

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

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 of Clarke County</u> (Include county, municipality, district, post or judicial circuit) Filer ID <u>F2011008884</u> (Filer ID that begins with the letter "C")	Use Earlier of Post Mark or Hand Delivered Date FEB 3 '16 PM 4:51
<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Amendment	Amendment # _____
	Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>The Committee To Re-Elect Sheriff Edwards</u> Filer ID: <u>F2011008884</u> (Filer ID that begins with the letter "NC")	02/03/2016

3. Identifying and Contact Information

(1) Ira Edwards, Jr. (2) 02/03/2016
Full Name of Candidate or Other Than Candidate Campaign Committee *Today's Date*

(3) P.O. Box 528 Athens GA. 30603
Mailing Address *City* *State* *Zip Code*

(4) (706) 410-5188 and/or sheriffedwards@hotmail.com
Primary Contact Phone Number *E-Mail*

(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? Yes No

(6) If yes, is the committee registered with the Commission? Yes No

(7) If yes, complete the following: Teresa P. Edwards Trevor Washington
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 Election
<input type="checkbox"/> January 31, _____ (year) <input type="checkbox"/> June 30, _____ (year)	<input checked="" type="checkbox"/> January 31, <u>2016</u> (year) <input type="checkbox"/> March 31, _____ (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)			

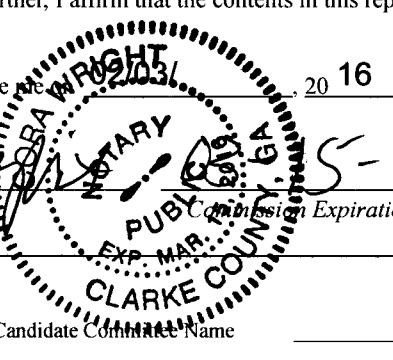
*Persons leaving office with excess funds until such funds are expended as provided in the Act
 *Unsuccessful candidates with excess funds, or who receive contributions to retire debt incurred, until such funds are expended, or such unpaid debts are satisfied (December 31 filing only)

State of GeorgiaCounty of Clarke

I, Ira Edwards, Jr., 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 02/03/2016

Signature of Notary Public



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.	0	16465.56
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		13465.00
3a	All loans received this reporting period.		
3b	Interest earned on campaign account this reporting period.		
3c	Total amount of investments sold this reporting period.		
3d	Total amount of cash dividends and interest paid out this reporting period.		
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.		3000.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		16465.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		32930.56

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
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	900.00	2719.01
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		196.00
11	Total expenditures reported this period. (Line 9 + 10)	900.00	2915.01
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	900.00	2915.01

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 - 12 + 14)		30015.55
----	--	--	----------

* 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 Indebtedness

Election Cycle*:		Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		0
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		
Election Cycle*:		Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		
Election Cycle*:		Election Year:	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		

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

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Wayne Last Name Barrett	8/31/15	Owner	125.00	
Address 2570 Danielsville Rd	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description
City Athens		Barrett Towing		
State GA Zip 30601				
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Sige Last Name Burden	8-28-15	Director	450.00	
Address 256 claystone Woods Dr	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description
Address2				
City Athens				
State GA Zip 30606				
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Jims Last Name Cole	8-28-15	Chief Deputy	500.00	
Address P.O. Box 362	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description
Address2				
City Colbert				
State GA Zip 30628				
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Ken Last Name Divers	9/18/15	C.C.S.O.	125.00	
Address 115 Sycamore Dr	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description
Address2				
City Athens				
State GA Zip 30606				
Aff. Comm.				
Itemized Contributions Page Total \$ 1,200.00 \$				

* 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

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Claude Dubose	9/1/16	Dentist	300.00	
Address				Description
348 Oak St				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.		Self		
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Willie	8/17/15	Retired	250.00	
Last Name				Description
Farmer				
Address				
P. O. Box 293				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Tony Goings	8/19/15	Deputy	500.00	
Last Name				Description
Address				
130 Quailwood Dr				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.		CCSO		
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Craig	8/31/15	Deputy	250.00	
Last Name				Description
Guenther				
Address				
410 Virginia Lane				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
Hull	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.		CCSO		

