>Date 08/07/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Team Meeting	<div>\$30.00</div> <div style="background-color: #cccccc; height: 100px;"></div>
<div>First Name Uber Technologies</div> <div>Last Name</div> <div>Address 1455 Market St</div> <div>Address2 Fl 14</div> <div>City San Francisco</div> <div>State CA</div> <div>Zip 94103-1365</div>	<div>Date 09/08/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Transporation	<div>\$7.65</div> <div style="background-color: #cccccc; height: 100px;"></div>

Page Total \$64.65

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name United Airlines	Date 09/25/2017	Occupation	Transportation	\$29.00
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	Employer		
Address 233 S Wacker Dr				
Address2				
City Chicago				
State IL				
First Name April	Date 09/22/2017	Occupation Information Requested	Field Operations	\$1,000.00
Last Name Armstrong	<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 Information Requested		
Address				
Address2				
City				
State				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$1,031.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/18/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Google Services	Date 07/03/2017	Occupation	Digital Services	\$55.33
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	Employer		
Address 1600 Amphitheatre Pkwy				
Address2				
City Mountain View				
State CA				
First Name Uber Technologies	Date 07/24/2017	Occupation	Transporation	\$7.22
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$162.55

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/20/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Comcast	Date 08/31/2017	Occupation	Software	\$789.42
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	Employer		
Address 699 Ponce De Leon Ave NE				
Address2 Ste 17				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/01/2017	Occupation	Transportation	\$24.10
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$815.52

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/12/2017	Occupation	Transportation	\$6.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$8.50
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/15/2017	Occupation	Transaction Fee	\$10.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$24.50

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name LONDONO	Date 07/06/2017	Occupation	Event Supplies	\$250.00
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	Employer		
Address 2310 Parklake Dr NE				
Address2				
City Atlanta				
State GA				
First Name Juniperus	Date 08/29/2017	Occupation	Photography	\$900.00
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	Employer		
Address 275 Alaska Ave NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/26/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$1,151.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/10/2017	Occupation	Transportation	\$8.14
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/25/2017	Occupation	Transportation	\$8.65
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Spiller Park Coffee	Date 09/29/2017	Occupation	Team Meeting	\$8.76
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$25.55

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 08/22/2017	Occupation	Transaction Fee	\$1,000.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Rahmell	Date 09/28/2017	Occupation Not employed	Field Operations	\$120.00
Last Name Wilson	<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 Not employed		
Address 2800 Camp Creek Pkwy				
Address2 Apt H3				
City College Park				
State GA				
First Name City of Atlanta	Date 07/21/2017	Occupation	Parking	\$6.30
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	Employer		
Address 55 Trinity Ave SW				
Address2				
City Atlanta				
State GA				

Page Total \$1,126.30

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/01/2017	Occupation	Transportation	\$7.06
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Zoom Printer Worldwide Inc	Date 07/13/2017	Occupation	Printing	\$982.61
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
Zip 30339-3372				
First Name FACEBOOK	Date 07/03/2017	Occupation	Software	\$95.00
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	Employer		
Address 1 Hacker Way				
Address2				
City Menlo Park				
State CA				
Zip 94025-1456				

Page Total \$1,084.67

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Val D	Date 07/10/2017	Occupation Uber	Canvassing	\$50.00
Last Name Glover	<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 Driver		
Address 4908 Windmill Ln				
Address2				
City Ellenwood				
State GA				
First Name Kroger Ponce	Date 08/24/2017	Occupation	Office Supplies	\$855.90
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	Employer		
Address Ponce De Leon				
Address2				
City Atlanta				
State GA				
First Name APPLE	Date 09/05/2017	Occupation	Software	\$18.98
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				

Page Total \$924.88

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name The Whelan	Date 07/18/2017	Occupation	Volunteer Team Meeting	\$101.00
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	Employer		
Address 113 Huff Rd.				
Address2				
City Atlanta				
State GA				
First Name Juanita E	Date 09/28/2017	Occupation Flight Attendant	Field Operations	\$40.00
Last Name Buckner	<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 Delta		
Address 3783 Spring Garden Ln				
Address2				
City Lithonia				
State GA				
First Name Uber Technologies	Date 07/11/2017	Occupation	Transportation	\$6.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$147.95

