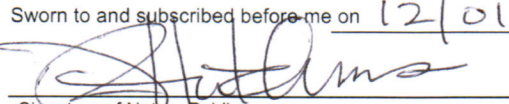
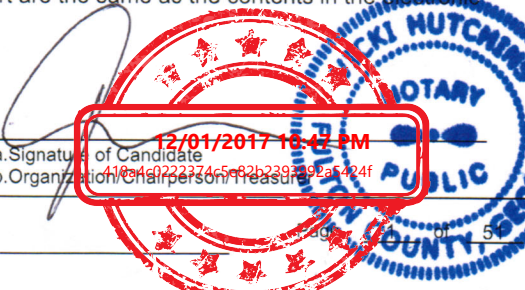


<b>Campaign Contribution Disclosure Report</b> <b>Georgia Government Transparency and Campaign Finance Commission</b> 200 Piedmont Avenue S.E.   Suite 1402 West Tower   Atlanta, GA 30334   404-463-1980   www.ethics.ga.gov			
<b>1. Report Type</b> (Select One) <input checked="" type="checkbox"/> <b>Original Report</b> <input type="checkbox"/> <b>Amendment</b> 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 District 4</u> <small>(Include county, municipality, district, post, or judicial circuit)</small> Filer ID <u>C2016001988</u> <b>Report of Organization or Person Other than Candidate's Campaign Committee</b> Committee Name: _____ Filer ID _____		Filing office use Only   Use Earlier of Post Mark or Hand Delivered Date
<b>3. Identifying and Contact Information</b>			
(1) <u>Jason Dozier</u> <small>Full Name of Candidate or Other Than Candidate Campaign Committee</small>		(2) <u>11/30/2017</u> <small>Today's Date</small>	
(3) _____ <small>Mailing Address</small>		<u>Atlanta</u> <u>GA</u> <u>30310</u> <small>City State Zip Code</small>	
(4) _____ and / or _____ <small>Primary Contact Phone Number E-Mail</small>			
(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? <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>			
(6) If so, is the Committee registered with the State Ethics Commission? <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>			
(7) If so, complete the following: <u>Jason Dozier</u> <u>Jason Dozier</u> <small>Name of Committee Chairperson Name of Committee Treasurer</small>			
<b>4. Period for which you are Reporting</b> You Must Check Only One Box			
<b>My Non Election Year</b> <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>	<b>My Election Year</b> <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 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)	<b>Run-Offs</b> <small>(Report required only if you are in a Run-Off Election)</small> <input type="checkbox"/> 6 days before Primary Run-Off, <u>2017</u> (year) <input checked="" 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)	<b>Special Elections</b> <small>(Report required only if you are in a Special Election)</small> <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)
<b>Verification by Oath or Affirmation</b>			
State of <u>Georgia</u> County of <u>FULTON</u> I, <u>Jason Dozier</u> , 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 <u>12/01</u> , 20 <u>17</u> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">                       Signature of Notary Public                 </div> <div style="width: 45%;"> <u>10/03/2021</u>                      Commission Expiration                 </div> </div> <div style="text-align: right; margin-top: 10px;">                       a. Signature of Candidate                      b. Organization/Chairperson/Treasurer                 </div>			
Public Officer/Candidate/Other Than Candidate Committee Name <u>Jason Dozier for Atlanta</u>			

# 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>Atlanta City Council District 4</u> (Include county, municipality, district, post, or judicial circuit) Filer ID <u>C2016001988</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
---	--	--

### 3. Identifying and Contact Information

(1) Jason Dozier (2) 11/30/2017  
*Full Name of Candidate or Other Than Candidate Campaign Committee* *Today's Date*

(3) Atlanta GA 30310  
*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: Jason Dozier Jason Dozier  
*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 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 checked="" 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

# 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.	\$2,482.66	\$77,986.04
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$15,887.00
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	\$2,331.00
5	Total contributions reported this period (Line 3 + 3a + 3b + 3c + 3d + 4).	\$0.00	\$18,218.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$2,482.66	\$96,204.04

## 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	\$61,888.02
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$21,291.70
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	\$752.82
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$22,044.52
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$83,932.54

## 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)		\$12,271.50
----	---	--	-------------

\* 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 Stephen	Date 11/13/2017	Occupation Consultant/ Retired	<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. \$500.00	Est. Value \$0.00	
Last Name Suits						
Address 737 Myrtle 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 Self-Employed/Retired		Description
City Atlanta						
State GA					Zip 30308-1402	
Aff. Comm.						
First Name / Business Name Gary	Date 11/17/2017	Occupation Retired	<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 Peacock						
Address PO Box 54226						
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 30308-0226	
Aff. Comm.						
First Name / Business Name Ben	Date 11/08/2017	Occupation Assistant Professor	<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 Brunjes						
Address 4763 NE 178th St						
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer University of Washington		Description
City Lake Forest Park						
State WA					Zip 98155-4532	
Aff. Comm.						