Itemized Contributions Page Total \$ 1,300.00 \$

* 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

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value	
Hayden	8-28-15	Deputy	<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	525.00	
Hodges				Description	
Address					
528 Timber Ridge Ln					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind	CCSO			
Colbert	<input type="checkbox"/> Common Source				
State GA	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value	
Last Resort	8-31-15	Owner	<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	200.00	
Last Name				Description	
Address					
184 W. Clayton St					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind	Last Resort			
Athens	<input type="checkbox"/> Common Source				
State GA	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value	
James G	8-15-16	Owner	<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	500.00	
Last Name				Description	
Address					
1938 Lexington Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind	OO bonding			
Athens	<input type="checkbox"/> Common Source				
State GA	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value	
Eric	8-21-15	Deputy	<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	600.00	
Last Name				Description	
Address					
1471 Arborwood Dr					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind	CCSO			
Wauhawville	<input type="checkbox"/> Common Source				
State GA	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total \$ 1825.00 \$

* 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

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Mark			1,200.00	
Last Name Pucht				
Address 1151 Scotland Bend	8-21-15	Coach		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City Watkinsville	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30677	<input type="checkbox"/> Credit Received on Loan	University of Miami		
Aff. Comm.				
First Name or Business Name Timothy Baptist	Date	Occupation	Cash Amt.	Est. Value
Last Name			125.00	
Address 380 Timothy Rd	7/28/15			
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City Athens	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30606	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name Bobby	Date	Occupation	Cash Amt.	Est. Value
Last Name Toole			125.00	
Address P.O. Box 81014	8/31/15	Deputy		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City Athens	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30608	<input type="checkbox"/> Credit Received on Loan	CCSO		
Aff. Comm.				
First Name or Business Name Brian	Date	Occupation	Cash Amt.	Est. Value
Last Name Weaver			200.00	
Address 605 Bentley Ct	8-21-15	Police		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City Duluth	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30047	<input type="checkbox"/> Credit Received on Loan	John Creek		
Aff. Comm.				

Itemized Contributions Page Total \$ 1650.00 \$

* 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

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Betty Williamson	9/3/15	Owner	<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	600.00
605 Olympic Dr.				
Address2	<input checked="" type="checkbox"/> Monetary	Employer	Description	
City Athens	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30601	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.		Gardenview		
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Tommy York	9/3/15	Deputy	<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	500.00
Last Name				
Address			Description	
1180 Limerick Dr	9/3/15	Deputy		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Watkinsville	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30677	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.		CCSD Deputy		
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Michael Griffin	9/3/15	Deputy ECSO	<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	125.00
Last Name				
Address			Description	
7984 Bowman Hwy	9/3/15	Deputy ECSO		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Dewy Rose	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30634	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.		CCSO		
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Patrick Beri	9/8/15	Deputy	<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	250.00
Last Name				
Address			Description	
19 Brittany Pointe	9/8/15	Deputy		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Colbert	<input type="checkbox"/> In-Kind			
State GA	<input type="checkbox"/> Common Source			
Zip 30628	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.		ECSO		

Itemized Contributions Page Total \$ 1,475.00

* 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

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Ken Fulghum	9/9/15	Business Owner	1,200.00	
Address 1860 Barnett Shoals Rd	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description
Address2 103 # 556				
City Athens				
State GA Zip 30605				
Aff. Comm.		Owner		
First Name or Business Name Mike	Date	Occupation	Cash Amt.	Est. Value
Last Name Dekle	9/11/15	Agent	150.00	
Address 1425 Barnett Shoals	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description
Address2				
City Athens				
State GA Zip 30605				
Aff. Comm.		State Farm		
First Name or Business Name Louis	Date	Occupation	Cash Amt.	Est. Value
Last Name Foster	9/11/15	Retired	125.00	
Address 1161 Woodlands Rd	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description
Address2				
City Watkinsville GA				
State GA Zip 30677				
Aff. Comm.				
First Name or Business Name Obie	Date	Occupation	Cash Amt.	Est. Value
Last Name Clayton	9/11/15	Professor	500.00	
Address 1836 Queens Way	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description
Address2				
City Atlanta				
State GA Zip 30341				
Aff. Comm.		46A		

Itemized Contributions Page Total \$ 1975.00 \$

* 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

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Dex ter			165.00	
Last Name				
Fisher				
Address				
112 Tilson Rd	9/14/15	Director		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Picky, Kilgore			125.00	
Last Name				
Address				
108 Paradise Ct	9/14/15	Counselor		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Kathleen	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
John Jeffreys			125.00	
Last Name				
Address				
140 Jones Dr	9/14/15	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Vern			125.00	
Last Name				
Address				
110 Molded Stone	9/14/15	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Warren Robins	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Aff. Comm.				

