

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	Use Earlier of Post Mark or Hand Delivered Date
<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Tax Commissioner (Include county, municipality, district, post or judicial circuit)	JUL 7 2016 AM10:54
<input type="checkbox"/> Amendment	Filer ID (Filer ID that begins with the letter "C")	
Amendment #	Organization or Person Other than Candidate's Campaign Committee Committee Name: Committee to Elect Dave Thadgins	
	Filer ID: (Filer ID that begins with the letter "NC")	

3. Identifying and Contact Information

(1) Dave M. Thadgins (2) 7/5/16
Full Name of Candidate or Other Than Candidate Campaign Committee

(3) P O Box 93 City Athens (4) 706 548 0085 and/or E-Mail
Mailing Address State Ga. Zip Code 30603

Primary Contact Phone Number

(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: Dave M. Thadgins, Jr. | Eric K. Krasle
Name of Committee Chairperson Name of Committee Treasurer

4. Period for which you are Reporting

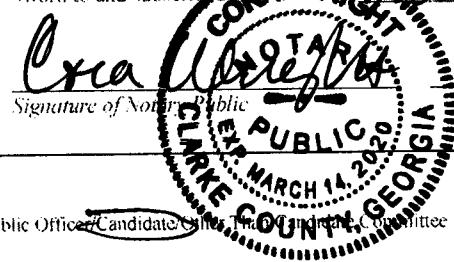
You Must Check Only One Box

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 type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> March 31, ____ (year) <input checked="" type="checkbox"/> June 30, <u>2016</u> (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)

I, Dave M. Thadgins, 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 July 7, 2016



Public Office/Candidate Name: Clarke County, Georgia Committee Name:

a. Signature of Candidate
b. Organization Chairperson/Treasurer

Dave M. Thadgins

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State of Georgia
Campaign Contribution Disclosure Report
Summary Report

CONTRIBUTIONS RECEIVED

		In-Kind Estimated Value	Cash Amount
1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:		
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.		2573 ⁰²
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	825 ⁰⁰	3285 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.		500 ⁰⁰
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		3785 ⁰⁰
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	825 ⁰⁰	6358 ⁰²

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.		2573 ⁰²
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		3650 ⁰⁰
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		125 ⁰⁰
11	Total expenditures reported this period. (Line 9 + 10)		3785 ⁰⁰
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		6358 ⁰²

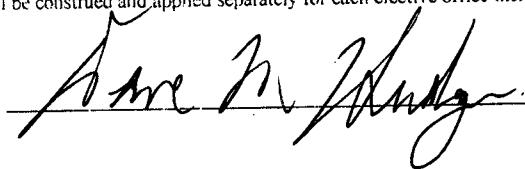
INVESTMENTS

13	Total value of investments held at the beginning of this reporting period.		0
14	Total value of investments held at the end of this reporting period.		0

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)		0
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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



CFC-CCDR 114

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

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*:		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

Public Officer/Candidate/Other Than Candidate Committee Name


 Lane M. Hudgins

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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
					Description
First Name or Business Name <i>Samuel J.</i>	Date <i>4/18/16</i>	Occupation <i>Bus. Owner</i>	<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. <i>\$400</i>	Est. Value
Last Name <i>Nickerson</i>					
Address <i>Thornhill Dr</i>					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer <i>Athens Hardware</i>			Description
City <i>Athens</i>					
State <i>Ga.</i>	Zip <i>30607</i>				
Aff. Comm.					
First Name or Business Name <i>Paul</i>	Date <i>4/18/16</i>	Occupation <i>Bus. Owner</i>	<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. <i>\$1000</i>	Est. Value
Last Name <i>Martin</i>					
Address <i>Moss Side Dr.</i>					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer <i>Martin Mgmt</i>			Description
City <i>Athens</i>					
State <i>Ga.</i>	Zip <i>30607</i>				
Aff. Comm.					
First Name or Business Name <i>Jan</i>	Date <i>4/18/16</i>	Occupation <i>Bus. Owner</i>	<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. <i>\$500</i>	Est. Value
Last Name <i>Hodgins</i>					
Address <i>160 Bel Air Dr.</i>					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer <i>Flowerland</i>			Description
City <i>Athens</i>					
State <i>Ga.</i>	Zip <i>30607</i>				
Aff. Comm.					

Itemized Contributions Page Total \$ *1900* \$ *0*

FEC-CCDR 1.14

First Name or Business Name <i>Elaine</i>	Date <i>5/4/16</i>	Occupation <i>Sales</i>	<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. <i>\$300</i>	Est. Value
Last Name <i>Hudson-Tillman</i>					Description
Address <i>106 New Haven</i>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <i>PFG</i>			
City <i>Athens</i>	<input type="checkbox"/> In-Kind				
State <i>Ga.</i>	<input type="checkbox"/> Common Source				
Zip <i>30606</i>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name <i>Mike</i>	Date <i>5/4/16</i>	Occupation <i>Bus Owner</i>	<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. <i>\$500</i>	Est. Value
Last Name <i>Williams</i>					
Address <i>Aykinson Dr</i>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <i>Self</i>			Description
City <i>Athens</i>	<input type="checkbox"/> In-Kind				
State <i>Ga.</i>	<input type="checkbox"/> Common Source				
Zip <i>30601</i>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name <i>Joseph</i>	Date <i>5/16/16</i>	Occupation <i>College Adm</i>	<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. <i>\$335</i>	Est. Value
Last Name <i>Weaver</i>					
Address <i>336 Ogelchee Dr</i>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <i>Valdosta State University</i>			Description
City <i>Richmond Hill</i>	<input type="checkbox"/> In-Kind				
State <i>Ga.</i>	<input type="checkbox"/> Common Source				
Zip <i>31324</i>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name <i>Annes</i>	Date <i>5/26/16</i>	Occupation <i>Retired</i>	<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. <i>\$250</i>	Est. Value
Last Name <i>Quartermann</i>					
Address <i>1040 Forest Hill Rd</i>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City <i>Bishop</i>	<input type="checkbox"/> In-Kind				
State <i>GA</i>	<input type="checkbox"/> Common Source				
Zip <i></i>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Itemized Contributions Page Total				<i>\$1385</i>	\$ 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

