

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>Board of Education District 7</u> (Include county, municipality, district, post or judicial circuit)	Local Location Code: Use Earliest of Post Mark or Hand Delivered Date
<input checked="" type="checkbox"/> Original	Filer ID: _____ (Filer ID that begins with the letter "C")	
<input type="checkbox"/> Amendment	Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee of Lakeisha Grant</u>	Qualifying Office Filer ID: _____
Amendment # _____	Filer ID: _____ (Filer ID that begins with the letter "NC")	

3. Identifying and Contact Information

(1) Lakeisha Grant (2) 2/5/2018
 Full Name of Candidate or Other Than Candidate Campaign Committee

(3) P. O. Box 48712 (4) Athens Ga. 30604
 Mailing Address City Zip Code

(4) (706) 207-3002 and/or Lakeisha78@gmail.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: Charlisa Coleman Tenisha Harrison
 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, _____ (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)

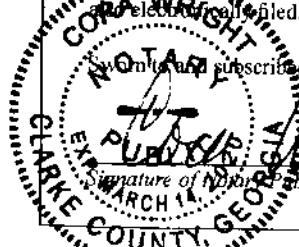
State of

Ga.

County of

Clarke

I, Tenisha Harrison, 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 any, and filed.



FEB 6, 2018

Commission Expiration

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

Mar 14, 2020

R. Harrison

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 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.		
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		
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.		
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		

EXPENDITURES MADE

7	<input 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.		
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		
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		\$ 1,552.26
11	Total expenditures reported this period. (Line 9 + 10)		\$ 2,002.26
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		

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)		
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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.

FEC-CCDR 1/14

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

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

Public Office/Candidate/Other Than Candidate Committee Name

Lakeisha Grant

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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	Contribution Type*			
First Name	Date	Occ.		Cash Am	Est Value
Stephanie Daniels	1-1-18	Advantage Services	<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	\$200.00	Pre-game Social
Address 207 Fowler Mill Rd.		Emp.	Primary		
Address2	<input type="checkbox"/> Monetary				Description
City Bogart	<input type="checkbox"/> In-Kind				
State Ga	<input type="checkbox"/> Common Source				
Zip 30022	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name Wyukia	Date	Occ		Cash Am	Est Value
Last Name Coleman	1-1-18		<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	\$100.00	
Address P.O. Box 6394		Emp.	Primary		
Address2	<input checked="" type="checkbox"/> Monetary				Description
City Athens	<input type="checkbox"/> In-Kind				
State Ga	<input type="checkbox"/> Common Source				
Zip 30604	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name Laura	Date	Occ		Cash Am	Est Value
Last Name Ulrich	1-17-18		<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	\$150.00	
Address 1508 Farnow Dr.		Emp.	Primary		
Address2	<input checked="" type="checkbox"/> Monetary				Description
City Rock Hill	<input type="checkbox"/> In-Kind				
State SC	<input type="checkbox"/> Common Source				
Zip 29732	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total \$

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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

CTC-CCDRI-14

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 <u>UPS mail form RC</u>	Date <u>11 29 17</u>	Occ		\$10.86
Last Name				
Address <u>1720 Epps Bridge Pkwy</u>	<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 on Deferred Expense <input type="checkbox"/> Investment	Imp		
Address2				
City <u>Athens</u>				
State <u>Ga</u> Zip <u>30606</u>				
First Name <u>ACC planning Dept.</u>	Date <u>12 1 17</u>	Occ		\$2.00
Last Name				
Address <u>120 Dougherty St.</u>	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp		
Address2				
City <u>Athens</u>				
State <u>Ga</u> Zip <u>30601</u>				
First Name <u>United States Post Office</u>	Date <u>12 7 17</u>	Occ		\$16.00
Last Name				
Address	<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 on Deferred Expense <input type="checkbox"/> Investment			
Address2		Emp		
City <u>Athens</u>				
State <u>Ga</u> 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