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/05/2017	Occupation	Transportation	\$5.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/28/2017	Occupation	Transportation	\$17.81
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Pololmillion	Date 09/10/2017	Occupation	Photography	\$450.00
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	Employer		
Address				
Address2				
City				
State				

Page Total \$472.81

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Ton Ton	Date 07/31/2017	Occupation	Team Meeting	\$27.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2 # N151				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/28/2017	Occupation	Transporation	\$8.22
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/26/2017	Occupation	Transporation	\$15.18
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$50.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Bar Taco	Date 07/10/2017	Occupation	Team Meeting	\$55.00
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	Employer		
Address 299 N Highland Ave NE				
Address2				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 08/31/2017	Occupation	Transaction Fee	\$150.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 09/05/2017	Occupation	Transporation	\$23.63
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$228.63

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name The Capital	Date 07/17/2017	Occupation	Team Meeting	\$295.10
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	Employer		
Address 255 E Paces Ferry Rd NE				
Address2				
City Atlanta				
State GA		Zip 30305-2233		
First Name AMAZON MKTPLACE PMTS,AMZN	Date 07/28/2017	Occupation	Office Supplies	\$20.34
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	Employer		
Address PO Box 81226				
Address2				
City Seattle				
State WA		Zip 98108-1300		
First Name Uber Technologies	Date 08/22/2017	Occupation	Transporation	\$9.06
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA		Zip 94103-1365		

Page Total \$324.50

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/05/2017	Occupation	Transaction Fee	\$103.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Wells Fargo Bank	Date 07/05/2017	Occupation	Transaction Fee	\$2,725.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 07/17/2017	Occupation	Transporation	\$8.76
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$2,836.76

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
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Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name AGILE CRM	Date 07/21/2017	Occupation	Software	\$149.97
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	Employer		
Address First Floor, Plot No. 8 & 9, Jubilee Enclave,, Opp. HITEX Entrance,				
Address2				
City Hyderabad				
State Te				
Zip 500084				
First Name Uber Technologies	Date 09/18/2017	Occupation	Transporation	\$15.08
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name H&F Burger & Hop's Chicken	Date 09/30/2017	Occupation	Team Meeting	\$32.07
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
Zip 30308-1884				

Page Total \$197.12

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 08/02/2017	Occupation	Transaction Fee	\$4,068.78
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 08/22/2017	Occupation	Transporation	\$10.17
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 07/14/2017	Occupation	Transportation	\$8.24
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$4,087.19

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Metro PCS	Date 08/24/2017	Occupation	Software	\$242.07
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	Employer		
Address 100 Peachtree St NW				
Address2 Ste 2450				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/29/2017	Occupation	Transporation	\$13.03
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name COSME	Date 09/26/2017	Occupation	Team Meeting	\$422.00
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	Employer		
Address 35 E 21st St				
Address2				
City New York				
State NY				

Page Total \$677.10

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Comcast	Date 07/03/2017	Occupation	Software	\$600.00
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	Employer		
Address 699 Ponce De Leon Ave NE				
Address2 Ste 17				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/19/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/04/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$602.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name T-MOBILE	Date 08/25/2017	Occupation	Software	\$309.21
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	Employer		
Address 903 Peachtree St NE				
Address2 Ste 500				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/18/2017	Occupation	Transporation	\$7.21
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Georgia Volunteer Basketball	Date 09/13/2017	Occupation	Campaign Support	\$350.00
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	Employer		
Address				
Address2				
City				
State				

Page Total \$666.42

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Ernest	Date 09/15/2017	Occupation Information Requested	Field Operations	\$600.00
Last Name Boston	<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 Information Requested		
Address 2800 Camp Creek Pkwy				
Address2 C-8				
City Atlanta				
State GA				
First Name Precise Cleaning	Date 09/28/2017	Occupation	Office Cleaning	\$107.00
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	Employer		
Address				
Address2				
City				
State				
First Name TASSIL'S RAW REALITY	Date 07/10/2017	Occupation	Donor Meeting	\$14.15
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	Employer		
Address 1059 Ralph David Abernathy Blvd SW				
Address2				
City Atlanta				
State GA				

Page Total \$721.15

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/31/2017	Occupation	Transportation	\$25.19
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 07/13/2017	Occupation	Transportation	\$11.51
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/08/2017	Occupation	Transaction Fee	\$3.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$39.70

