

## Campaign Contribution Disclosure Report

## Georgia Government Transparency and Campaign Finance Commission

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

<b>1. Report Type</b> (Select One)  <input checked="" type="checkbox"/> Original  <input type="checkbox"/> Amendment  Amendment # _____	<b>2. Filing is being made on behalf of (Select One):</b> <b>Candidate or Public Official</b> Office Held or Sought <u>Atlanta City Council Member District 12</u> <small>(Include county, municipality, district, post or judicial circuit)</small>  Filer ID _____ <small>(Filer ID that begins with the letter "C")</small> <b>Organization or Person Other than Candidate's Campaign Committee</b> Committee Name: <u>Joyce Sheperd</u> Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>
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**3. Identifying and Contact Information**

(1) <u>Joyce Sheperd</u>	(2) <u>7/10/2017</u>
<i>Full Name of Candidate or Other Than Candidate Campaign Committee</i>	<i>Today's Date</i>
(3) _____	GA
<i>Mailing Address</i>	<i>City</i> <i>State</i> <i>Zip Code</i>
(4) _____	and/ or j _____
<i>Primary Contact Phone Number</i>	<i>E-Mail</i>
(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) If yes, is the committee registered with the Commission? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(7) If yes, complete the following: <u>Joyce Sheperd</u>	_____
<i>Name of Committee Chairperson</i>	<i>Name of Committee Treasurer</i>

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

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

State of Georgia

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

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

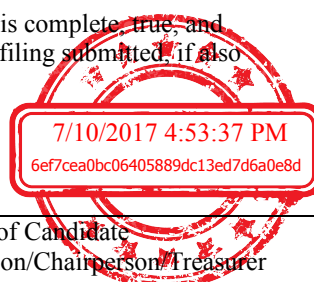
Sworn to and subscribed before me on \_\_\_\_\_, \_\_\_\_\_

Signature of Notary Public

Commission Expiration

a. Signature of Candidate

b. Organization/Chairperson/Treasurer



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

**CONTRIBUTIONS RECEIVED**

1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	<b>In-Kind Estimated Value</b>	<b>Cash Amount</b>
2	A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns.	\$0.00	\$91,119.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$15,000.00
3a	All loans received this reporting period.		\$0.00
3b	Interest earned on campaign account this reporting period.		\$0.00
3c	Total amount of investments sold this reporting period.		\$0.00
3d	Total amount of cash dividends and interest paid out this reporting period.		\$0.00
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.	\$0.00	\$650.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$0.00	\$15,650.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$0.00	\$106,769.00

**EXPENDITURES MADE**

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	\$0.00	\$74,643.52
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$2,931.73
10	Total amount of all separate expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page	\$0.00	\$1,135.08
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$4,066.81
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$78,710.33

**INVESTMENTS**

13	Total value of investments held at the beginning of this reporting period.		\$0.00
14	Total value of investments held at the end of this reporting period.		\$0.00

**TOTAL NET BALANCE ON HAND**

15	Net balance on hand. (Line 6 - 12 + 14)	\$0.00	\$28,058.67
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\* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

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

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

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

Public Officer/Candidate/Other Than Candidate Committee Name

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

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

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Nan For Senate	Date  3/29/2017	Occupation  State Senator	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value
Last Name 					\$0.00
Address 260 Peachtree Street					
Address 2 	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer  State of Georgia	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		Description
City Atlanta					
State GA					Zip 30303
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
Received Date Contribution Type*	Occupation & Employer	Estimated Value			
		Description			
First Name or Business Name Jessica	Date  4/3/2017	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	Cash Amt. \$500.00	Est. Value
Last Name Masters					\$0.00
Address 377 Ralph McGill Blvd					
Address 2 	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer  Terragroup	<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 30308
Aff. Comm.					

Itemized Contributions Page Total

\$1,000.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name William	Date  4/3/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value	
Last Name Pipes				\$0.00		
Address 99 Trestle Drive						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		Description	
City Austell						
State GA						Zip 30106
Aff. Comm.						

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name James	Date  4/3/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$1,500.00	Est. Value	
Last Name Samples				\$0.00		
Address 9140 Ephesus Church Rd						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		Description	
City Villa Rica						
State GA						Zip 30180
Aff. Comm.						

