

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 <small>(Select One)</small> | 2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought <u>County Commissioner (District 9)</u> <small>(Include county, municipality, district, post or judicial circuit)</small> | |
| | <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment <small>Amendment #</small> _____ | Use Earlier of Post Mark or Hand Delivered Date <input type="text"/> |
| | Filer ID: _____ <small>(Filer ID that begins with the letter "C")</small> | |
| | Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee To Elect Tommy Valentine</u> | |
| | Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small> | |

3. Identifying and Contact Information

(1) Thomas Kenneth Valentine (2) 02/06/2018
Full Name of Candidate or Other Than Candidate Campaign Committee *Today's Date*

(3) 395 Cleveland Avenue Brooklyn GA 30601

(3) 395 Cleveland Avenue Brooklyn GA 30601

Mailing Address City State Zip Code

(4) (706) 296-3583 and/ or tommyforathens@gmail.com
Primary Contact Phone Number E-Mail

(5) If "C" is a Public Official is there a campaign committee (one or more persons) to make campaign transactions

(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: | Tracy Davenport <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, _____ (year) <input type="checkbox"/> June 30, _____ (year) | <input checked="" type="checkbox"/> January 31, 2018 (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 3 filing only)

I, Tracy D. Davenport, 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.

February 7 2018

Send to and subscribe before me on February 7 18

County of Clarke

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. | | 14517.76 |
| 3 | Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page. | | 7971.00 |
| 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. | | 4656.00 |
| 5 | Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4) | | 12627.00 |
| 6 | Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5) | | 27144.76 |

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. | | 7252.17 |
| 9 | Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page. | | 13680.77 |
| 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 | | 1905.11 |
| 11 | Total expenditures reported this period. (Line 9 + 10) | | 15585.88 |
| 12 | Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11) | | 22838.05 |

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) | | 4306.71 |
|----|--|--|---------|

* 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: | 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) | | 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) | | 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) | | 0 |

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

State of Georgia
Campaign Contribution Disclosure Report
Itemized Contributions

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

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

| Full Name of Contributor Mailing Address (Affiliation of Committee if any) | Contributor | | Election Cycle** | Cash Amount | In-Kind Contributions |
|--|--|---|--|------------------|-----------------------|
| | Received Date | Occupation & Employer | | | Estimated Value |
| | Contribution Type* | | | | Description |
| TJ Young | Date 07/05/2017 | Occupation Self | <input checked="" 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. 150 | Est. Value |
| 59 Scholes Street | | Employer Self | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | Description |
| City Brooklyn | | | | | |
| State GA | Zip 30605 | | | | |
| Aff. Comm. | | | | | |
| Peter Dluhy | Date 07/09/2017 | Occupation Scientist | <input checked="" 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. 150 | Est. Value |
| 1709 W Juneway Terrace Apt 3F | | Employer Northwestern | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | Description |
| City Chicago | | | | | |
| State IL | Zip 60626 | | | | |
| Aff. Comm. | | | | | |
| Jason Pratt | Date 07/11/2017 | Occupation Clarke County School District | <input checked="" 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. 100 | Est. Value |
| 2165 S. Milledge Ave Apt D9 | | Employer Teacher | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | Description |
| City Athens | | | | | |
| State GA | Zip 30605 | | | | |
| Aff. Comm. | | | | | |