Public Officer/Candidate/Other Than Candidate Committee Name

Lakeisha Gantt

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\$ 88.88

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <u>Athens First Bank</u> Last Name	Date <u>12.11.17</u>	Occ.		\$100.00
Address <u>1850 Epps Bridge Pkwy</u> Address2	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp	Start up of business acct.	
City <u>Athens</u> State <u>Ga</u> Zip <u>30601</u>				
First Name <u>Tommy</u> Last Name <u>Johnson</u>	Date <u>12.15.17</u>	Occ		\$85.00
Address <u>275 Tallassee Rd.</u> Address2	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp	Hair Cut	
City <u>Athens</u> State <u>Ga.</u> Zip				
First Name <u>Aku</u> Last Name <u>Attipoe</u>	Date <u>12.15.17</u>	Occ.		\$25.00
Address	<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 on Deferred Expense <input type="checkbox"/> Investment			
Address2		Emp.		
City <u>Athens</u> State <u>Ga</u> Zip				
First Name <u>Aku</u> Last Name <u>Attipoe</u>	Date <u>12.16.17</u>	Occ		\$78.00
Address	<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 on Deferred Expense <input type="checkbox"/> Investment			
Address2		Emp.		
City <u>Athens</u> State <u>Ga</u> 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 \$ 228.00

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <u>Wil Com</u>	Date <u>12.29.17</u>	Occ	<u>Website</u>	<u>\$99.90</u>
Last Name				
Address	<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 on Deferred Expense <input type="checkbox"/> Investment			
Address2		Emp		
City				
State	Zip			
First Name <u>Wil Com</u>	Date <u>12.29.17</u>	Occ.		<u>\$ 84.00</u>
Last Name				
Address	<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 on Deferred Expense <input type="checkbox"/> Investment		<u>Website fee</u>	
Address2		Emp.		
City				
State	Zip			
First Name <u>Kickstarter</u>	Date <u>12.31.17</u>	Occ		<u>\$ 25.00</u>
Last Name				
Address	<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 on Deferred Expense <input type="checkbox"/> Investment			
Address2		Emp		
City				
State	Zip			
First Name <u>Food for pre-game</u>	Date <u>1.1.17</u>	Occ.		<u>\$ 63.32</u>
Last Name <u>Drop in Social</u>			<u>fundraising</u>	
Address	<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 on Deferred Expense <input type="checkbox"/> Investment			
Address2		Emp.		
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 \$ 182.22

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <u>Little Ceasars</u> Last Name	Date <u>1.7.18</u>	Occ	<u>Dinner items for Campaign Team</u>	<u>\$24.75</u>
Address	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp.		
Address2				
City <u>Athens</u>				
State <u>Ga.</u> Zip				
First Name <u>Dinner items for Team</u> Last Name	Date <u>1.7.18</u>	Occ		<u>\$18.14</u>
Address	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp.	<u>Dinner items for Campaign team</u>	
Address2				
City				
State Zip				
First Name <u>Kunako</u> Last Name <u>Hull</u>	Date <u>1.12.18</u>	Occ		<u>\$100.00</u>
Address	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp.	<u>Sign</u>	
Address2				
City				
State Zip				
First Name <u>WASA UPS</u> Last Name	Date <u>1.19.18</u>	Occ		<u>\$12.25</u>
Address	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp.	<u>Invites to Kick off Supplies</u>	
Address2				
City <u>Athens</u>				
State <u>Ga.</u> 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 \$ 157.14

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 <u>Sams</u> Last Name	Date <u>1.26.18</u> <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 on Deferred Expense <input type="checkbox"/> Investment	Occ.	Kids Off Supplies	<u>173.68</u>
Address Address2 City <u>Athens</u> State <u>Ga.</u> Zip		Emp		
First Name <u>Walmart</u> Last Name	Date <u>1.28.18</u> <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 on Deferred Expense <input type="checkbox"/> Investment	Occ.	Kick off Supplies	<u>\$ 37 00</u>
Address Address2 City <u>Athens</u> State <u>Ga.</u> Zip		Emp.		
First Name <u>Party City</u> Last Name	Date <u>1.28.18</u> <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 on Deferred Expense <input type="checkbox"/> Investment	Occ	Balloons for kickoff	<u>\$ 44.94</u>
Address Address2 City <u>Athens</u> State <u>Ga.</u> Zip		Emp		
First Name <u>Publix</u> Last Name	Date <u>1.29.18</u> <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 on Deferred Expense <input type="checkbox"/> Investment	Occ.	Kick off Supplies	<u>\$ 39.08</u>
Address Address2 City <u>Athens</u> State <u>Ga.</u> Zip		Emp.		