Itemized Contributions Page Total

\$2,000.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name Michael	Date  4/6/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value	
Last Name Lusk				\$0.00		
Address 3475 Donamire Chase, NW						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<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 Kennesaw						
State GA						Zip 30144
Aff. Comm.						
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
Received Date Contribution Type*	Occupation & Employer	Estimated Value				
		Description				
First Name or Business Name Larry	Date  4/21/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value	
Last Name Dingle				\$0.00		
Address PO Bx 1407						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		Description	
City Alpharetta						
State GA						Zip 30009
Aff. Comm.						

Itemized Contributions Page Total

\$1,000.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name Jerome	Date  5/23/2017	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	Cash Amt. \$500.00	Est. Value		
Last Name Russell					\$0.00		
Address 18 Inman Park					Description		
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  HJ Russell					
City Atlanta							
State GA							
Zip 30309							
Aff. Comm.							
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name Nan For Senate	Date  5/23/2017	Occupation  State Senator	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$700.00	Est. Value		
Last Name					\$0.00		
Address 260 Peachtree Street					Description		
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  State of Georgia					
City Atlanta							
State GA							
Zip 30303							
Aff. Comm.							

Itemized Contributions Page Total

\$1,200.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name The Collaborative Firm, LLC	Date  5/23/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$300.00	Est. Value	
Last Name				\$0.00		
Address 1614 East Cleveland Ave						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		Description	
City East Point						
State GA						Zip 30344
Aff. Comm.						

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name Sparlin Health Clinic	Date  5/22/2017	Occupation  Chiropractic Center	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$300.00	Est. Value	
Last Name				\$0.00		
Address 923 Dill Avenue						
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		Description	
City Atlanta						
State GA						Zip 30310
Aff. Comm.						

Itemized Contributions Page Total

\$600.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name E David	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$1,000.00	Est. Value
Last Name Morris	6/8/2017				\$0.00
Address 1103 Clifton Rd NE					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30307	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
Received Date Contribution Type*	Occupation & Employer	Estimated Value			
		Description			
First Name or Business Name Steven	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$350.00	Est. Value
Last Name Labovitz	4/24/2017	Attorney			\$0.00
Address 5655 Gen Errol Rd NW					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source	Dentons Law Firm			
Zip 30327	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total

\$1,350.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name <b>Darrell</b>	Date  7/9/2017	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	Cash Amt. \$1,000.00	Est. Value		
Last Name <b>Anderson</b>					\$0.00		
Address 2785 Autumn Lake Ln					Description		
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  AA Limousine Service					
City							
State GA							
Zip Decatur							
Aff. Comm.							
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name <b>The Benoit Group, LLC</b>	Date  6/8/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$1,000.00	Est. Value		
Last Name					\$0.00		
Address 6780 Roswell Rd					Description		
Address 2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer					
City Atlanta							
State GA							
Zip 30328							
Aff. Comm.							

Itemized Contributions Page Total

\$2,000.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name <b>Charles</b>	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value
Last Name <b>Martin</b>	7/9/2017				\$0.00
Address					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City <b>San Antonio</b>	<input type="checkbox"/> In-Kind				Description
State <b>TX</b>	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name <b>Aaron</b>	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value
Last Name <b>Watson</b>	6/30/2017	Attorney			\$0.00
Address <b>PO Box 8353</b>					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			
City <b>Atlanta</b>	<input type="checkbox"/> In-Kind				Description
State <b>GA</b>	<input type="checkbox"/> Common Source				
Zip <b>31106</b>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total

\$1,000.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)		Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
		Received Date Contribution Type*	Occupation & Employer			Estimated Value		
						Description		
First Name or Business Name Citizens For A Better Transportation 2016		Date  6/30/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$2,600.00	Est. Value		
Last Name  						\$0.00		
Address 100 Peachtree St NW						Description		
Address 2  		<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer					
City Atlanta								
State GA	Zip 30303							
Aff. Comm.								
Full Name of Contributor Mailing Address (Affiliation of Committee if any)		Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
		Received Date Contribution Type*	Occupation & Employer			Estimated Value		
						Description		
First Name or Business Name Matthew		Date  6/22/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$1,000.00	Est. Value		
Last Name Brock						\$0.00		
Address  						Description		
Address 2  		<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer					
City  								
State GA	Zip  							
Aff. Comm.								
			Brock Built					