**Itemized Contribution Page Total**

\$2,050.00

\$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 IAFF	Date 11/28/2017	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. \$500.00	Est. Value \$0.00	
Last Name					Description	
Address 161 Mangum St SW						
Address2						
City Atlanta	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer				
State GA						Zip 30313-1336
Aff. Comm.						
First Name / Business Name Patrick	Date 11/21/2017	Occupation  District Staffer	<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. \$104.00	Est. Value \$0.00	
Last Name Husbands					Description	
Address 1931 Memorial Dr SE						
Address2						
City Atlanta	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer US House of Representatives				
State GA						Zip 30317-2365
Aff. Comm.						
First Name / Business Name Jessica	Date 11/21/2017	Occupation  Federal government	<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. \$54.00	Est. Value \$0.00	
Last Name Reichard					Description	
Address 805 Peachtree St NE						
Address2 Unit 415						
City Atlanta	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer HHS				
State GA						Zip 30308-6015
Aff. Comm.						

**Itemized Contribution Page Total**

\$658.00

\$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 Thomas	Date 11/16/2017	Occupation Analyst	<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. \$50.00	Est. Value \$0.00
Last Name Keane					
Address 3150 Evelyn St					
Address2					
City Tucker					
State GA					Zip 30084-5101
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Cdc			Description
First Name / Business Name Paula	Date 11/26/2017	Occupation Municipal Permitting	<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. \$34.00	Est. Value \$0.00
Last Name Kupersmith					
Address 350 Peters St SW					
Address2 Unit 15					
City Atlanta					
State GA					Zip 30313-1126
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer NOVA Engineering and Environmental			Description
First Name / Business Name Nse	Date 11/15/2017	Occupation Executive Director	<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. \$101.00	Est. Value \$0.00
Last Name Ufot					
Address 55 Springside Dr SE					
Address2					
City Atlanta					
State GA					Zip 30354-2145
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer New Georgia Project			Description

Itemized Contribution Page Total

\$185.00

\$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 Dylan	Date 11/27/2017	Occupation Congressional Staffer	<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. \$104.00	Est. Value \$0.00
Last Name Nurse					
Address 247 Kettlewood Dr SW					
Address2					
City Lilburn					
State GA					Zip 30047-5127
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer United States House of Representatives			Description
First Name / Business Name Alexander	Date 11/08/2017	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 Rhodeen					
Address 3535 Roswell Rd NE					
Address2 G4					
City Atlanta					
State GA					Zip 30305-1257
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 Mitchell	Date 11/15/2017	Occupation Partner	<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 Reiner					
Address 200 Sandy Springs Pl					
Address2					
City Atlanta					
State GA					Zip 30328-3854
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Capital Investment Advisors			Description

**Itemized Contribution Page Total**

\$1,754.00

\$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 Damian	Date 11/14/2017	Occupation Scientist	<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. \$50.00	Est. Value \$0.00		
Last Name Denson							
Address 775 Monroe Dr NE							
Address2 Apt 1		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer CDC		Description	
City Atlanta							
State GA					Zip 30308-1746		
Aff. Comm.							
First Name / Business Name Michele	Date 11/29/2017	Occupation Director, Volunteer Program	<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. \$250.00	Est. Value \$0.00		
Last Name Wiesner							
Address 500 Suddeth Rd							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Hire Heroes USA		Description	
City Colbert							
State GA					Zip 30628-1716		
Aff. Comm.							
First Name / Business Name Patrick	Date 11/27/2017	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. \$400.00	Est. Value \$0.00		
Last Name Croke							
Address 1701 N North Park Ave							
Address2 Apt 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Sidley Austin LLP		Description	
City Chicago							
State IL					Zip 60614-5757		
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 Mark	Date 11/17/2017	Occupation 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. \$250.00	Est. Value \$0.00	
Last Name Curran					Description	
Address 234 Bradberry St SW						
Address2						
City Atlanta						
State GA						
Zip 30313-1306					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Bayer Properties
Aff. Comm.	Description					
First Name / Business Name Gene						
Last Name Kansas						
Address 44 Inman Cir NE						
Address2						
City Atlanta	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Gene Kansas Commercial Real Estate	<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. \$50.00		
State GA					Description	
Zip 30309-3332						
Aff. Comm.						
First Name / Business Name SUSAN						
Last Name COBB						
Address 510 Hopkins St SW					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Not Employed
Address2	Description					
City Atlanta						
State GA						
Zip 30310-1624						
Aff. Comm.						

**Itemized Contribution Page Total**

\$425.00

\$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 Rebecca	Date 11/20/2017	Occupation Florida State Director	<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. \$25.00	Est. Value \$0.00		
Last Name Guerra							
Address 14401 S Military Trl							
Address2 Apt B203		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer State Voices		Description	
City Delray Beach							
State FL					Zip 33484-3897		
Aff. Comm.							
First Name / Business Name Christopher	Date 11/16/2017	Occupation CEO	<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. \$101.00	Est. Value \$0.00		
Last Name PLAMP							
Address 305 Hickory Ridge Ct							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Hire Hero USA		Description	
City Canton							
State GA					Zip 30115-6628		
Aff. Comm.							
First Name / Business Name Bjorn	Date 11/15/2017	Occupation Engineer	<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. \$50.00	Est. Value \$0.00		
Last Name Cole							
Address 794 Ralph McGill Blvd NE							
Address2 Unit 13		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer GTRI		Description	
City Atlanta							
State GA					Zip 30312-1104		
Aff. Comm.							