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Bar Taco	Date 08/25/2017	Occupation	Team Meeting	\$12.00
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	Employer		
Address 299 N Highland Ave NE				
Address2				
City Atlanta				
State GA				
First Name Loews	Date 07/26/2017	Occupation	Event Support	\$127.00
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	Employer		
Address Peachtree St NE				
Address2				
City Atlanta				
State GA				
First Name The Standard	Date 09/27/2017	Occupation	Event Accommodations	\$687.28
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	Employer		
Address 848 Washington St				
Address2				
City New York				
State NY				

Page Total \$826.28

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/08/2017	Occupation	Transportation	\$13.07
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Wells Fargo Bank	Date 09/22/2017	Occupation	Transaction Fee	\$80.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name Walmart	Date 07/06/2017	Occupation	Office Supplies	\$208.57
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	Employer		
Address 2427 Gresham Rd SE				
Address2				
City Atlanta				
State GA				
Zip 30316-3709				

Page Total \$301.64

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/11/2017	Occupation	Transportation	\$6.57
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name Prima Atlanta Printer	Date 09/28/2017	Occupation	Printing	\$1,409.82
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	Employer		
Address 191 14th St NW				
Address2				
City Atlanta				
State GA				
Zip 30318-7827				
First Name Empire State South-Atlanta	Date 07/24/2017	Occupation	Fundraising Meeting	\$18.11
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	Employer		
Address 999 Peachtree St NE				
Address2 Ste 140				
City Atlanta				
State GA				
Zip 30309-4428				

Page Total \$1,434.50

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies		Date 08/25/2017	Occupation	Transportation	\$7.42
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	Employer		
Address 1455 Market St					
Address2 Fl 14					
City San Francisco					
State CA	Zip 94103-1365				
First Name Wells Fargo Bank				Date 09/26/2017	Occupation
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	Employer		
Address PO Box 6995					
Address2					
City Portland					
State OR	Zip 97228-6995				
First Name Hilton International				Date 09/20/2017	Occupation
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	Employer		
Address 720 S Michigan Ave					
Address2					
City Chicago					
State IL	Zip 60605-3428				

Page Total \$739.09

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/13/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Walmart	Date 08/14/2017	Occupation	Office Supplies	\$81.00
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	Employer		
Address 2427 Gresham Rd SE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/27/2017	Occupation	Transportation	\$7.19
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$90.19

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name The Atlanta Womens Foundation	Date 08/21/2017	Occupation	Event Support	\$1,000.00
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	Employer		
Address 3355 Lenox Rd NE				
Address2 Ste 850				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/25/2017	Occupation	Transporation	\$10.17
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/25/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$1,110.17

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank		Date 07/13/2017	Occupation	Transaction Fee	\$210.00
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	Employer		
Address PO Box 6995					
Address2					
City Portland					
State OR	Zip 97228-6995				
First Name APPLE		Date 08/30/2017	Occupation	Software	\$17.98
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	Employer		
Address 1 Infinite Loop					
Address2 Apple					
City Cupertino					
State CA	Zip 95014-2084				
First Name Gwendolyn		Date 08/12/2017	Occupation Information Requested	Canvassing	\$250.00
Last Name Elmore		<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 Information Requested		
Address					
Address2					
City					
State	Zip				

Page Total \$477.98

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name JR CRICKETS	Date 08/22/2017	Occupation	Team Meeting	\$12.00
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	Employer		
Address 129 North Ave NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/14/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Juanita E	Date 07/20/2017	Occupation Flight Attendant	Canvassing	\$108.00
Last Name Buckner	<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 Delta		
Address 3783 Spring Garden Ln				
Address2				
City Lithonia				
State GA				

Page Total \$122.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name NGP Software, Inc	Date 07/21/2017	Occupation	Software	\$225.00
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	Employer		
Address 595 Piedmont Ave NE				
Address2 Ste 320-222				
City Atlanta				
State GA				
Zip 30308-2478				
First Name Uber Technologies	Date 08/11/2017	Occupation	Transporation	\$6.57
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				
First Name YEAH! BURGER	Date 09/14/2017	Occupation	Donor Meeting	\$14.14
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	Employer		
Address 1017 N Highland Ave NE				
Address2				
City Atlanta				
State GA				
Zip 30306-3539				

