

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>Mayor of ACC</u> (Include county, municipality, district, post or judicial circuit) Filer ID (Filer ID that begins with the letter "C") Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Richard Marcus Knight, Jr</u> Filer ID: (Filer ID that begins with the letter "NC") Amendment # _____	
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3. Identifying and Contact Information

(1) Richard Marcus Knight		(2) 2/7/2018	
<i>Full Name of Candidate or Other Than Candidate Campaign Committee</i>		<i>Today's Date</i>	
(3) 314 E Washington Street		Athens	GA 30601
<i>Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
(4) 706-308-4877		and/ or <u>richie@hwpProduction.com</u>	
<i>Primary Contact Phone Number</i>	<i>E-Mail</i>		
(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(6) If yes, is the committee registered with the Commission? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(7) If yes, complete the following: Richard Marcus Knight, Jr		<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, 2018 (year)	<input checked="" type="checkbox"/> January 31, 2018 (year)	<input type="checkbox"/> 6 days before Primary Run-Off 2018 (year)	<input type="checkbox"/> 15 days before Special Primary, <u>2018</u> (year)
<input type="checkbox"/> June 30, 2018 (year)	<input type="checkbox"/> March 31, 2018 (year)	<input type="checkbox"/> 6 days before General Run-Off 2018 (year)	<input type="checkbox"/> 15 days before Special, <u>2018</u> (year)
Supplemental Reporting		<input type="checkbox"/> 6 days before Special Primary Run-Off 2018 (year)	<input type="checkbox"/> Dec. 31, 2018 (year)
<input type="checkbox"/> June 30, 2018 (year)	<input type="checkbox"/> September 30, 2018 (year)	<input type="checkbox"/> 6 days before Special Run-Off 2018 (year)	
<input type="checkbox"/> December 31, 2018 (year)	<input type="checkbox"/> October 25, 2018 (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)		<input type="checkbox"/> Dec. 31, 2018 (year)	

State of Georgia

County of _____

I, Richard Marcus Knight, being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on _____, _____

2/7/2018 12:22:56 AM

c09b1c2840e642f49c2f8b5b025a9dc9

Signature of Notary Public

Commission Expiration

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

State of Georgia
Campaign Contribution Disclosure Report
Summary Report

CONTRIBUTIONS RECEIVED

1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	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.	\$5,950.00	\$2,875.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$1,000.00	\$6,863.00
3a	All loans received this reporting period.		\$8,000.00
3b	Interest earned on campaign account this reporting period.		\$0.00
3c	Total amount of investments sold this reporting period.		\$0.00
3d	Total amount of cash dividends and interest paid out this reporting period.		\$0.00
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.	\$0.00	\$2,760.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$1,000.00	\$17,623.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$6,950.00	\$20,498.00

EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	\$0.00	\$0.00
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$347.71
10	Total amount of all separate expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page	\$0.00	\$0.00
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$347.71
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$347.71

INVESTMENTS

13	Total value of investments held at the beginning of this reporting period.		\$0.00
14	Total value of investments held at the end of this reporting period.		\$0.00

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)	\$0.00	\$0.00
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* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

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

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

State of Georgia
Campaign Contribution Disclosure Report
Itemized Contributions

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

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date	Occupation & Employer			Estimated Value		
	Contribution Type*				Description		
First Name or Business Name Dan	Date 8/22/2017	Occupation Insurance	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value		
Last Name Perrin					\$0.00		
Address 139 Clifton Dr							
Address 2		<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 30606						
Aff. Comm.							
Aff. Comm.							
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date	Occupation & Employer			Estimated Value		
	Contribution Type*				Description		
First Name or Business Name Paul	Date 8/23/2017	Occupation Area Construction Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value		
Last Name Mazzone					\$0.00		
Address 3201 Old Church Cove							
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			Description		
City CONYERS							
State GA	Zip 30012						
Aff. Comm.							
Aff. Comm.							

* Gant, J. J.; Tamm, M. J.; Liu, K. J.; Gant, S. J.; Gant, E. B.; Liu, J. J. *J. Am. Chem. Soc.* 1930, 52, 10300.

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

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name Ryan	Date 8/24/2017	Occupation Banking	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value		
Last Name Hunt					\$0.00		
Address 180 Wickersham Drive							
Address 2		Employer State Bank & Trust Company			Description		
City Athens							
State GA	Zip 30606						
Aff. Comm.							
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
First Name or Business Name June	Date 9/11/2017	Occupation self employed	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value		
Last Name Smith					\$0.00		
Address 3323 Raskarity Rd.							
Address 2		Employer Pangea Title Services, LLC			Description		
City CUMMING							
State GA	Zip 30041						
Aff. Comm.							

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name Kimberly	Date 9/27/2017	Occupation self employed	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$200.00	Est. Value	
Last Name Arrue					\$0.00	
Address 1317 Milstead Ave NE						
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on <input type="checkbox"/> Loan			Description	
City Conyers						
State GA	Zip 30012					
Aff. Comm.						
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name Chase and Matt	Date 10/1/2017	Occupation Risk Analyst/ Sales manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$150.00	Est. Value	
Last Name Johnson					\$0.00	
Address 70 Lansdowne Dr						
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on <input type="checkbox"/> Loan			Description	
City Atlanta						
State GA	Zip 30328					
Aff. Comm.						

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Brian and Teresa	Date 10/1/2017	Occupation Manager	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$200.00	Est. Value
Last Name Moroney				\$0.00	
Address 30 Wesleyan Way					
Address 2				Description	
City Oxford					
State GA	Zip 30054				
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Surujni	Date 10/1/2017	Occupation self employed	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value
Last Name Peraud				\$0.00	
Address 130 Wesleyan Way					
Address 2				Description	
City Oxford					
State GA	Zip 30054				
Aff. Comm.					