**Itemized Contribution Page Total**

\$176.00

\$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 Aaron	Date 11/16/2017	Occupation Marketing	<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. \$101.00	Est. Value \$0.00	
Last Name Rosenthal						
Address 118 Wolcott St						
Address2 Apt A	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer NGDATA			Description	
City Brooklyn						
State NY						Zip 11231-1226
Aff. Comm.						
First Name / Business Name Michael	Date 11/27/2017	Occupation Sales	<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. \$101.00	Est. Value \$0.00	
Last Name Loibikis						
Address 6447 W 84th St						
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Mass Appeal			Description	
City Los Angeles						
State CA						Zip 90045-2867
Aff. Comm.						
First Name / Business Name Colleen	Date 11/17/2017	Occupation Senior Council Aide	<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. \$101.00	Est. Value \$0.00	
Last Name Kiernan						
Address 839 Ormewood 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 City of Atlanta			Description	
City Atlanta						
State GA						Zip 30316-2442
Aff. Comm.						

**Itemized Contribution Page Total**

\$303.00

\$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 Michael	Date 11/29/2017	Occupation Supervisor	<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. \$250.00	Est. Value \$0.00
Last Name Mamach					
Address 2720 State St					
Address2 Apt 19	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> Inkind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer Medtronic			Description
City Hamden					
State CT				Zip 06517-2238	
Aff. Comm.					
First Name / Business Name Juliana	Date 11/08/2017	Occupation Client Services	<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. \$101.00	Est. Value \$0.00
Last Name Illari					
Address 4005 Penhurst Dr					
Address2	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> Inkind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer Southern Field & Strategy			Description
City Marietta					
State GA				Zip 30062-6162	
Aff. Comm.					
First Name / Business Name Pam	Date 11/13/2017	Occupation Retired	<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. \$101.00	Est. Value \$0.00
Last Name Revie-Pettersen					
Address 167 Peachtree St 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 30303-3621	
Aff. Comm.					

**Itemized Contribution Page Total**

\$452.00

\$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 IBPO 623	Date 11/21/2017	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 581 Joseph E Boone Blvd NW					
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					
Aff. Comm.					
First Name / Business Name Uriah	Date 11/10/2017	Occupation  Real Estate	<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. \$101.00	Est. Value \$0.00
Last Name Gilmore					
Address 925B Peachtree St NE					
Address2 # 216		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Investor Solutions Realty	Description
City Atlanta					
State GA					
Aff. Comm.					
First Name / Business Name Sarah	Date 11/10/2017	Occupation  Marketing 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. \$25.00	Est. Value \$0.00
Last Name Beeson					
Address 120 Hamilton Way					
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Oasis Consulting Services	Description
City Roswell					
State GA					
Aff. Comm.					

**Itemized Contribution Page Total**

\$1,126.00

\$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 Bjorn	Date 11/27/2017	Occupation Engineer	<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. \$54.00	Est. Value \$0.00		
Last Name Cole							
Address 794 Ralph McGill Blvd NE							
Address2 Unit 13					<input checked="" type="checkbox"/> Monetary	Employer GTRI	Description
City Atlanta					<input type="checkbox"/> Inkind		
State GA					<input type="checkbox"/> Common Source		
Zip 30312-1104					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							
First Name / Business Name John	Date 11/13/2017	Occupation Industrial Supply	<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. \$25.00	Est. Value \$0.00		
Last Name Koch							
Address 3432 Archgate Ct							
Address2					<input checked="" type="checkbox"/> Monetary	Employer McMaster-Carr Supply Co	Description
City Milton					<input type="checkbox"/> Inkind		
State GA					<input type="checkbox"/> Common Source		
Zip 30004-3246					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							
First Name / Business Name Bee	Date 11/12/2017	Occupation Chief of Staff	<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. \$101.00	Est. Value \$0.00		
Last Name Nguyen							
Address 212 Flora Ave NE							
Address2					<input checked="" type="checkbox"/> Monetary	Employer Sam for Georgia	Description
City Atlanta					<input type="checkbox"/> Inkind		
State GA					<input type="checkbox"/> Common Source		
Zip 30307-2716					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							

**Itemized Contribution Page Total**

\$180.00

\$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 Paula	Date 11/17/2017	Occupation Municipal Permitting	<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. \$101.00	Est. Value \$0.00
Last Name Kupersmith					
Address 350 Peters St SW					
Address2 Unit 15					
City Atlanta					
State GA					Zip 30313-1126
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer NOVA Engineering and Environmental			Description
First Name / Business Name Wilma Baker	Date 11/08/2017	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. \$101.00	Est. Value \$0.00
Last Name Hill					
Address 9142 S Hamilton Ave					
Address2					
City Chicago					
State IL					Zip 60643-6436
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 Georgia Hotel & Lodging Association HotelPAC, Inc.	Date 11/10/2017	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. \$250.00	Est. Value \$0.00
Last Name					
Address 233 Peachtree St NE					
Address2 Ste 1400					
City Atlanta					
State GA					Zip 30303-1507
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