Page Total \$245.71

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/19/2017	Occupation	Transaction Fee	\$110.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name DROPBOX,SAN FRANCISCO,CA,	Date 08/02/2017	Occupation	Software	\$99.00
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	Employer		
Address				
Address2				
City				
State				
First Name Uber Technologies	Date 08/28/2017	Occupation	Transporation	\$37.29
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$246.29

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/11/2017	Occupation	Transaction Fee	\$1,000.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Spiller Park Coffee	Date 07/12/2017	Occupation	Donor Meeting	\$16.07
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name TEXACO	Date 09/12/2017	Occupation	Gasoline	\$49.70
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	Employer		
Address 2710 Bouldercrest Rd SE				
Address2				
City Atlanta				
State GA				

Page Total \$1,065.77

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/03/2017	Occupation	Transporation	\$8.81
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/15/2017	Occupation	Transporation	\$7.05
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/27/2017	Occupation	Transporation	\$7.88
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total  \$23.74

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Zoom Printer Worldwide Inc	Date 07/31/2017	Occupation	Printing	\$1,435.38
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 07/25/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name MISO IZAKAYA ATLANTA GA	Date 08/28/2017	Occupation	Team Meeting	\$127.00
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	Employer		
Address 619 Edgewood Ave SE				
Address2 Ste 200				
City Atlanta				
State GA				

Page Total \$1,662.38

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Joanna		Date 09/29/2017	Occupation Self Employed	Event Supplies	\$400.00
Last Name Potts		<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 Self employed		
Address					
Address2					
City					
State	Zip				
First Name Uber Technologies		Date 08/29/2017	Occupation	Transporation	\$19.32
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	Employer		
Address 1455 Market St					
Address2 Fl 14					
City San Francisco					
State CA	Zip 94103-1365				
First Name Mediterranea		Date 07/25/2017	Occupation	Donor Meeting	\$18.00
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	Employer		
Address 332 Ormond St SE					
Address2					
City Atlanta					
State GA	Zip 30315-2008				

Page Total \$437.32

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Delta Airlines	Date 09/18/2017	Occupation	Airline Ticket	\$417.40
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	Employer		
Address PO Box 20706				
Address2				
City Atlanta				
State GA				
First Name Tasty China Jia	Date 08/11/2017	Occupation	Team Meeting	\$12.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2 Ste N135				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/04/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$430.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name H&F Burger & Hop's Chicken	Date 07/26/2017	Occupation	Team Meeting	\$13.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name FACEBOOK	Date 09/05/2017	Occupation	Software	\$217.45
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	Employer		
Address 1 Hacker Way				
Address2				
City Menlo Park				
State CA				
First Name Uber Technologies	Date 07/10/2017	Occupation	Transportation	\$6.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$237.40

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/12/2017	Occupation	Transaction Fee	\$2,000.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name MAKIMONO	Date 08/21/2017	Occupation	Team Meeting	\$17.00
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	Employer		
Address Krog Street Market, 99 Krog St NE Suite X				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/08/2017	Occupation	Transporation	\$17.80
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$2,034.80

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name United Airlines  Last Name  Address 233 S Wacker Dr  Address2  City Chicago  State IL      Zip 60606-7147	Date 09/25/2017  <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	Transportation	\$396.40   <div style="background-color: #cccccc; height: 100px;"></div>
First Name Joy  Last Name Barnes  Address 994 Lena St NW  Address2  City Atlanta  State GA      Zip 30314-2922	Date 09/22/2017  <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 Marketing Communications  Employer Self-employed	Campaign Support	\$500.00   <div style="background-color: #cccccc; height: 100px;"></div>
First Name Uber Technologies  Last Name  Address 1455 Market St  Address2 Fl 14  City San Francisco  State CA      Zip 94103-1365	Date 08/23/2017  <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	Transportation	\$11.42   <div style="background-color: #cccccc; height: 100px;"></div>

Page Total                     \$907.82                    

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Extra Space Storage Last Name Address 660 Edgewood Ave SE Address2 City Atlanta State GA      Zip 30312-1934	Date 08/14/2017 <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	Campaign Supplies Storage	\$174.00
First Name Wells Fargo Bank Last Name Address PO Box 6995 Address2 City Portland State OR      Zip 97228-6995	Date 09/13/2017 <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	Transaction Fee	\$10.00
First Name Uber Technologies Last Name Address 1455 Market St Address2 Fl 14 City San Francisco State CA      Zip 94103-1365	Date 09/11/2017 <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	Transporation	\$7.36