Itemized Contributions Page Total \$ 400

CFC-CCDR 1/14

| First Name or Business Name | | Date | Occupation | Cash Amt. | Est. Value |
|--|-----------|--|-----------------------------|--|-------------|
| Eric | | 07/12/2017 | Unknown | <input checked="" 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 | Description |
| Last Name | | | | | |
| Gunby | | | | | |
| Address | | | | | |
| 229 Old Church Rd | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source | Employer Unknown | Cash Amt. 146 | Est. Value |
| City Athens | | | | | |
| State GA | Zip 30601 | | | | |
| Aff. Comm. | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source | Occupation Unknown | <input checked="" 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 | Description |
| First Name or Business Name | | | | | |
| Nancy | | | | | |
| Last Name | | | | | |
| Arbol | | | | | |
| Address | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source | Employer Unknown | Cash Amt. 100 | Est. Value |
| 105 Brentwood Dr | | | | | |
| Address2 | | | | | |
| City Athens | | | | | |
| State GA | Zip 30605 | | | | |
| Aff. Comm. | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source | Occupation Unknown | <input checked="" 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 | Description |
| First Name or Business Name | | | | | |
| Brock | | | | | |
| Last Name | | | | | |
| Walker | | | | | |
| Address | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source | Employer Government | Cash Amt. 150 | Est. Value |
| 6004 Waterbury Ct | | | | | |
| Address2 | | | | | |
| City Springfield | | | | | |
| State VA | Zip 22152 | | | | |
| Aff. Comm. | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source | Occupation FDIC | <input checked="" 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 | Description |
| First Name or Business Name | | | | | |
| Deborah | | | | | |
| Last Name | | | | | |
| Valentine | | | | | |
| Address | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source | Employer St Mary's Hospital | Cash Amt. 250 | Est. Value |
| 460 Ponderosa Dr | | | | | |
| Address2 | | | | | |
| City Athens | | | | | |
| State GA | Zip 30605 | | | | |
| Aff. Comm. | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source | Occupation Nurse | <input checked="" 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 | Description |
| Itemized Contributions Page Total \$ 646 | | | | | |

* 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 Contributions

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| 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 Nahali | Date 07/31/2017 | Occupation Digital Archivist | | Cash Amt 146 | Est. Value |
| Last Name Croft | | | <input checked="" 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 | | |
| Address 460 Ponderosa Dr | | Employer Georgia College | | | Description |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | |
| City Athens | | | | | |
| State GA | Zip 30605 | | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name Megan | Date 08/09/2017 | Occupation Rabbi | | Cash Amt 300 | Est. Value |
| Last Name Brudney | | | <input checked="" 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 | | |
| Address 460 Ponderosa Dr | | Employer Temple Beth El | | | Description |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | |
| City Athens | | | | | |
| State GA | Zip 30605 | | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name Gwen | Date 09/01/2017 | Occupation Not Employed | | Cash Amt 200 | Est. Value |
| Last Name O'Looney | | | <input checked="" 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 | | |
| Address 626 Cobb Street | | Employer Not Employed | | | Description |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | |
| City Athens | | | | | |
| State GA | Zip 30606 | | | | |
| Aff. Comm. | | | | | |

Itemized Contributions Page Total \$ 646

CTC-CCDR 1-14

| First Name or Business Name | Date | Occupation | Cash Amt | Est. Value |
|--|--|----------------------------|-----------------|-------------|
| Kim | 09/02/2017 | Teacher | 100 | |
| Last Name Waters | | | | |
| Address 121 Tillman Lane | | | | |
| Address2 | <input type="checkbox"/> Monetary | Employer | | Description |
| City Athens | <input type="checkbox"/> In-Kind | University of North GA | | |
| State GA | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | <input type="checkbox"/> Credit Received on Loan | | | |
| First Name or Business Name Mattie | Date 09/02/2017 | Occupation Not Employed | Cash Amt 375 | Est. Value |
| Last Name Parker | | | | |
| Address 7770 Oak Estate | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary | Employer | | Description |
| City Raleigh | <input type="checkbox"/> In-Kind | Not Employed | | |
| State GA | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | <input type="checkbox"/> Credit Received on Loan | | | |
| First Name or Business Name Janna | Date 09/02/2017 | Occupation Professor | Cash Amt 200 | Est. Value |
| Last Name Dresden | | | | |
| Address 505 Westview Dr | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary | Employer | | Description |
| City Athens | <input type="checkbox"/> In-Kind | UGA | | |
| State GA | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | <input type="checkbox"/> Credit Received on Loan | | | |
| First Name or Business Name Dexter | Date | Occupation Director | Cash Amt 250 | Est. Value |
| Last Name Fisher | | | | |
| Address 112 Tilson Road | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary | Employer | | Description |
| City Athens | <input type="checkbox"/> In-Kind | UGA | | |
| State GA | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | <input type="checkbox"/> Credit Received on Loan | | | |
| Itemized Contributions Page Total \$ 925 | | | | \$ |