Itemized Contribution Page Total

\$452.00

\$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 Anne	Date 11/27/2017	Occupation Owner	<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. \$34.00	Est. Value \$0.00
Last Name Seymour					
Address 1002 Lena St NW					
Address2					
City Atlanta					
State GA					Zip 30314-2924
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Dixon Rye			Description
First Name / Business Name David	Date 11/08/2017	Occupation Marketing Coordinator	<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. \$25.00	Est. Value \$0.00
Last Name Berman					
Address 1101 Storybrook Dr					
Address2					
City Washington Court House					
State OH					Zip 43160-2602
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Ohio National Financial Services			Description
First Name / Business Name Caitlin	Date 11/01/2017	Occupation Paralegal	<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. \$34.00	Est. Value \$0.00
Last Name Queen					
Address 907 Argonne Ave NE					
Address2 Apt 4					
City Atlanta					
State GA					Zip 30309-4253
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Swift Currie			Description

Itemized Contribution Page Total

\$93.00

\$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 Pam	Date 11/26/2017	Occupation Retired	<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. \$104.00	Est. Value \$0.00
Last Name Revie-Pettersen					
Address 167 Peachtree St SW					
Address2					
City Atlanta					
State GA					Zip 30303-3621
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 Abe	Date 11/08/2017	Occupation Green building 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. \$50.00	Est. Value \$0.00
Last Name Kruger					
Address 478 Gift Ave SE					
Address2					
City Atlanta					
State GA					Zip 30316-1554
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Kruger Sustainability Group			
First Name / Business Name Allison	Date 11/09/2017	Occupation Nonprofit	<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. \$50.00	Est. Value \$0.00
Last Name Hood					
Address 216 Norwood Ave NE					
Address2					
City Atlanta					
State GA					Zip 30317-1210
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer VOX Teen Communications			

**Itemized Contribution Page Total**

\$204.00

\$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 Richard	Date 11/16/2017	Occupation Consultant	<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. \$101.00	Est. Value \$0.00
Last Name McDaniel					
Address 1028 Parsons St SW					
Address2					
City Atlanta					
State GA					Zip 30314-3134
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer The Invia Group			
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				
First Name / Business Name Kevin	Date 11/22/2017	Occupation 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 Zhang					
Address 12421 Uinta St					
Address2					
City Brighton					
State CO					Zip 80602-5211
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer CA Wholesale			
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				
First Name / Business Name Rebecca	Date 11/10/2017	Occupation Florida State Director	<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. \$50.00	Est. Value \$0.00
Last Name Guerra					
Address 14401 S Military Trl					
Address2 Apt B203					
City Delray Beach					
State FL					Zip 33484-3897
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary	Employer State Voices			
	<input type="checkbox"/> Inkind				
	<input type="checkbox"/> Common Source				
	<input type="checkbox"/> Credit Received on Loan				

Itemized Contribution Page Total

\$1,551.00

\$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 Eric	Date 11/09/2017	Occupation Lawyer	<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. \$250.00	Est. Value \$0.00
Last Name Spengler					
Address 1913 Union St					
Address2					
City Charlotte					
State NC					Zip 28205-2351
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Spengler & Agans, PLLC			Description
First Name / Business Name Ira	Date 11/10/2017	Occupation Developer	<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. \$25.00	Est. Value \$0.00
Last Name Kaplan					
Address 425 Texas St					
Address2					
City San Francisco					
State CA					Zip 94107-2932
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Arup			Description
First Name / Business Name Vicki	Date 11/19/2017	Occupation Partnership Specialist	<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. \$25.00	Est. Value \$0.00
Last Name Mack					
Address 3300 Dogwood Dr					
Address2 Unit 217					
City Atlanta					
State GA					Zip 30354-1483
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Census Bureau			Description

**Itemized Contribution Page Total**

\$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 Sarabess	Date 11/15/2017	Occupation  Dentist	<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. \$250.00	Est. Value \$0.00		
Last Name Baumrind							
Address 100 Peachtree St NW							
Address2 Ste 1820					<input checked="" type="checkbox"/> Monetary	Employer Drs Baumrind, Baumrind & Jain	Description
City Atlanta					<input type="checkbox"/> Inkind		
State GA					<input type="checkbox"/> Common Source		
Zip 30303-1914					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							
First Name / Business Name Matthew	Date 11/22/2017	Occupation  Manager of State Affairs	<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. \$250.00	Est. Value \$0.00		
Last Name Ralston							
Address 9431 Blue Ridge Dr							
Address2 SUITE 5200					<input checked="" type="checkbox"/> Monetary	Employer Troutman Sanders	Description
City Blue Ridge					<input type="checkbox"/> Inkind		
State GA					<input type="checkbox"/> Common Source		
Zip 30513-4116					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							
First Name / Business Name Thomas	Date 11/21/2017	Occupation  Architect	<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. \$104.00	Est. Value \$0.00		
Last Name Butler							
Address 65 Bill Lucas Dr SE							
Address2					<input checked="" type="checkbox"/> Monetary	Employer Kronberg Wall	Description
City Atlanta					<input type="checkbox"/> Inkind		
State GA					<input type="checkbox"/> Common Source		
Zip 30315-1254					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							