Page Total \$191.36

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**Itemized Expenditures**

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/24/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/19/2017	Occupation	Transporation	\$20.21
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Marckist	Date 09/13/2017	Occupation Not employed	Field Operations	\$96.00
Last Name Carraway	<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 Not employed		
Address 700 Atlanta Ave				
Address2				
City Decatur				
State GA				

Page Total \$117.21

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Whole Foods Market-10196	Date 08/14/2017	Occupation	Team Meeting	\$65.49
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	Employer		
Address 650 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
Zip 30308-1804				
First Name Wells Fargo Bank	Date 08/11/2017	Occupation	Transaction Fee	\$1,000.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
Zip 97228-6995				
First Name Uber Technologies	Date 09/01/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
Zip 94103-1365				

Page Total \$1,067.49

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/12/2017	Occupation	Transportation	\$7.53
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 07/25/2017	Occupation	Transportation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$10.53

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
**Campaign Contribution Disclosure Report**  
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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name GUITAR CENTER #761 ATLAN	Date 09/11/2017	Occupation	Event Supplies	\$81.54
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	Employer		
Address 1485 Northeast Expy NE				
Address2				
City Brookhaven				
State GA				
First Name Spiller Park Coffee	Date 08/02/2017	Occupation	Team Meeting	\$4.18
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name Dennis	Date 09/24/2017	Occupation Photographer	Photography	\$250.00
Last Name Manuel	<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 Self Employed		
Address 224 Bergen St				
Address2				
City Brooklyn				
State NY				

Page Total \$335.72

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name A Mano	Date 07/24/2017	Occupation	Donor Meeting	\$75.00
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	Employer		
Address 587 Ralph McGill Blvd NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/25/2017	Occupation	Transporation	\$9.21
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Dorien	Date 09/28/2017	Occupation Warehouse Packer	Field Operations	\$200.00
Last Name Head	<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 XPO Logistics		
Address 2023 Sandtown Rd SW				
Address2				
City Atlanta				
State GA				

Page Total \$284.21

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 07/10/2017	Occupation	Transaction Fee	\$9.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name City of Atlanta	Date 07/31/2017	Occupation	Parking	\$2.00
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	Employer		
Address 55 Trinity Ave SW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/01/2017	Occupation	Transporation	\$7.70
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$18.70

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Zoom Printer Worldwide Inc	Date 07/13/2017	Occupation	Printing	\$1,880.00
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	Employer		
Address 3350 Riverwood Pkwy SE				
Address2 Ste 1900				
City Atlanta				
State GA				
Zip 30339-3372				
First Name Juanita E	Date 07/10/2017	Occupation Flight Attendant	Canvassing	\$50.00
Last Name Buckner	<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 Delta		
Address 3783 Spring Garden Ln				
Address2				
City Lithonia				
State GA				
Zip 30038-3638				
First Name Kroger Ponce	Date 09/05/2017	Occupation	Office Supplies	\$52.60
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	Employer		
Address Ponce De Leon				
Address2				
City Atlanta				
State GA				
Zip 30306				

Page Total \$1,982.60

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name APPLE	Date 09/05/2017	Occupation	Software	\$40.42
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	Employer		
Address 1 Infinite Loop				
Address2 Apple				
City Cupertino				
State CA				
First Name April	Date 08/16/2017	Occupation Information Requested	Field Operations	\$500.00
Last Name Armstrong	<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 Information Requested		
Address				
Address2				
City				
State				
First Name Uber Technologies	Date 08/11/2017	Occupation	Transportation	\$8.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$548.67

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Google Services	Date 08/02/2017	Occupation	Digital Services	\$75.80
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	Employer		
Address 1600 Amphitheatre Pkwy				
Address2				
City Mountain View				
State CA				
First Name H&F Burger & Hop's Chicken	Date 07/12/2017	Occupation	Team Meeting	\$20.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/25/2017	Occupation	Transporation	\$6.68
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$102.48