Itemized Contributions Page Total

\$3,600.00

\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Full Name of Contributor Mailing Address (Affiliation of Committee if any)		Contributor		Election Cycle**	Cash Amount	In-Kind Contributions						
		Received Date Contribution Type*	Occupation & Employer			Estimated Value						
						Description						
First Name or Business Name Adam		Date  5/23/2017	Occupation  Builder	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$1,000.00	Est. Value  \$0.00						
Last Name Brock												
Address 1735 Grand Oaks												
Address 2		<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer  Brock Built			Description						
City												
State GA	Zip 30188											
Aff. Comm.												
Itemized Contributions Page Total					\$1,000.00	\$0.00						

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Loan Reporting				
Name of Lender & Mailing Address		1.Date of Loan 2.Amount of Loan 3.Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1.Occupation & 2.Place of Employment 3.Fiduciary Relationship***
Lender Name (First Name, Business, Inst.)		1.	First Name	1.
Lender Last Name		2.	Last Name	2.
Address		3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3.  <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address 2			Address 2	
City			City	
State	Zip		State	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total		\$0.00

\* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

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

\*\*\* If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

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

Must list expenditures made to a single recipient for which the aggregate

total more than  
\$100.00.

List Name and Mailing Address of Recipient	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Best Print & Design	Date 4/7/2017	Occupation Printer	Printing	\$116.41
Last Name				
Address 4187 Snapfinger Woods Dr.	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address 2		Employer		
City Decatur				
State GA		Zip 30035		
First Name Pascal's Restuarant	Date 7/9/2017	Occupation	Event Deposit	\$125.00
Last Name				
Address 180 Northside Dr	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address 2		Employer		
City Atlanta				
State GA		Zip 303013		
First Name Live Thrive Atlanta	Date 5/1/2017	Occupation	Donation	\$150.00
Last Name				
Address 1110 Hill Street	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address 2		Employer		
City Atlanta				
State GA		Zip 30315		

Page Total \$391.41

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

Public Officer/Candidate/Other Than Candidate Committee Name

First Name Woodruff Library		Date 5/15/2017	Occupation	Donation	\$119.79
Last Name					
Address 111 James P Brawley		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 2					
City Atlanta					
State GA	Zip 30314				
First Name Lifecycle Building Center		Date 5/15/2017	Occupation	Donation	\$150.00
Last Name					
Address 1116 Murphy Avenue		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 2					
City Atlanta					
State GA	Zip 30310				
First Name Staples		Date 5/17/2016	Occupation	Office Supplies	\$112.56
Last Name					
Address 650 Ponce Avenue		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 2					
City Atlanta					
State GA	Zip 30308				
Page Total					\$382.35

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)  
 Public Officer/Candidate/Other Than Candidate Committee Name

First Name <b>Pascal's Resturant</b>		Date  <b>5/18/2017</b>	Occupation	Event Rental	\$788.23
Last Name					
Address <b>180 Northside Drive</b>		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 2					
City <b>Atlanta</b>					
State <b>GA</b>	Zip <b>30313</b>				
First Name <b>Home Depot</b>		Date  <b>5/22/2017</b>	Occupation	Tarp/D12 Event	\$104.29
Last Name					
Address <b>650 Ponce Avenue</b>		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 2					
City <b>Atlanta</b>					
State <b>GA</b>	Zip <b>30308</b>				
First Name <b>Dogs On Wheels</b>		Date  <b>5/22/2017</b>	Occupation	Jazz In The Park/Food	\$395.00
Last Name					
Address		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 2					
City					
State <b>GA</b>	Zip				
Page Total					\$1,287.52

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)  
 Public Officer/Candidate/Other Than Candidate Committee Name

First Name Aisha		Date  6/30/2017	Occupation	Administrative	\$870.00
Last Name Greenlee					Employer
Address		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address 2					
City Atlanta					
State GA	Zip				

Page Total                      \$870.00

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

Public Officer/Candidate/Other Than Candidate Committee Name

**State of Georgia**  
**Campaign Contribution Disclosure Report**  
**Investments Statement**

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

**State of Georgia**  
**Campaign Contribution Disclosure Report**  
**Addendum Statement**

The Addendum Statement should be used for explanation of any additional information needed to complete an accurate filing of this report.

Information that is to be reported in the body of the report **should not** be listed on Addendum Statement.