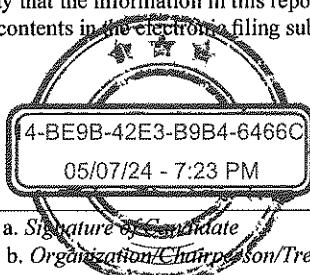


Campaign Contribution Disclosure Report			
Georgia Government Transparency and Campaign Finance Commission			
200 Piedmont Avenue S.E. Suite 1416 West Tower Atlanta, GA 30334 404-463-1980 www.ethics.ga.gov			
1. Report Type (Select One)	2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought <u>Sheriff</u> <small>(Include county, municipality, district, post or judicial seat)</small> <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment Amendment # _____		
	Filer ID _____ <small>(Filer ID that begins with the letter "C")</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee to Elect John Q. Williams</u> Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>		
	Use Earlier of Post Mark or Hand-Delivered Date		
3. Identifying and Contact Information			
(1) Committee to Elect John Q. Williams		(2) <u>05/07/2024</u> <small>Today's Date</small>	
Full Name of Candidate or Other Than Candidate Campaign Committee Name			
(3) <u>518 Edgewood Dr</u>		<u>Athens</u>	<u>GA</u> <u>30606</u>
<u>Mailing Address</u>		<u>City</u>	<u>State</u> <u>Zip Code</u>
(4) <u>(706) 363-0513</u>		<u>and/or</u> <u>johnforathens@gmail.com</u>	
<u>Primary Contact Phone Number</u>		<u>E-Mail</u>	
(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(6) If yes, is the committee registered with the Commission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(7) If yes, complete the following: <u>Mo Pippin</u>		<u>Gregory A Vanden Heuvel</u>	
4. Period for which you are Reporting			
You Must Check Only One Box			
My Non-Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Election
<input type="checkbox"/> June 30, _____ (year) <input checked="" type="checkbox"/> December 31, _____ (year)	<input type="checkbox"/> January 31, _____ (year) <input checked="" type="checkbox"/> April 30, <u>2024</u> (year) <input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> September 30, _____ (year) <input type="checkbox"/> October 25, _____ (year) <input type="checkbox"/> Dec. 31, _____ (year)	<input type="checkbox"/> 6 days before Primary Run-Off _____ (year) <input type="checkbox"/> 6 days before General Run-Off _____ (year) <input type="checkbox"/> 6 days before Special Primary Run-Off _____ (year) <input type="checkbox"/> 6 days before Special Run-Off _____ (year)	<input type="checkbox"/> 15 days before Special Primary, _____ (year) <input type="checkbox"/> 15 days before Special, _____ (year) <input type="checkbox"/> Dec. 31, _____ (year)
Supplemental Reporting			
<input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)			
<small>*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34i</small>			
<u>State of _____</u>		<u>County of _____</u>	
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 _____			
<u>Signature of Notary Public</u>		<u>Commission Expiration</u>	
			
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.	\$119.76	\$8,560.73
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$6,955.00
3a	All loans received this reporting period.		\$480.00
3b	Interest earned on campaign account this reporting period.		\$0.00
3c	Total amount of investments sold this reporting period.		\$0.00
3d	Total amount of cash dividends and interest paid out this reporting period.		\$0.00
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.	\$0.00	\$781.50
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$0.00	\$8,216.50
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$119.76	\$16,777.23

EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	\$0.00	\$6,034.80
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$8,171.79
10	Total amount of all separate expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page	\$0.00	\$357.25
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$8,529.04
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$14,563.84

INVESTMENTS

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

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)	\$119.76	\$2,213.39
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* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