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Juniperus	Date 09/09/2017	Occupation	Communications/Media services	\$59.38
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	Employer		
Address 275 Alaska Ave NE				
Address2				
City Atlanta				
State GA				
First Name Allianz Travel Insurance			Date 09/18/2017	Occupation
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	Employer		
Address 9950 Mayland Dr				
Address2				
City Richmond				
State VA			Zip 23233-1463	
First Name Uber Technologies			Date 07/28/2017	Occupation
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA			Zip 94103-1365	

Page Total \$141.77

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Shoba and the Octopus Bar	Date 07/21/2017	Occupation	Team Meeting	\$58.00
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	Employer		
Address 560 Gresham Ave SE				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/25/2017	Occupation	Transporation	\$7.76
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/30/2017	Occupation	Transaction Fee	\$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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$565.76

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/11/2017	Occupation	Transportation	\$6.95
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 09/05/2017	Occupation	Transporation	\$32.07
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 08/22/2017	Occupation	Transportation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$41.02

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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State of Georgia  
Campaign Contribution Disclosure Report  
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Farm to Ladle	Date 08/16/2017	Occupation	Team Meeting	\$44.94
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2				
City Atlanta				
State GA				
First Name Wells Fargo Bank	Date 09/05/2017	Occupation	Transaction Fee	\$350.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Wells Fargo Bank	Date 07/05/2017	Occupation	Transaction Fee	\$405.63
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$800.57

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 09/07/2017	Occupation	Transporation	\$7.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name HUMAN RIGHTS CAMPAIGN WA	Date 07/21/2017	Occupation	Event Support	\$100.00
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	Employer		
Address 1640 Rhode Island Ave NW				
Address2				
City Washington				
State DC				
First Name Uber Technologies	Date 09/15/2017	Occupation	Transporation	\$7.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$114.50

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name RONNY'S STEAK HOUSE	Date 09/18/2017	Occupation	Donor Meeting	\$7.79
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	Employer		
Address 100 W Randolph St				
Address2				
City Chicago				
State IL				
First Name Wells Fargo Bank	Date 08/01/2017	Occupation	Transaction Fee	\$440.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Uber Technologies	Date 08/22/2017	Occupation	Transporation	\$2.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$449.79

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
<div style="border-bottom: 1px solid black; padding-bottom: 2px;">First Name Uber Technologies</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Last Name</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address 1455 Market St</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address2 Fl 14</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">City San Francisco</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; padding-bottom: 2px;"> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">State CA</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Zip 94103-1365</div> </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Date 07/14/2017</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;"> <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         </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Occupation</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Employer</div>	Transportation	\$10.27
<div style="border-bottom: 1px solid black; padding-bottom: 2px;">First Name Metro PCS</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Last Name</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address 100 Peachtree St NW</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address2 Ste 2450</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">City Atlanta</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; padding-bottom: 2px;"> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">State GA</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Zip 30303-1936</div> </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Date 09/25/2017</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;"> <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         </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Occupation</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Employer</div>	Software	\$180.00
<div style="border-bottom: 1px solid black; padding-bottom: 2px;">First Name Uber Technologies</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Last Name</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address 1455 Market St</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Address2 Fl 14</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">City San Francisco</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; padding-bottom: 2px;"> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">State CA</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Zip 94103-1365</div> </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Date 08/29/2017</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;"> <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         </div>	<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Occupation</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Employer</div>	Transporation	\$2.00

Page Total \$192.27

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name HUMAN RIGHTS CAMPAIGN WA	Date 08/21/2017	Occupation	Event Support	\$100.00
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	Employer		
Address 1640 Rhode Island Ave NW				
Address2				
City Washington				
State DC				
First Name Tasty China Jia	Date 07/28/2017	Occupation	Meeting with donors	\$33.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2 Ste N135				
City Atlanta				
State GA				
First Name Uber Technologies	Date 07/18/2017	Occupation	Transporation	\$7.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$140.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name T-MOBILE	Date 08/25/2017	Occupation	Software	\$108.90
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	Employer		
Address 903 Peachtree St NE				
Address2 Ste 500				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/18/2017	Occupation	Transporation	\$6.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Nazar Properties	Date 09/15/2017	Occupation	Office Space	\$2,000.00
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	Employer		
Address				
Address2				
City				
State				

Page Total \$2,115.15

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 08/30/2017	Occupation	Transportation	\$7.05
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Uber Technologies	Date 07/13/2017	Occupation	Transportation	\$7.25
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 08/07/2017	Occupation	Transaction Fee	\$503.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$517.30