Public Officer/Candidate/Other Than Candidate Committee Name

Dave M. Hudgins

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First Name or Business Name		Date	Occupation	Cash Amt	Est. Value
Pan		5/13/16	Bus 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	825 00
Last Name	Martin				
Address		<input type="checkbox"/> Monetary <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Martin Mgmt	Description Mailing Service	
Address2					
City					
State Zip					
Aff. Comm.					
First Name or Business Name		Date	Occupation	Cash Amt	Est. Value
Last Name				<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					
Address2		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description	
City					
State Zip					
Aff. Comm.					
First Name or Business Name		Date	Occupation	Cash Amt	Est. Value
Last Name				<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					
Address2		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description	
City					
State Zip					
Aff. Comm.					
First Name or Business Name		Date	Occupation	Cash Amt	Est. Value
Last Name				<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					
Address2		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description	
City					
State Zip					
Aff. Comm.					

Itemized Contributions Page Total \$ 0 \$ 825 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

FEC-CCDR 1-14

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

* 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

Public Officer/Candidate/Other Than Candidate Committee Name


 A handwritten signature in black ink, appearing to read "Tom R. Hodges", is written over a horizontal line. To the right of the signature, the text "Page 2 of 12" is handwritten.

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 <i>Greater Georgia Printers</i>	Date <i>5/16/16</i>	Occupation <i>Printers</i>	Printing & Signs	<i>834.60</i>
Last Name		Employer		
Address <i>Grainer School Rd.</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="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 <i>Athens</i>				
State <i>Ga.</i>	Zip <i>30603</i>			
First Name <i>Flagpole</i>	Date <i>5/17/16</i>	Occupation <i>Newspaper</i>	Advert.	<i>270.00</i>
Last Name		Employer		
Address <i>Prince Ave</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="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 <i>Athens</i>				
State <i>Ga.</i>	Zip <i>30601</i>			
First Name <i>Flagpole</i>	Date <i>5/9/16</i>	Occupation <i>Newspaper</i>	Advert.	<i>270.00</i>
Last Name		Employer		
Address <i>Prince Ave</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="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 <i>Athens, Ga.</i>				
State <i>Ga.</i>	Zip <i>30601</i>			

* 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

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List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>Larkins Printing</i>	Date <i>5/26/16</i>	Occupation <i>Printer</i>	Printing	<i>650⁰⁰/00</i>
Last Name				
Address <i>Gainer School Rd</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 <i>Athens, Ga</i>				
State <i>Ga.</i>	Zip <i>30603</i>			
First Name <i>Athens Banner/erald</i>	Date <i>5/24/16</i>	Occupation <i>Newspaper</i>	Advert.	<i>550⁰⁰/00</i>
Last Name				
Address <i>Press Place</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 <i>Athens</i>				
State <i>Ga.</i>	Zip <i>30601</i>			
First Name <i>WXAG</i>	Date <i>5/20/16</i>	Occupation <i>Radio Station</i>	Radio Spot	<i>300⁰⁰/00</i>
Last Name				
Address <i>Sunset Dr.</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 <i>Athens</i>				
State <i>Ga.</i>	Zip <i>30606</i>			
First Name <i>WXAG</i>	Date <i>5/24/16</i>	Occupation <i>Radio Station</i>	Radio Spot	<i>200⁰⁰/00</i>
Last Name				
Address <i>Sunset Dr.</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> 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 <i>Athens</i>				
State <i>Ga.</i>	Zip <i>30605</i>			

* 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 \$ *1200⁰⁰/00*

Public Officer/Candidate/Other Than Candidate Committee Name

None in Nuslynn

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List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>Athens Mailing Serv.</i>	Date <i>6/30/16</i>	Occupation <i>Mailing Service</i>	Expenditure Purpose <i>Mailing Service</i>	<i>57484/00</i>
Last Name	<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			
Address <i>Commerce Blvd</i>		Employer		
Address2				
City <i>Athens</i>				
State <i>GA</i>	Zip <i>30606</i>			
First Name	Date	Occupation	Expenditure Purpose	
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			
Address2		Employer		
City				
State	Zip			
First Name	Date	Occupation	Expenditure Purpose	
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			
Address2		Employer		
City				
State	Zip			
First Name	Date	Occupation	Expenditure Purpose	
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			
Address2		Employer		
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 \$ *57484/00*

Public Officer/Candidate/Other Than Candidate Committee Name

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State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

1. Investment Name		Account #			
Institution/Person Holding Account		Value at beginning of reporting period \$			
Mailing Address		Value at end of reporting period \$			
Address2		Difference in value \$			
		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 \$			
Mailing Address		Value at end of reporting period \$			
Address2		Difference in value \$			
		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: \$ _____		
Total value of investments at end of reporting period \$			Page Total Interest Paid Out: \$ _____		
Total difference in value \$			Page Total Profit: \$ _____		
			Page Total Loss: \$ _____		

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.