* 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 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 Paige | Date 09/15/2017 | Occupation Not Employed | <input checked="" 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. 200 | Est. Value |
| Last Name Cummings | | | | | |
| Address 513 Milledge Circle | | Employer | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | Description |
| City Athens | | | | | |
| State GA | Zip | | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name Lekanya | Date 09/15/2017 | Occupation Not Employed | <input checked="" 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. 100 | Est. Value |
| Last Name Flowers | | | | | |
| Address 2419 Toliver Hills | | Employer | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | Description |
| City Ellenwood | | | | | |
| State GA | Zip 306294 | | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name Maciej | Date 09/16/2017 | Occupation Not Employed | <input checked="" 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. 150 | Est. Value |
| Last Name Misztal | | | | | |
| Address 120 Friar Lane | | Employer | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | | | Description |
| City Carrboro | | | | | |
| State NC | Zip 27510 | | | | |
| Aff. Comm. | | | | | |

Itemized Contributions Page Total \$ 450

CFC-CCDR 1/14

| First Name or Business Name | | Date | Occupation | Cash Amt. | Est. Value |
|--|--------------|--|--------------------------|--|-------------|
| Patricia | | 09/17/2017 | Not Employed | <input checked="" 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 | |
| Last Name Clifton | | | | | |
| Address 162 Double Bridge | | <input checked="" type="checkbox"/> Monetary | Employer | | Description |
| Address2 | | <input type="checkbox"/> In-Kind | | | |
| City Winterville | | <input type="checkbox"/> Common Source | | | |
| State GA | Zip 30683 | <input type="checkbox"/> Credit Received on Loan | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name | | Date | Occupation | Cash Amt. | Est. Value |
| Matt | | 09/17/2017 | Digital Marketing | <input checked="" 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 | |
| Last Name Griffin | | | | | |
| Address 1075 Zonolite Road | | <input checked="" type="checkbox"/> Monetary | Employer Vert | | Description |
| Address2 | | <input type="checkbox"/> In-Kind | | | |
| City Atlanta | | <input type="checkbox"/> Common Source | | | |
| State GA | Zip 30306 | <input type="checkbox"/> Credit Received on Loan | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name | | Date | Occupation | Cash Amt. | Est. Value |
| Alia and Marv | | 09/17/2017 | Emergency Medical | <input checked="" 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 | |
| Last Name Jubran | | | | | |
| Address 232 Center Park | | <input checked="" type="checkbox"/> Monetary | Employer Emory | | Description |
| Address2 | | <input type="checkbox"/> In-Kind | | | |
| City Athens | | <input type="checkbox"/> Common Source | | | |
| State GA | Zip 30605 | <input type="checkbox"/> Credit Received on Loan | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name | | Date | Occupation | Cash Amt. | Est. Value |
| Kelli | | 09/17/2017 | Not Employed | <input checked="" 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 | |
| Last Name Ogunsanya | | | | | |
| Address 141 Alice Walker | | <input checked="" type="checkbox"/> Monetary | Employer Not Employed | | Description |
| Address2 | | <input type="checkbox"/> In-Kind | | | |
| City Athens | | <input type="checkbox"/> Common Source | | | |
| State GA | Zip 30607 | <input type="checkbox"/> Credit Received on Loan | | | |
| Aff. Comm. | | | | | |
| 570 Itemized Contributions 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

State of Georgia
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| 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 |
| | Contribution Type* | | | | |
| First Name or Business Name Triple J Construction | Date 09/21/2017 | Occupation Construction Corp | <input checked="" 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 | Est. Value |
| Last Name | | | | | |
| Address PO BOX 1621 | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer Triple J Construction | | | Description |
| City Watkinsville | | | | | |
| State GA | Zip 30677 | | | | |
| Aff. Comm | | | | | |
| First Name or Business Name Tom | Date 09/24/2017 | Occupation CPA | <input checked="" 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 | Est. Value |
| Last Name | | | | | |
| Scott | | | | | |
| Address 570 Fortson Road | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer Self | | | Description |
| City Athens | | | | | |
| State GA | Zip 30606 | | | | |
| Aff. Comm | | | | | |
| First Name or Business Name Garry | Date 10/14/2017 | Occupation Owner | <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 | Cash Amt 100 | Est. Value |
| Last Name | | | | | |
| Dale | | | | | |
| Address 564 Pulaski Street | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer Dale Electric | | | Description |
| City Athens | | | | | |
| State GA | Zip 30601 | | | | |
| Aff. Comm. | | | | | |