Itemized Contribution Page Total

\$604.00

\$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 Steve	Date 11/20/2017	Occupation Real Estate	<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. \$500.00	Est. Value \$0.00		
Last Name Brock							
Address 1689 Ashebark Ct							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Brock Built Homes			
City Marietta							
State GA							Zip 30068-1856
Aff. Comm.							
First Name / Business Name Allison	Date 11/12/2017	Occupation Animator	<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. \$101.00	Est. Value \$0.00		
Last Name Orr							
Address 191 High Point Dr							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer MPC			
City Wadsworth							
State OH							Zip 44281-2332
Aff. Comm.							
First Name / Business Name Atlanta Realtors PAC	Date 11/28/2017	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 5784 Lake Forrest Dr							
Address2		<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 30328-6203
Aff. Comm.							

**Itemized Contribution Page Total**

\$2,001.00

\$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 Jon	Date 11/17/2017	Occupation Military Officer	<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. \$101.00	Est. Value \$0.00		
Last Name Page					Description		
Address 191 Somervelle St							
Address2 Apt 411						<input checked="" type="checkbox"/> Monetary	
City Alexandria						<input type="checkbox"/> Inkind	
State VA						Zip 22304-8216	<input type="checkbox"/> Common Source
Aff. Comm.						<input type="checkbox"/> Credit Received on Loan	
First Name / Business Name Griffin	Date 11/27/2017	Occupation Structural Engineer	<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. \$254.00	Est. Value \$0.00		
Last Name Wasdin					Description		
Address 1006 Emerson Ave SE							
Address2 Unit 1553						<input checked="" type="checkbox"/> Monetary	
City Atlanta						<input type="checkbox"/> Inkind	
State GA						Zip 30316-2421	<input type="checkbox"/> Common Source
Aff. Comm.						<input type="checkbox"/> Credit Received on Loan	
First Name / Business Name Vicki	Date 11/08/2017	Occupation Partnership 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. \$50.00	Est. Value \$0.00		
Last Name Mack					Description		
Address 3300 Dogwood Dr							
Address2 Unit 217						<input checked="" type="checkbox"/> Monetary	
City Atlanta						<input type="checkbox"/> Inkind	
State GA						Zip 30354-1483	<input type="checkbox"/> Common Source
Aff. Comm.						<input type="checkbox"/> Credit Received on Loan	

**Itemized Contribution Page Total**

\$405.00

\$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 Ira	Date 11/08/2017	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. \$25.00	Est. Value \$0.00
Last Name Kaplan					
Address 425 Texas St					
Address2					
City San Francisco					
State CA					Zip 94107-2932
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Arup			Description
First Name / Business Name Windsor Street Supermarket	Date 11/28/2017	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. \$500.00	Est. Value \$0.00
Last Name					
Address 307 Richardson St SW					
Address2					
City Atlanta					
State GA					Zip 30312-2630
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 Patrick	Date 11/21/2017	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. \$154.00	Est. Value \$0.00
Last Name Fagan					
Address 761 Piedmont Way NE					
Address2					
City Atlanta					
State GA					Zip 30324-5121
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Bondurant Mixson & Elmore LLP			Description

**Itemized Contribution Page Total**

\$679.00

\$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 Allison  Last Name Hood  Address 216 Norwood Ave NE  Address2  City Atlanta  State GA      Zip 30317-1210  Aff. Comm.	Date 11/24/2017  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Nonprofit  Employer VOX Teen Communications	<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. \$34.00	Est. Value \$0.00  Description
First Name / Business Name Jonathan  Last Name Rogers  Address 1416 Oldfield Rd  Address2  City Decatur  State GA      Zip 30030-4553  Aff. Comm.	Date 11/08/2017  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Minister  Employer Unitarian Universalist Congregation of Atlanta	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary 2017	Cash Amt. \$50.00	Est. Value \$0.00  Description
First Name / Business Name NICHOLAS  Last Name JULIANO  Address 215 North Ave NE  Address2 Apt 3208  City Atlanta  State GA      Zip 30308-2443  Aff. Comm.	Date 11/10/2017  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Public Affairs  Employer Uber Technologies	<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. \$150.00	Est. Value \$0.00  Description

**Itemized Contribution Page Total**

\$234.00

\$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 KRista	Date 11/20/2017	Occupation retired	<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. \$150.00	Est. Value \$0.00
Last Name Brewer					
Address 812 Springdale Rd NE, N/A					
Address2 Atlanta					
City Atlanta					
State GA					Zip 30306
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 Omar	Date 11/08/2017	Occupation Banker	<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. \$50.00	Est. Value \$0.00
Last Name Esposito					
Address 3885 Captain Dr					
Address2					
City Chamblee					
State GA					Zip 30341-1869
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Stackfolio			
First Name / Business Name Louis	Date 11/01/2017	Occupation Political 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. \$25.00	Est. Value \$0.00
Last Name Elrod					
Address 430 Kensington Parc Way					
Address2					
City Avondale Estates					
State GA					Zip 30002-1777
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Better Georgia			

