

**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](http://www.ethics.ga.gov)

<b>1. Report Type</b> (Select One)	<b>2. Filing is being made on behalf of (Select One):</b> <b>Candidate or Public Official</b> Office Held or Sought <u>Mayor of Athens-Clarke County</u> <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID <small>(Filer ID that begins with the letter "C")</small> <b>Organization or Person Other than Candidate's Campaign Committee</b> Committee Name: <u>Committee to Elect Richie Knight</u> Filer ID: <small>(Filer ID that begins with the letter "NC")</small>	
Amendment # <u>      </u>		

**3. Identifying and Contact Information**

(1) Richard Marcus Knight	(2) <u>7/6/2017</u>		
<i>Full Name of Candidate or Other Than Candidate Campaign Committee</i>			
<i>Today's Date</i>			
(3) 314 E Washington Street	Athens	GA	30601
<i>Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
(4) <u>7063084877</u>	and/ or <u>richie@hwpProduction.com</u>		
<i>Primary Contact Phone Number</i>	<i>E-Mail</i>		
(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? <input 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>Loran Posey, Jr.</u>		<u>Bevan Hopper</u>	
<i>Name of Committee Chairperson</i>		<i>Name of Committee Treasurer</i>	

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

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

State of Georgia

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

I, Richard Marcus Knight, 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 \_\_\_\_\_, \_\_\_\_\_

7/6/2017 11:19:02 AM

284e7a32a649492b9831c88aa6c8e6b

Signature of Notary Public

Commission Expiration

a. Signature of Candidate  
b. Organization/Chairperson/Treasurer

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

**CONTRIBUTIONS RECEIVED**

1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	<b>In-Kind Estimated Value</b>	<b>Cash Amount</b>
2	A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns.	\$0.00	\$0.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$5,950.00	\$2,875.00
3a	All loans received this reporting period.		\$0.00
3b	Interest earned on campaign account this reporting period.		\$0.00
3c	Total amount of investments sold this reporting period.		\$0.00
3d	Total amount of cash dividends and interest paid out this reporting period.		\$0.00
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.	\$0.00	\$150.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$5,950.00	\$3,025.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$5,950.00	\$3,025.00

**EXPENDITURES MADE**

7	<input checked="" type="checkbox"/> I have no expenditures to report. <input 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	\$0.00
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$0.00
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	\$0.00	\$0.00
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$0.00
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$0.00

**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)	\$5,950.00	\$2,875.00
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\* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

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

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

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

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

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

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name Bradford	Date 5/6/2017	Occupation Pharmacist	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value \$0.00		
Last Name Upchurch							
Address 125 Arch Street							
Address 2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer University of Georgia			Description Online		
City Athens							
State GA	Zip 30601						
Aff. Comm.							
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name Carlton	Date 5/4/2017	Occupation Director of Development	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$1,000.00	Est. Value \$0.00		
Last Name Bain							
Address 420 Holman Avenue							
Address 2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer University of Georgia			Description Online		
City Athens							
State GA	Zip 30606						
Aff. Comm.							

Itemized Contributions Page Total      \$1,500.00      \$0.00

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

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

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Evan	Date 5/2/2017	Occupation Banking	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$125.00	Est. Value
Last Name Elder					\$0.00
Address 315 Beechwood Dr					
Address 2					Description
City					
State GA	Zip 30606				Online
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
First Name or Business Name Michael	Date 4/24/2017	Occupation Business	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value
Last Name Seibert					\$0.00
Address 145 Holly Hills Dr					
Address 2					Description
City Athens					
State GA	Zip 30606				Online
Aff. Comm.					

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Will	Date 5/17/2017	Occupation Business	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value
Last Name Riley					\$0.00
Address 585 White Cir #405					
Address 2					Description
City Athens					
State GA	Zip 30605				
Aff. Comm.				Check	
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Renu	Date 5/17/2017	Occupation Business	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value
Last Name Chhabra					\$0.00
Address 621 Chesterfield Rd					
Address 2					Description
City Bogart					
State GA	Zip 30622				
Aff. Comm.				Check	

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name Georgia Theater Operating, LLC	Date 6/29/2017	Occupation Employer	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value		
Last Name					\$0.00		
Address 215 N Lumpkin St							
Address 2					Description		
City Athens							
State GA							
Zip 30601							
Aff. Comm.					Check		
Full Name of Contributor Mailing Address (Affiliation of Committee if any)							
Contributor			Election Cycle**	Cash Amount	In-Kind Contributions		
Received Date Contribution Type*	Occupation & Employer	Estimated Value					
Date 5/17/2017	Occupation Employer				Description		
					First Name or Business Name The National	Est. Value	
					Last Name	\$750.00	
					Address 232 W Hancock Ave		
					Address 2		
					City Athens		
					State GA		
					Zip 30601	Food for Dinner	
					Aff. Comm.		

Itemized C

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

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 HW Creative Marketing	Date 3/1/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$0.00	Est. Value \$2,600.00
Last Name					
Address 314 E. Washington St					
Address 2	<input type="checkbox"/> Monetary	Employer			Description
City Athens	<input checked="" type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				Social Media Marketing
Zip 30601	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value

  

First Name or Business Name Athens Printing	Date 7/5/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$0.00	Est. Value \$2,600.00
Last Name					
Address 1135 Cedar Shoals Dr					
Address 2	<input type="checkbox"/> Monetary	Employer			Description
City Athens	<input checked="" type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30605	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total      \$0.00      \$5,200.00

\* 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

<b>Loan Reporting</b>				
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	
Lender Name (First Name, Business, Inst.)		1.	First Name	
Lender Last Name		2.	Last Name	
Address		3.	Address	
Address 2			Address 2	
City			City	
State	Zip		State	Zip
<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 <input type="checkbox"/> Primary				
1.  2.  3.  <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name				

Reference: OCGA § 21-5-34(b)(1)

Loan Page Total

\$0.00

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

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

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

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

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

List Name and Mailing Address of Recipient	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name	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		
Address 2				
City				
State				Zip

Page Total \$0.00

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

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

**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.