Itemized Contributions Page Total \$ 475

CFC-CCDR 4/14

| | | | | | | |
|---|--|--|---------------------------|--|------------------|-------------|
| First Name or Business Name Tiffany | | Date 10/15/2017 | Occupation Actress | <input checked="" 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. 100 | Est. Value |
| Last Name Hobbs | | | | | | |
| Address 1615 Chatterton Ct NE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Self | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Johnny | | Date 11/10/2017 | Occupation Businessman | <input checked="" 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 | Est. Value |
| Last Name Mayfield | | | | | | |
| Address 354 Milledge Circle | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Self | | | Description |
| City Athens | | <input type="checkbox"/> In-Kind | | | | |
| State GA | | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Maxine | | Date 12/04/2017 | Occupation Retired | <input checked="" 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. 300 | Est. Value |
| Last Name Eason | | | | | | |
| Address 420 Millstone Circle | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Athens | | <input type="checkbox"/> In-Kind | | | | |
| State GA | | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Mike | | Date 12/20/2017 | Occupation Mason | <input checked="" 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. 200 | Est. Value |
| Last Name Gordon | | | | | | |
| Address 941 Manley Martin Road | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Danielsville | | <input type="checkbox"/> In-Kind | Self | | | |
| State GA | | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Itemized Contributions Page Total \$ 1100 | | | | | | |

* 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 Contributions

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

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

| Full Name of Contributor Mailing Address (Affiliation of Committee if any) | Contributor | | Election Cycle** | Cash Amount | In-Kind Contributions |
|---|--|---|--|-----------------|-----------------------|
| | Received Date | Occupation & Employer | | | Estimated Value |
| | Contribution Type* | | | | Description |
| First Name or Business Name Roy Last Name Casey Address 97 Herman Drive | Date 12/20/2017 | Occupation Low Voltage Technician | | Cash Amt 250 | Est. Value |
| Address2 City Commerce | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer Self | <input checked="" 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 | | Description |
| State GA | Zip 30530 | Aff. Comm. | | | |
| First Name or Business Name Tom Last Name Ellis Address 321 Dubose Avenue | Date 12/20/2017 | Occupation Self | | Cash Amt 550 | Est. Value |
| Address2 City Athens | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer Tom Ellis Construction | <input checked="" 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 | | Description |
| State GA | Zip 30601 | Aff. Comm. | | | |
| First Name or Business Name Gwendolyn Last Name Parker Address 188 Scribner Avenue | Date 12/20/2017 | Occupation Writer | | Cash Amt 100 | Est. Value |
| Address2 City Norwalk | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer Self | <input checked="" 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 | | Description |
| State CT | Zip 6854 | Aff. Comm. | | | |

Itemized Contributions Page Total \$ 900

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| | | | | | | |
|---|--------------|--|----------------------------|--|-----------------|-------------|
| First Name or Business Name Brittany | | Date 12/22/2017 | Occupation Researcher | <input checked="" 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 285 | Est. Value |
| Last Name Barnes | | | | | | Description |
| Address 386 Odd Street | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer UGA | | | |
| City Athens | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30601 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Richard | | Date 12/22/2017 | Occupation Not Employed | <input checked="" 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 116 | Est. Value |
| Last Name Fisher | | | | | | |
| Address 389 Morton Farm Rd | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Athens | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30605 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Taylor | | Date 12/22/2017 | Occupation Not Employed | <input checked="" 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 240 | Est. Value |
| Last Name Solomon | | | | | | |
| Address 185 Pine Tops Drive | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Athens | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30606 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Margaret | | Date 12/22/2017 | Occupation Not Employed | <input checked="" 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 130 | Est. Value |
| Last Name McCoy | | | | | | |
| Address 626 Belvoir Heights | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Athens | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30606 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |

Itemized Contributions Page Total \$ 771 \$

* 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 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 Anthony | Date 12/24/2017 | Occupation Not Employed | <input checked="" 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 100 | Est. Value |
| Last Name Copeland | | | | | |
| Address 3645 Marketplace Blvd Suite 130-143 | | | | | |
| Address2 | <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 East Point | | | | | |
| State GA | Zip 30344 | | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name Patrick | Date 12/31/2017 | Occupation Attorney | <input checked="" 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 100 | Est. Value |
| Last Name Garrard | | | | | |
| Address 757 Pulaski Street | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer Blasingame Burch Garrard & Ashley | | | Description |
| City Athens | | | | | |
| State GA | Zip 30601 | | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name Sterling | Date 01/07/2018 | Occupation Director | <input checked="" 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 120 | Est. Value |
| Last Name Gardner | | | | | |
| Address 1129 Oak Grove | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer Boys & Girls Club | | | Description |
| City Athens | | | | | |
| State GA | Zip 30607 | | | | |
| Aff. Comm. | | | | | |