**Itemized Contribution Page Total**

\$225.00

\$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 Amir	Date 11/14/2017	Occupation Consultant	<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. \$250.00	Est. Value \$0.00
Last Name Farokhi					
Address 422 Glen Iris Dr NE					
Address2					
City Atlanta					
State GA					Zip 30308-2919
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer BrightHouse LLC			Description
First Name / Business Name Nathan	Date 11/15/2017	Occupation ALJ	<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. \$25.00	Est. Value \$0.00
Last Name Brown					
Address 48 Woodhaven Dr					
Address2					
City Huntington					
State WV					Zip 25701-9331
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Social Security Administration			Description
First Name / Business Name Meher	Date 11/09/2017	Occupation Salesforce Administrator	<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. \$250.00	Est. Value \$0.00
Last Name Peddu					
Address 11120 Donnington Dr					
Address2					
City Duluth					
State GA					Zip 30097-8415
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Hire Heroes USA			Description

**Itemized Contribution Page Total**

\$525.00

\$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 Caitlin	Date 11/16/2017	Occupation Paralegal	<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. \$50.00	Est. Value \$0.00		
Last Name Queen							
Address 907 Argonne Ave NE							
Address2 Apt 4					<input checked="" type="checkbox"/> Monetary	Employer Swift Currie	
City Atlanta					<input type="checkbox"/> Inkind		Description
State GA					<input type="checkbox"/> Common Source		
Zip 30309-4253					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							
First Name / Business Name Jason	Date 11/27/2017	Occupation Vice President	<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. \$254.00	Est. Value \$0.00		
Last Name O'Rourke							
Address 2595 Forrest Way NE							
Address2					<input checked="" type="checkbox"/> Monetary	Employer Georgia Chamber	
City Atlanta					<input type="checkbox"/> Inkind		Description
State GA					<input type="checkbox"/> Common Source		
Zip 30305-3771					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							
First Name / Business Name Matthew	Date 11/27/2017	Occupation Real estate	<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. \$200.00	Est. Value \$0.00		
Last Name Short							
Address 481 George St							
Address2					<input checked="" type="checkbox"/> Monetary	Employer Self	
City New Haven					<input type="checkbox"/> Inkind		Description
State CT					<input type="checkbox"/> Common Source		
Zip 06511-5403					<input type="checkbox"/> Credit Received on Loan		
Aff. Comm.							

**Itemized Contribution Page Total**

\$504.00

\$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 11/10/2017	Occupation Dentist	<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. \$101.00	Est. Value \$0.00	
Last Name Stilwill						
Address 501 Bay East Dr						
Address2						
City Traverse City	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> Inkind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Employer Beers and Stilwill Family Dent			Description	
State MI			Zip 49686-1660			
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		Date 11/03/2017	Occupation	campaign travel expense	\$7.80
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 555 Market St					
Address2					
City San Francisco					
State CA	Zip 94105-2800				
First Name Sam & Son Grocery Wholesale				Date 11/06/2017	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 290 University Ave SW					
Address2					
City Atlanta					
State GA	Zip 30310-3628				
First Name Kroger				Date 11/27/2017	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 800 Glenwood Ave SE					
Address2					
City Atlanta					
State GA	Zip 30316-1814				

Page Total \$268.66

\* 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 Jason Dozier for Atlanta

Page 28 of 51

# 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 Citizens Trust Bank  Last Name  Address 75 Piedmont Ave NE  Address2 Ste C  City Atlanta  State GA      Zip 30303-2569	Date 11/25/2017  <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	banking fees	\$5.00   <div style="background-color: #cccccc; height: 100px;"></div>
First Name Bridget  Last Name Gibson  Address   Address2   City   State      Zip	Date 11/19/2017  <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 Information Requested  Employer Information Requested	canvassing	\$155.00   <div style="background-color: #cccccc; height: 100px;"></div>
First Name Ross  Last Name  Address 1255 Caroline St NE  Address2   City Atlanta  State GA      Zip 30307-2705	Date 10/31/2017  <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	Supplies for senior bingo	\$43.15   <div style="background-color: #cccccc; height: 100px;"></div>

Page Total \$203.15

\* 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 Jason Dozier for Atlanta

Page 29 of 51

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 Chasity	Date 11/07/2017	Occupation Information Requested	canvassing	\$83.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 Ezekiel	Date 10/31/2017	Occupation Information Requested	canvassing	\$73.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 Ezekiel	Date 11/06/2017	Occupation Information Requested	canvassing	\$33.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				

Page Total \$189.00

\* 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 Jason Dozier for Atlanta

Page 30 of 51

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 11/07/2017	Occupation	online ads	\$326.20
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 1 Hacker Way				
Address2				
City Menlo Park				
State CA				
First Name VistaPrint	Date 10/27/2017	Occupation	business cards	\$77.74
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 100 Hayden Ave				
Address2				
City Lexington				
State MA				
First Name NGP VAN INC	Date 11/19/2017	Occupation	software update	\$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 1445 New York Ave NW				
Address2 Ste 200				
City Washington				
State DC				

Page Total \$473.94

\* 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 Jason Dozier for Atlanta