<u>Election Cycle*</u> :		<u>Election Year:</u>	<u>Amount</u>
1 Outstanding indebtedness at the beginning of this reporting period.			\$0.00
2 Loans received this reporting period.			\$0.00
3 Deferred payment of expenses this reporting period			\$0.00
4 Payments made on loans this reporting period.			\$0.00
5 Credits received on loans this reporting period			\$0.00
6 Payments this reporting period on previously deferred expenses.			\$0.00
7 Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)			\$0.00
<u>Election Cycle*</u> :		<u>Election Year:</u>	<u>Amount</u>
1 Outstanding indebtedness at the beginning of this reporting period.			\$0.00
2 Loans received this reporting period.			\$0.00
3 Deferred payment of expenses this reporting period			\$0.00
4 Payments made on loans this reporting period.			\$0.00
5 Credits received on loans this reporting period			\$0.00
6 Payments this reporting period on previously deferred expenses.			\$0.00
7 Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)			\$0.00
<u>Election Cycle*</u> :		<u>Election Year:</u>	<u>Amount</u>
1 Outstanding indebtedness at the beginning of this reporting period.			\$0.00
2 Loans received this reporting period.			\$0.00
3 Deferred payment of expenses this reporting period			\$0.00
4 Payments made on loans this reporting period.			\$0.00
5 Credits received on loans this reporting period			\$0.00
6 Payments this reporting period on previously deferred expenses.			\$0.00
7 Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)			\$0.00

* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)
 Public Officer/Candidate/Other Than Candidate Committee Name

State of Georgia
Campaign Contribution Disclosure Report
Itemized Contributions

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

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name or Business Name Seretha	Date 2024-02-23	Occupation Educator	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Williams		Employer Augusta University			
Address 3622 Seelye Drive					Description
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Augusta University			
City Augusta					
State GA	Zip 30906				
Aff. Comm.					
First Name or Business Name Charlie	Date 2024-02-23	Occupation Realtor	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Upchurch					
Address 2405 W. Broad Street					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Coldwell Banker Upchurch Realty			Description
City Athens					
State GA	Zip 30606				
Aff. Comm.					
First Name or Business Name Robert	Date 2024-02-29	Occupation Law Enforcement	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Ivy					
Address 330 4th Ave					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Houston Police Department			Description
City Houston					
State MS	Zip 38851				
Aff. Comm.					

Itemized Contributions Page Total \$ 450.00 \$ 0.00

CFC-CCDR 1/14

First Name or Business Name Natalie		Date 2024-03-06	Occupation Not Employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$200.00	Est. Value \$0.00
Last Name Straughter						Description
Address 237 Cavalier Road						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Not Employed			
City Athens		<input type="checkbox"/> In-Kind				
State GA	Zip 30606	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name Dwight		Date 2024-03-20	Occupation Not Employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Avey						Description
Address 160, Bloomington Dr						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Not Employed			
City Athens		<input type="checkbox"/> In-Kind				
State GA	Zip 30606	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name Susan		Date 2024-03-11	Occupation Editor	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Curtis						Description
Address 535 Forest Rd						
Address2		<input checked="" type="checkbox"/> Monetary	Employer MiddleWeb LLC			
City Athens		<input type="checkbox"/> In-Kind				
State GA	Zip 30605	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name Nicola		Date 2024-04-01	Occupation Not Employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Dovey						Description
Address 210 Deerree Drive						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Not Employed			
City Athens		<input type="checkbox"/> In-Kind				
State GA	Zip 30605	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
						Itemized Contributions Page Total \$ 450.00 \$ 0.00

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

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

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

CFC-CCDR 1/14

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Susan	2024-04-04	Editor	\$100.00	\$0.00
Last Name				
Curtis				
Address				
535 Forest Rd				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
	<input type="checkbox"/> In-Kind	MiddleWeb LLC		
	<input type="checkbox"/> Common Source			
	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Karen	2024-04-06	Not Employed	\$50.00	\$0.00
Last Name				
Menke				
Address				
113 Buttonwood Loop				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
	<input type="checkbox"/> In-Kind	Not Employed		
	<input type="checkbox"/> Common Source			
	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Committee To Elect Jesse Houle	2024-04-08		\$150.00	\$0.00
Last Name				
Address				
145 Three Oaks Dr				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
	<input type="checkbox"/> In-Kind			
	<input type="checkbox"/> Common Source			
	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Legacy Commissary Services LLC	2024-02-26		\$2,500.00	\$0.00
Last Name				
Address				
2300 JL Todd Dr NE				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
	<input type="checkbox"/> In-Kind			
	<input type="checkbox"/> Common Source			
	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
Itemized Contributions Page Total				\$2,800.00
\$				\$0.00