Itemized Contributions Page Total \$ 320

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| First Name or Business Name | | Date | Occupation | Cash Amt | Est. Value |
|--|--------------|--|------------------------------------|----------|-------------|
| Karen & Bruce | | 01/10/2018 | | 100 | |
| Last Name Menke | | | | | |
| Address 113 Buttonwood Loop | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | Description |
| City Athens | | <input type="checkbox"/> In-Kind | | | |
| State GA | Zip 30605 | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | |
| First Name or Business Name | | Date | Occupation | Cash Amt | Est. Value |
| Graham | | 01/28/2018 | Graduate Assistant | 110 | |
| Last Name Wyatt | | | | | |
| Address 132 East Cloverhurst Avenue | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | Description |
| City Athens | | <input type="checkbox"/> In-Kind | UGA | | |
| State GA | Zip 30605 | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | |
| First Name or Business Name | | Date | Occupation | Cash Amt | Est. Value |
| Tommy | | 01/31/2018 | Volunteer & AmeriCorps Coordinator | 558 | |
| Last Name Valentine | | | | | |
| Address 395 Cleveland Avenue | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | Description |
| City Athens | | <input type="checkbox"/> In-Kind | | | |
| State GA | Zip 30601 | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | |
| First Name or Business Name | | Date | Occupation | Cash Amt | Est. Value |
| Last Name | | | | | |
| Address | | | | | |
| Address2 | | <input type="checkbox"/> Monetary | Employer | | Description |
| City | | <input type="checkbox"/> In-Kind | | | |
| State | Zip | <input type="checkbox"/> Common Source | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | |

Itemized Contributions Page Total \$ 768

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

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

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

| Loan Reporting | | | | |
|---|--|---|---|--|
| Name of Lender & Mailing Address | 1.Date of Loan 2.Amount of Loan 3.Election Cycle** | Person(s) responsible for repayment of loan & Mailing Address | 1.Occupation & 2.Place of Employment 3.Fiduciary Relationship*** | |
| Lender Name (First Name, Business, Inst.) | 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

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 Tommy | Date 07/02/2017 | Occupation | Repay Personal Loan | 550 |
| Last Name Valentine | | | | |
| Address 395 Cleveland Avenue | <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input checked="" 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 3001 | | | |
| First Name Priceline Hotel Rooms | Date 07/18/2017 | Occupation | Lodging for Campaign Training | 657.95 |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer | | |
| Address2 | | | | |
| City | | | | |
| State | Zip | | | |
| First Name Southwest Airlines | Date 07/18/2017 | Occupation | Flight To DC for Campaign Training | 192.36 |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer | | |
| Address2 | | | | |
| City | | | | |
| State | Zip | | | |

Page Total \$ 1400.31

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

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|--|--|-----------------------|---|-------------|
| First Name AirBNB | Date 08/04/2017 | Occupation | Lodging Accomodations for Netroots Training | 398.54 |
| 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 checked="" type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | | | |
| Address2 | | Employer | | |
| City | | | | |
| State Zip | | | | |
| First Name Waffle House | Date 08/04/2017 | Occupation | Food and Entertainment / Campaign Meetings | 378.37 |
| 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 checked="" type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | | | |
| Address2 | | Employer | | |
| City Athens | | | | |
| State GA Zip | | | | |
| First Name EB Netroots Nation | Date 08/07/2017 | Occupation | Registration Fees for Tommy Valentine and Mariah Parker | 232.98 |
| 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 checked="" type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | | | |
| Address2 | | Employer | | |
| City | | | | |
| State Zip | | | | |
| First Name Pulaski Heights BBQ | Date 08/07/2017 | 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 checked="" 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 \$ 113.96