Page 31 of 51



# 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 Chasity	Date 10/30/2017	Occupation Information Requested	canvassing	\$63.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 A Small Orange	Date 11/28/2017	Occupation	website hosting	\$25.00
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 2500 Ridgepoint Dr				
Address2				
City Austin				
State TX				
First Name Uber	Date 11/06/2017	Occupation	travel expense	\$7.67
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 555 Market St				
Address2				
City San Francisco				
State CA				

Page Total \$95.67

\* 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 Jason Dozier for Atlanta

Page 32 of 51

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 Media Inc	Date 11/27/2017	Occupation	campaign mail expense	\$8,941.14
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 404 Brightling Way				
Address2				
City Holly Springs				
State NC				
First Name Media Inc	Date 11/15/2017	Occupation	campaign literature	\$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 404 Brightling Way				
Address2				
City Holly Springs				
State NC				
First Name Ezekiel	Date 11/25/2017	Occupation Information Requested	canvassing	\$263.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				

Page Total \$10,704.14

\* 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 Jason Dozier for Atlanta

Page 33 of 51

# 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 Montana	Date 11/19/2017	Occupation Information Requested	canvassing	\$200.00
Last Name Man	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 Kroger	Date 10/31/2017	Occupation	Supplies for senior bingo	\$50.78
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 800 Glenwood Ave SE				
Address2				
City Atlanta				
State GA				
First Name Chasity	Date 11/03/2017	Occupation Information Requested	canvassing	\$53.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				

Page Total \$303.78

\* 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 Jason Dozier for Atlanta

Page 34 of 51

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 Chasity	Date 11/07/2017	Occupation Information Requested	canvassing	\$106.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 Chick-Fil-A	Date 11/27/2017	Occupation	food for fundraiser	\$85.49
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				
Address2				
City				
State				
First Name Ezekiel	Date 10/31/2017	Occupation Information Requested	canvassing	\$63.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				

Page Total \$254.49

\* 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 Jason Dozier for Atlanta

Page 35 of 51

# 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 Ezekiel		Date 11/02/2017	Occupation Information Requested	canvassing	\$63.00
Last Name Belcher		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				
First Name Facebook		Date 11/07/2017	Occupation	online ads	\$197.97
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 1 Hacker Way					
Address2					
City Menlo Park					
State CA	Zip 94025-1456				
First Name Foxhole Strategies		Date 10/26/2017	Occupation	fundraising consultant	\$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 901 Underwood Ave SE					
Address2					
City Atlanta					
State GA	Zip 30316-2573				

Page Total \$1,760.97

\* 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 Jason Dozier for Atlanta

Page 36 of 51

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 TJ	Date 11/19/2017	Occupation Consultant	field consulting	\$1,500.00
Last Name Copeland	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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		
Address 433 Highland Ave NE				
Address2				
City Atlanta				
State GA				
First Name A Small Orange	Date 11/17/2017	Occupation	website hosting	\$88.00
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 2500 Ridgepoint Dr				
Address2				
City Austin				
State TX				
First Name Facebook	Date 11/01/2017	Occupation	online ads	\$227.36
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 1 Hacker Way				
Address2				
City Menlo Park				
State CA				

Page Total \$1,815.36

\* 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 Jason Dozier for Atlanta

Page 37 of 51

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 Enterprise	Date 11/09/2017	Occupation	travel expense	\$101.19
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 116 Ted Turner Dr SW				
Address2				
City Atlanta				
State GA				
First Name Uber	Date 11/06/2017	Occupation	travel expense	\$8.88
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 555 Market St				
Address2				
City San Francisco				
State CA				
First Name Fedex	Date 10/26/2017	Occupation	overnight mail expense	\$36.90
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 100 Peachtree St NE #101,				
Address2				
City Atlanta				
State GA				

Page Total \$146.97

\* 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 Jason Dozier for Atlanta

Page 38 of 51

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 Ezekiel	Date 11/07/2017	Occupation Information Requested	poll watching	\$123.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				
First Name Citizens Trust Bank	Date 11/03/2017	Occupation	merchant fees	\$75.83
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 75 Piedmont Ave NE				
Address2 Ste C				
City Atlanta				
State      Zip GA      30303-2569				
First Name Chasity	Date 11/11/2017	Occupation Information Requested	canvassing	\$53.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 \$251.83

\* 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 Jason Dozier for Atlanta

Page 39 of 51



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 Ezekiel	Date 11/02/2017	Occupation Information Requested	canvassing	\$53.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				
First Name Facebook	Date 11/07/2017	Occupation	online ads	\$173.80
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 1 Hacker Way				
Address2				
City Menlo Park				
State      Zip CA      94025-1456				
First Name Ezekiel	Date 10/26/2017	Occupation Information Requested	canvassing	\$43.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 \$269.80

\* 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 Jason Dozier for Atlanta

Page 40 of 51

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 Monday Night Brewing	Date 11/27/2017	Occupation	event expense	\$192.50
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 670 Trabert Ave NW				
Address2				
City Atlanta				
State GA		Zip 30318-4230		
First Name Facebook	Date 11/01/2017	Occupation	online ads	\$11.10
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 1 Hacker Way				
Address2				
City Menlo Park				
State CA		Zip 94025-1456		
First Name Chick-Fil-A	Date 11/03/2017	Occupation	Food for senior bingo	\$85.49
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				
Address2				
City				
State		Zip		