* 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 \$ 284.90

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>QPIncleann</i>	Date <i>1/9/18</i>	Occ	<i>\$ 10.00</i>	<i>\$ 36.87</i>
Last Name			<i>7.00</i>	
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 on Deferred Expense <input type="checkbox"/> Investment	Emp	<i>7.00</i>	
Address2			<i>7.00</i>	
City			<i>7.00</i>	
State Zip			<i>7.00</i>	
First Name <i>Stamps</i>	Date	Occ	<i>\$ 0.00</i>	<i>\$ 0.00</i>
Last Name				
Address	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp		
Address2				
City <i>Athens</i>				
State Zip				
First Name <i>Walmart</i>	Date <i>1/29/18</i>	Occ	<i>\$ 26.77</i>	
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 on Deferred Expense <input type="checkbox"/> Investment	Emp		
Address2				
City <i>Athens</i>				
State Zip				
First Name	Date	Occ		
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 on Deferred Expense <input type="checkbox"/> Investment	Emp		
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 \$ *13.50*

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 <u>Office Depot</u> Last Name	Date <u>1/29/18</u>	Occ.		\$ 28.29
Address	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp		
Address2				
City <u>Athens</u>				
State <u>GA</u> Zip				
First Name <u>Beljean</u> Last Name <u>Wanda</u> Address	Date <u>1/29/18</u>	Occ		\$ 39.82
Address2	<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 on Deferred Expense <input type="checkbox"/> Investment	Emp.		
City <u>Athens</u>				
State <u>GA</u> Zip				
First Name <u>Dollar Tree</u> Last Name	Date <u>1/29/18</u>	Occ.		\$ 20.33
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 on Deferred Expense <input type="checkbox"/> Investment	Emp		
Address2				
City <u>Athens</u>				
State <u>GA</u> Zip				
First Name	Date	Occ.		
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 on Deferred Expense <input type="checkbox"/> Investment	Emp.		
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 \$ 84.46

Public Officer/Candidate/Other Than Candidate Committee Name

Lakesha Grant Page 12 of 17

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <u>The UPS Store</u> Last Name	Date <u>1/16/18</u> <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 on Deferred Expense <input type="checkbox"/> Investment	Occ.		\$ <u>140.00</u>
Address Address2 City <u>Athens</u> State <u>GA</u> Zip		Emp.		
First Name <u>Walmart</u> Last Name	Date <u>1/16/18</u> <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 on Deferred Expense <input type="checkbox"/> Investment	Occ.		\$ <u>421.60</u>
Address Address2 City <u>Athens</u> State <u>GA</u> Zip		Emp.		
First Name <u>Test Signs</u> Last Name <u>West Signs framing</u> Address Address2 City State Zip	Date <u>1/12/18</u> <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 on Deferred Expense <input type="checkbox"/> Investment	Occ.	<u>Signs for Card</u>	\$ <u>155.00</u>
First Name <u>EDP Incleaning</u> Last Name <u>Check</u> Address Address2 City State Zip	Date <u>1/17/18</u> <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 on Deferred Expense <input type="checkbox"/> Investment	Occ.	<u>Memorial Park</u> <u>Memorial Park</u>	\$ <u>300.00</u>

* 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 \$ 401.24

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

Public Officer/Candidate/Other Than Candidate Committee Name

Lakeisha Grant

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.

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 \$		
City		State	Interest Paid Out \$		
Zip			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 \$		
City		State	Interest Paid Out \$		
Zip			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: \$ _____		

Public Officer/Candidate/Other Than Candidate Committee Name

Lakesha Gantt Page 16 of 12

State of Georgia
Campaign Contribution Disclosure Report
Addendum Statement

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