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name MEETEDGAR	Date 09/18/2017	Occupation	Digital Services	\$49.00
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	Employer		
Address 2211 N 1st St				
Address2				
City San Jose				
State CA				
First Name MAILCHIMP	Date 08/08/2017	Occupation	Digital Services	\$50.00
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	Employer		
Address 675 Ponce De Leon Ave NE				
Address2 Ste 5000				
City Atlanta				
State GA				
First Name Bar Taco	Date 08/28/2017	Occupation	Donor Meeting	\$50.00
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	Employer		
Address 299 N Highland Ave NE				
Address2				
City Atlanta				
State GA				

Page Total \$149.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name The Standard	Date 09/27/2017	Occupation	Event Accommodations	\$687.28
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	Employer		
Address 848 Washington St				
Address2				
City New York				
State NY				
First Name Uber Technologies	Date 08/08/2017	Occupation	Transporation	\$13.79
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Wells Fargo Bank	Date 09/21/2017	Occupation	Transaction Fee	\$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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				

Page Total \$4,701.07

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
<div>First Name Uber Technologies</div> <div>Last Name</div> <div>Address 1455 Market St</div> <div>Address2 Fl 14</div> <div>City San Francisco</div> <div> <div>State CA</div> <div>Zip 94103-1365</div> </div>	<div>Date 09/11/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Transportation	<div>\$2.00</div> <div style="background-color: #cccccc; height: 100px;"></div>
<div>First Name Uber Technologies</div> <div>Last Name</div> <div>Address 1455 Market St</div> <div>Address2 Fl 14</div> <div>City San Francisco</div> <div> <div>State CA</div> <div>Zip 94103-1365</div> </div>	<div>Date 08/10/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Transportation	<div>\$7.66</div> <div style="background-color: #cccccc; height: 100px;"></div>
<div>First Name Whole Foods Market-10196</div> <div>Last Name</div> <div>Address 650 Ponce De Leon Ave NE</div> <div>Address2</div> <div>City Atlanta</div> <div> <div>State GA</div> <div>Zip 30308-1804</div> </div>	<div>Date 07/31/2017</div> <div> <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                 </div>	<div>Occupation</div> <div>Employer</div>	Office Supplies	<div>\$61.40</div> <div style="background-color: #cccccc; height: 100px;"></div>

Page Total                     \$71.06                    

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Prima Atlanta Printer	Date 09/28/2017	Occupation	Printing	\$99.00
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	Employer		
Address 191 14th St NW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 08/23/2017	Occupation	Transporation	\$35.41
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name Shoba and the Octopus Bar	Date 07/03/2017	Occupation	Donor Meeting	\$40.00
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	Employer		
Address 560 Gresham Ave SE				
Address2				
City Atlanta				
State GA				

Page Total \$174.41

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wells Fargo Bank	Date 09/26/2017	Occupation	Transaction Fee	\$100.00
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	Employer		
Address PO Box 6995				
Address2				
City Portland				
State OR				
First Name Hilton International	Date 09/20/2017	Occupation	Travel Accommodations	\$798.06
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	Employer		
Address 720 S Michigan Ave				
Address2				
City Chicago				
State IL				
First Name Uber Technologies	Date 09/13/2017	Occupation	Transporation	\$11.28
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$909.34

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Uber Technologies	Date 07/26/2017	Occupation	Transporation	\$1.00
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				
First Name West Hunter Street Baptist Church	Date 07/17/2017	Occupation	Event Support	\$1,000.00
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	Employer		
Address 1040 Ralph David Abernathy Blvd SW				
Address2				
City Atlanta				
State GA				
First Name Uber Technologies	Date 09/25/2017	Occupation	Transporation	\$16.33
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	Employer		
Address 1455 Market St				
Address2 Fl 14				
City San Francisco				
State CA				

Page Total \$1,017.33

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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

Must list expenditures made to a single recipient for which the aggregate total is \$100.00 or more

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Jessica		Date 09/28/2017	Occupation Not employed	Field Operations	\$80.00
Last Name Wright		<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 Not employed		
Address 700 Atlanta Ave					
Address2					
City Decatur					
State GA	Zip 30030-3047				

Page Total \$80.00

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Kwanza Hall for Mayor, Inc

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**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.