Public Officer/Candidate/Other Than Candidate Committee Name

Tommy Valentine Page 18 of 25

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 UBER | Date 08/31/2017 | Occupation | Travel and Eats | 151.79 |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | | | |
| Address2 | | Employer | | |
| City | | | | |
| State | Zip | | | |
| First Name Montu | Date 10/01/2017 | Occupation Committee To Elect Tommy Valentine | Staffing Expense | 480 |
| Last Name Miller | | | | |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | | | |
| Address2 | | Employer Committee To Elect Tommy Valentine | | |
| City | | | | |
| State | Zip | | | |
| First Name The Foundry Fundraiser | Date 09/17/2017 | Occupation | Fundraising Expense | 250 |
| Last Name | | | | |
| Address 295 East Dougherty St | <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 | | Employer | | |
| City Athens | | | | |
| State | GA | | | |
| Zip | 30606 | | | |

881.79

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

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|--|-----------------------|---|---|-------------------------------------|-------------|
| First Name Sam | Last Name Stephens | Date 10/01/2017 | Occupation Committee To Elect Tommy Valentine | Staffing Expense | 360 |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer Committee To Elect Tommy Valentine | | |
| Address2 | | | | | |
| City | | | | | |
| State GA | Zip 30308 | | | | |
| First Name Gordon Biersch MID Town | Last Name | Date 10/05/2017 | Occupation | Community Meeting and Networking | 117.08 |
| Address 848 Peachtree St NE | | | | | |
| Address2 | | | | | |
| City Atlanta | | | | | |
| State GA | Zip 30308 | | | | |
| First Name Sterling | Last Name Gardner | Date 10/12/2017 | Occupation Committee To Elect Tommy Valentine - Fundraiser | Staffing Expense | 3350 |
| Address Oak Grove Rd | | | | | |
| Address2 | | | | | |
| City Athens | | | | | |
| State GA | Zip 30607 | | | | |
| First Name Athfest | Last Name | Date 10/23/2017 | Occupation | Marketing Expense - AthHalf | 125 |
| Address | | | | | |
| 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 \$ 3952.08

Public Officer/Candidate/Other Than Candidate Committee Name

Tommy Valentine Page 20 of 25

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 Papa John's Pizza | Date 11/03/2017 | Occupation | Food Expense - Staffing | 176.52 |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer | | |
| Address2 | | | | |
| City | | | | |
| State | Zip | | | |
| First Name Pies by PCCC | Date 11/03/2017 | Occupation | Campaign Software Expense | 100 |
| 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 | | | |
| First Name Travis | Date 11/09/2017 | Occupation Committee To Elect Tommy Valentine | Staffing Expense | 710.00 |
| Last Name Williams | | | | |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer Committee To Elect Tommy Valentine | | |
| Address2 | | | | |
| City | | | | |
| State | Zip | | | |

986.52
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

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|--|---|--|--|-------------|
| First Name ACTBLUE | Date 12/04/2017 | Occupation | Donation Software - Transaction Processing Fees | 471.82 |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | | | |
| Address2 | | Employer | | |
| City | | | | |
| State Zip | | | | |
| First Name FACEBOOK | Date 01/02/2018 | Occupation | Marketing Expenses | 1449.64 |
| 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 Mariah | Date 01/09/2018 | Occupation | Staffing Expense | 3101.46 |
| Last Name Parker | | Committee To Elect Tommy Valentine - Campaign Manager | | |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | | | |
| Address2 | | Employer | | |
| City | | Committee To Elect Tommy Valentine | | |
| State Zip | | | | |
| First Name WIX | Date 01/09/2018 | Occupation | Campaign Website Development and Marketing Expense | 112 |
| 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 <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 \$ 5134.92

Public Officer/Candidate/Other Than Candidate Committee Name

Tommy Valentine

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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 Amazon | Date 01/26/2018 | Occupation | Miscellaneous Items and Expenses | 211.19 |
| 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 <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer | | |
| Address2 | | | | |
| City | | | | |
| State | Zip | | | |
| First Name | Date | Occupation | | |
| Last Name | | | | 0 |
| 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 | | | |
| First Name | Date | Occupation | | |
| Last Name | | | | 0 |
| 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 | | | |

Page Total \$ 211.19

* 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

| 1. Investment Name | | Account # | |
|--|-----------------------------------|---|--------------------------|
| Institution/Person Holding Account | | Value at beginning of reporting period \$ | |
| Mailing Address 395 Cleveland Avenue | | 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 \$ | |
| Mailing Address | | 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 |
| 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.