Itemized Contributions Page Total \$ 540.00 \$

* 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

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Michael			145.00	
Last Name				
Beri				
Address				
1783 Pleasant Hill Rd	9-14-15	Deputy		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Elberton	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Zip 30635				
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Bruce			1000.00	
Last Name				
Teal				
Address				
204 Cherokee Rd	9-14-15	Health care		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Henderson	<input type="checkbox"/> Common Source			
State TN	<input type="checkbox"/> Credit Received on Loan			
Zip 37075				
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Robert			200.00	
Last Name				
Gunter				
Address				
100 Leann Dr	9-14-15	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Athens	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Zip 30601				
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Deborah			405.00	
Last Name				
Edwards				
Address				
1151 Da Andra Dr	9-14-15	Retired		
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description
City	<input type="checkbox"/> In-Kind			
Watkinsville	<input type="checkbox"/> Common Source			
State GA	<input type="checkbox"/> Credit Received on Loan			
Zip 30677				
Aff. Comm.				

Itemized Contributions Page Total \$ 1750.00 \$

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Alonzo Last Name Sexton Address 1109 Westminster Address2 City Bogart State GA Zip 30622 Aff. Comm.	9-23-15	Surgeon Employer	<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	500.00 Description
Lori Last Name Brooks Address 1181 River Run Address2 City Bishop State GA Zip 30621 Aff. Comm.	10-2-15	Owner Employer	<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	400.00 Description
John Last Name Elliott Address 13D Southview Address2 City Athens State GA Zip 30605 Aff. Comm.	10/2/15	Owner Employer	<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	250.00 Description
Shane Last Name Todd Address 196 Alps Rd Address2 City Athens State GA Zip 30606 Aff. Comm.	10-4-15	Owner Employer	<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	600.00 Description

Itemized Contributions Page Total \$ 1750.00 \$

Loan Reporting

Name of Lender & Mailing Address		1.Date of Loan 2.Amount of Loan 3.Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1.Occupation & 2.Place of Employment 3.Fiduciary Relationship***
Lender Name (First Name, Business, Inst.)		1.	First Name	1.
Lender Last Name		2.	Last Name	2.
Address		3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3.
Address2			Address2	<input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate
City			City	<input type="checkbox"/> Other Than Candidate Committee Name
State	Zip		State	Zip
Lender Name (First Name, Business, Inst.)		1.	First Name	1.
Lender Last Name		2.	Last Name	2.
Address		3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3.
Address2			Address2	<input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate
City			City	<input type="checkbox"/> Other Than Candidate Committee Name
State	Zip		State	Zip

Reference: OCGA § 21-5-34(b)(1)

Loan Page Total \$ 0

* 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 Chic Fila	Date 09/15/2015	Occupation	Fundraiser breakfast	328.68
Last Name				
Address 196 Alps Road	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Athens				
State GA	Zip 30606			
First Name Athens Trophy	Date 09/11/2015	Occupation	Trophy for golf tournament fundraiser	118.44
Last Name				
Address 150 Winston Drive	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Athens				
State GA	Zip 30607			
First Name Sam's Club	Date 09/11/2015	Occupation	Door prizes for the fundraiser	156.89
Last Name				
Address 4365 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				
City Athens				
State GA	Zip 30622			

604.01

Page Total \$

* 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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Lane Creek Golf Course	Date 09/14/2015	Occupation	Golf Course Rental for Fundraiser	1874.25
Last Name				
Address 1201 Club Drive	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City Bishop				
State GA	Zip 30621			
First Name Fast Signs	Date 09/11/2015	Occupation	Sponsorship signs for golf outing fundraiser	240.75
Last Name				
Address 2565 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				
City Athens				
State GA	Zip 30606			
First Name Locos Pub & Grill	Date 09/15/2015	Occupation		900.00
Last Name				
Address 1985 Barnett Shoals Rd	<input type="checkbox"/> Expenditure <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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	Date	Occupation		
Last Name				
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	Employer		
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 \$ 2115.00

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

1. Investment Name			Account #		
Institution/Person Holding Account			Value at beginning of reporting period \$ <i>78</i>		
Mailing Address P.O. Box 528			Value at end of reporting period \$		
Address2			Difference in value \$		
City _____ State _____ Zip _____			Interest Paid Out \$		
			Cash Dividends \$		
Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
2. Investment Name			Account #		
Institution/Person Holding Account			Value at beginning of reporting period \$ <i>0</i>		
Mailing Address			Value at end of reporting period \$ <i>0</i>		
Address2			Difference in value \$		
City _____ State _____ Zip _____			Interest Paid Out \$		
			Cash Dividends \$		
Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
Total value of investments at beginning of reporting period \$			Page Total Cash Dividends: \$ <i>0</i>		
Total value of investments at end of reporting period \$			Page Total Interest Paid Out: \$ <i>0</i>		
Total difference in value \$			Page Total Profit: \$ <i>0</i>		
			Page Total Loss: \$ <i>0</i>		

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.