Page Total \$289.09

\* 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 Jason Dozier for Atlanta

Page 41 of 51

# 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	Date 11/06/2017	Occupation	travel expense	\$14.91
Last Name	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 555 Market St				
Address2				
City San Francisco				
State CA				
First Name VoterCircle	Date 11/17/2017	Occupation	software apps for campaign	\$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 174 Pepper Dr				
Address2				
City Los Altos				
State CA				
First Name Citizens Trust Bank	Date 11/03/2017	Occupation	merchant fees	\$74.86
Last Name	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address 75 Piedmont Ave NE				
Address2 Ste C				
City Atlanta				
State GA				

Page Total \$239.77

\* 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 Jason Dozier for Atlanta

Page 42 of 51

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 A Small Orange	Date 10/31/2017	Occupation	website hosting	\$25.00
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 2500 Ridgepoint Dr				
Address2				
City Austin				
State TX				
First Name Chasity	Date 11/01/2017	Occupation Information Requested	canvassing	\$63.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 Chasity	Date 11/06/2017	Occupation Information Requested	canvassing	\$33.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				

Page Total \$121.00

\* 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 Jason Dozier for Atlanta

Page 43 of 51

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 Foxhole Strategies	Date 11/01/2017	Occupation	fundraising consultant	\$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 901 Underwood Ave SE				
Address2				
City Atlanta				
State GA				
First Name Ezekiel			Date 11/07/2017	Occupation Information Requested
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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	
First Name Facebook			Date 11/07/2017	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 1 Hacker Way				
Address2				
City Menlo Park				
State CA			Zip 94025-1456	

Page Total \$1,635.03

\* 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 Jason Dozier for Atlanta

Page 44 of 51

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 Chasity	Date 10/26/2017	Occupation Information Requested	canvassing	\$43.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 Breiana	Date 11/07/2017	Occupation Information Requested	field consulting	\$550.00
Last Name Thompson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 3273 Wesley Chapel Rd				
Address2				
City Decatur				
State GA				
First Name Breiana	Date 11/01/2017	Occupation Information Requested	field consulting	\$300.00
Last Name Thompson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 3273 Wesley Chapel Rd				
Address2				
City Decatur				
State GA				

Page Total \$893.00

\* 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 Jason Dozier for Atlanta

Page 45 of 51

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 Democratic Party of Georgia	Date 11/03/2017	Occupation	robo poll expense	\$214.45
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 501 Pulliam St SW				
Address2 Ste 400				
City Atlanta				
State GA				
First Name VistaPrint	Date 11/09/2017	Occupation	business cards	\$134.45
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 100 Hayden Ave				
Address2				
City Lexington				
State MA				
First Name Chasity	Date 11/07/2017	Occupation Information Requested	poll watching	\$123.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				

Page Total \$471.90

\* 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 Jason Dozier for Atlanta

Page 46 of 51

# 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	Date 11/03/2017	Occupation	travel expense	\$6.67
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 555 Market St				
Address2				
City San Francisco				
State CA				
First Name Fallen Arrows	Date 11/08/2017	Occupation	campaign tshirts	\$299.81
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 50 Waverly Way NE				
Address2				
City Atlanta				
State GA				
First Name Citizens Trust Bank	Date 11/03/2017	Occupation	merchant fees	\$12.67
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 75 Piedmont Ave NE				
Address2 Ste C				
City Atlanta				
State GA				

Page Total \$319.15

\* 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 Jason Dozier for Atlanta

Page 47 of 51



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 Stevie	Date 11/19/2017	Occupation Information Requested	canvassing	\$155.00
Last Name Sterling	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 Chasity	Date 11/02/2017	Occupation Information Requested	canvassing	\$63.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 Ezekiel	Date 11/01/2017	Occupation Information Requested	canvassing	\$63.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				

Page Total \$281.00

\* 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 Jason Dozier for Atlanta

Page 48 of 51

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 Ezekiel	Date 11/07/2017	Occupation Information Requested	canvassing	\$106.00
Last Name Belcher	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				
First Name A Small Orange	Date 10/29/2017	Occupation	server costs	\$25.00
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 2500 Ridgepoint Dr				
Address2				
City Austin				
State      Zip TX      78754-5250				
First Name VoterCircle	Date 11/21/2017	Occupation	software update	\$60.00
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 174 Pepper Dr				
Address2				
City Los Altos				
State      Zip CA      94022-3716				

Page Total \$191.00

\* 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 Jason Dozier for Atlanta

Page 49 of 51

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 Chasity	Date 10/31/2017	Occupation Information Requested	canvassing	\$73.00
Last Name Vinson	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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				
First Name Google	Date 11/01/2017	Occupation	software apps for campaign	\$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 1600 Ampitheater Parkway				
Address2				
City Mountain View				
State      Zip CA      94043				

Page Total      \$113.00

\* 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      Jason Dozier for Atlanta

Page      50      of      51

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.