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

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

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

CFC-CCDR 1/14

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Derek	2024-02-20	Legacy Commissary Services LLC	\$3,000.00	\$0.00
<input checked="" type="checkbox"/> Primary				
<input type="checkbox"/> General				
<input type="checkbox"/> Special				
<input type="checkbox"/> Special Primary				
<input type="checkbox"/> Run-Off Primary				
<input type="checkbox"/> Run-Off General				
<input type="checkbox"/> Run-Off Special				
<input type="checkbox"/> Run-Off Special Primary				
Last Name				
Strickland				
Address				
1170 Cedar St				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
Apt 270		CEO		
City	<input type="checkbox"/> In-Kind			
Carrollton				
State	<input type="checkbox"/> Common Source			
GA	Zip 30117			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Nancy	2024-04-20	Not Employed	\$80.00	\$0.00
<input checked="" type="checkbox"/> Primary				
<input type="checkbox"/> General				
<input type="checkbox"/> Special				
<input type="checkbox"/> Special Primary				
<input type="checkbox"/> Run-Off Primary				
<input type="checkbox"/> Run-Off General				
<input type="checkbox"/> Run-Off Special				
<input type="checkbox"/> Run-Off Special Primary				
Last Name				
Tisdale				
Address				
220 Gentry Drive				
Address2	<input type="checkbox"/> Monetary	Employer		
		Not Employed		
City	<input checked="" type="checkbox"/> In-Kind			
Athens				
State	<input type="checkbox"/> Common Source			
GA	Zip 30605			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Phyllis	2024-02-29	Not Employed	\$176.00	\$0.00
<input checked="" type="checkbox"/> Primary				
<input type="checkbox"/> General				
<input type="checkbox"/> Special				
<input type="checkbox"/> Special Primary				
<input type="checkbox"/> Run-Off Primary				
<input type="checkbox"/> Run-Off General				
<input type="checkbox"/> Run-Off Special				
<input type="checkbox"/> Run-Off Special Primary				
Last Name				
Williams				
Address				
1025 Barnett Shoals Rd				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
Unit T04		Not Employed		
City	<input type="checkbox"/> In-Kind			
Athens				
State	<input type="checkbox"/> Common Source			
GA	Zip 30605			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
			\$0.00	\$0.00
Last Name				
Address				
Address2	<input type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
Itemized Contributions Page Total				\$3,255.00
\$				\$ 0.00

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

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

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

Loan Reporting			
Name of Lender & Mailing Address	1.Date of Loan 2.Amount of Loan 3.Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1.Occupation & 2.Place of Employment 3.Fiduciary Relationship***
Lender Name (First Name, Business, Inst.) John Q	1. 2024-04-20	First Name The Committee To Elect	1.
Lender Last Name Williams	2. \$480.00	Last Name John Q Williams	2.
Address 518 Edgewood Drive	3. <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address 518 Edgewood Drive	3. <input checked="" type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City Athens		City Athens	
State GA Zip 30606		State GA Zip 30606	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2. \$0.00	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State Zip		State Zip	

Reference: OCGA § 21-5-34(b)(1)

Loan Page Total \$ 480.00

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

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

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

State of Georgia
Campaign Contribution Disclosure Report
Itemized Expenditures

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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name USPS	Date 2024-04-20	Occupation	postage	\$477.00
Last Name				
Address 3654 Atlanta Hwy	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2 Ste M				
City Athens				
State GA	Zip 30606			
First Name Democratic Party of Georgia	Date 2024-03-27	Occupation	Votebuilder access	\$1,000.00
Last Name				
Address P.O. Box 89202	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Atlanta				
State GA	Zip 30312			
First Name Freetail Videography Services	Date 2024-03-13	Occupation	videography	\$360.00
Last Name				
Address 47 Goulding Pl	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Roswell				
State GA	Zip 30075			

Page Total \$ 1,837.00

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

CFC-CCDR 1/14

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Athens-Clarke County Democratic Committee	Date 2024-03-06	Occupation	qualifying fee	\$2,891.46
Last Name				
Address address not available	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Athens				
State GA	Zip 30605			
First Name FTR Strategies	Date 2024-04-01	Occupation	campaign consulting	\$195.00
Last Name				
Address PO Box 5371	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Alpharetta				
State GA	Zip 30023			
First Name FTR Strategies	Date 2024-04-01	Occupation	campaign consulting	\$1,114.94
Last Name				
Address PO Box 5371	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Alpharetta				
State GA	Zip 30023			
First Name MinuteMan Press North Fulton	Date 2024-04-12	Occupation	printed materials	\$448.39
Last Name				
Address 2600 Old Alabama Rd	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2 #17				
City Roswell				
State GA	Zip 30076			

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)
 Public Officer/Candidate/Other Than Candidate Committee Name Page Total \$ 4,649.79

CFC-CCDR 1/14

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name SignDSign	Date 2024-04-05	Occupation	yard signs	\$485.00
Last Name		Employer		
Address 2250 Scenic Hwy N.	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2 Ste A				
City Snellville				
State GA	Zip 30078			
First Name WXAG	Date 2024-04-28	Occupation	radio advertising	\$1,200.00
Last Name		Employer		
Address 855 Sunset Drive	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2 Suite 16				
City Athens				
State GA	Zip 30606			
First Name	Date	Occupation		\$0.00
Last Name		Employer		
Address	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2				
City				
State	Zip			
First Name	Date	Occupation		\$0.00
Last Name		Employer		
Address	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Address2				
City				
State	Zip			

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment) Public Officer/Candidate/Other Than Candidate Committee Name Page Total \$ 1,685.00

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

1. Investment Name			Account #		
Institution/Person Holding Account _____			Value at beginning of reporting period \$ \$0.00		
Mailing Address _____			Value at end of reporting period \$ \$0.00		
Address2 _____			Difference in value \$ \$0.00		
City _____		State _____	Zip _____	Interest Paid Out \$ \$0.00	
				Cash Dividends \$ \$0.00	
Investment Transactions					
<u>Date</u>	<u>Person(s) Involved in Transaction</u>	<u>Value of investment purchased</u> \$0.00	<u>Value of investment sold</u> \$0.00	<u>Profit</u> \$0.00	<u>Loss</u> \$0.00
2. Investment Name			Account #		
Institution/Person Holding Account _____			Value at beginning of reporting period \$ \$0.00		
Mailing Address _____			Value at end of reporting period \$ \$0.00		
Address2 _____			Difference in value \$ \$0.00		
City _____		State _____	Zip _____	Interest Paid Out \$ \$0.00	
				Cash Dividends \$ \$0.00	
Investment Transactions					
<u>Date</u>	<u>Person(s) Involved in Transaction</u>	<u>Value of investment purchased</u> \$0.00	<u>Value of investment sold</u> \$0.00	<u>Profit</u> \$0.00	<u>Loss</u> \$0.00
<u>Total value of investments at beginning of reporting period \$</u>			Page Total Cash Dividends: \$ <u>0.00</u>		
<u>Total value of investments at end of reporting period \$</u>			Page Total Interest Paid Out: \$ <u>0.00</u>		
<u>Total difference in value \$</u>			Page Total Profit: \$ <u>0.00</u>		
			Page Total Loss: \$ <u>0.00</u>		

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.