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date	Occupation & Employer			Estimated Value		
	Contribution Type*	Description					
First Name or Business Name Peter and Diana	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$600.00	Est. Value		
Last Name Wilcox	10/2/2017	Insurance		\$0.00	\$0.00		
Address 36 Bream Ct							
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description		
City Jasper	<input type="checkbox"/> In-Kind	Continuity Risk Partners					
State GA	<input type="checkbox"/> Common Source						
Zip 30143	<input type="checkbox"/> Credit Received on <input type="checkbox"/> Loan						
Aff. Comm.							
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date	Occupation & Employer			Estimated Value		
	Contribution Type*	Description					
First Name or Business Name John	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value		
Last Name Hanley	10/13/2017	Office Manager		\$0.00	\$0.00		
Address PO Box 34							
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description		
City Watkinsville	<input type="checkbox"/> In-Kind	Bernstein Funeral Home					
State GA	<input type="checkbox"/> Common Source						
Zip 30677	<input type="checkbox"/> Credit Received on <input type="checkbox"/> Loan						
Aff. Comm.							

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Vincente	Date 10/23/2017	Occupation Retired	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$200.00	Est. Value
Last Name Vazquez				\$0.00	
Address 7851 Lakeside Dr					
Address 2				Description	
City Tinley Park					
State GA	Zip IL				
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Scott	Date 12/14/2017	Occupation Private Citizen	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value
Last Name FREEMAN				\$0.00	
Address 180 RED FOX RUN					
Address 2				Description	
City ATHENS					
State GA	Zip 30605				
Aff. Comm.					

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name jamshad	Date 1/26/2018	Occupation Restaurant owner	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value
Last Name Zarnegar					\$0.00
Address 585 White circle Apt.13					
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer last resort Grill		Description
City Athens					
State GA	Zip 30605				
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Glen Paul	Date 1/26/2018	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value
Last Name Freedman					\$0.00
Address 480 John Wesley Dobbs Ave 811					
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer The GPF Group LLC		Description
City 1/26/2018					
State GA	Zip 30312				
Aff. Comm.					

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date	Occupation & Employer			Estimated Value	
	Contribution Type*	Description				
First Name or Business Name Charles	Date 1/29/2018	Occupation Student	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value	
Last Name Abraham					\$0.00	
Address 24 Fairpark Lane						
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source		Employer Student	Description	
City Decatur						
State GA	Zip 30030					
Aff. Comm.						
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date	Occupation & Employer			Estimated Value	
First Name or Business Name joan and lamar	Date 1/29/2018	Occupation retired	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$202.00	Est. Value	
Last Name london					\$0.00	
Address 783 stonebridge rd						
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source		Employer retired	Description	
City Lavonia						
State GA	Zip 30553					
Aff. Comm.						

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name Jay	Date 1/31/2018	Occupation self employed	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value	
Last Name MacDonald					\$0.00	
Address 94 Tate St						
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer self employed		Description	
City Waynesville						
State NC	Zip 28786					
Aff. Comm.						
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name Ralph	Date 1/31/2018	Occupation Engineer	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value	
Last Name Johnson					\$0.00	
Address 1310 Beverly Dr						
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer UGA		Description	
City Athens						
State GA	Zip 30606					
Aff. Comm.						

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name Alan	Date 1/31/2018	Occupation Owner	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value		
Last Name Cason					\$0.00		
Address 299 Lenox Rd							
Address 2		Employer abraKIDabra TOYS			Description		
City Athens							
State GA	Zip 30606						
Aff. Comm.							
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
First Name or Business Name Kelvin	Date 1/31/2018	Occupation Administrator	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value		
Last Name Rutledge					\$0.00		
Address 200 Piccadilly Square Apt A3							
Address 2		Employer The University of Georgia			Description		
City Athens							
State GA	Zip 30605						
Aff. Comm.							

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name Brandon	Date 1/31/2018	Occupation Business Owner	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value	
Last Name Checketts					\$0.00	
Address 1860 Barnett Shoals Rd						
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer RoundSphere		Description	
City Athens						
State GA	Zip 30605					
Aff. Comm.						
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
	Received Date Contribution Type*	Occupation & Employer			Estimated Value	
					Description	
First Name or Business Name Jeff	Date 1/31/2018	Occupation Founder	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value	
Last Name Edrington					\$0.00	
Address 1 press place, suite 203						
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Fee favor		Description	
City Athens						
State GA	Zip 30601					
Aff. Comm.						

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Peter	Date 1/31/2018	Occupation Owner	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$150.00	Est. Value
Last Name Dale					\$0.00
Address PO Box 1214					
Address 2					Description
City Athens					
State GA					
Zip 30603					
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)					
Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
Received Date Contribution Type*	Occupation & Employer			Estimated Value	
First Name or Business Name Linda	Date 1/31/2018	Occupation self employed	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value
Last Name Conforti					\$0.00
Address 1300 Ridge					
Address 2					Description
City Willowbrook					
State IL					
Zip 60527					
Aff. Comm.					

Itemized C

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan) **NON-REFUNDABLE CONTRIBUTIONS PAGE TOTAL \$ 600.00**

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 Joel	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Cash Amt. \$250.00	Est. Value
Last Name Gregory	1/31/2018	CFO			\$0.00
Address 109 Fortson Cir					
Address 2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Landmark Properties	<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	
City Athens					
State GA					
Zip 30606					
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name or Business Name Alan	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Cash Amt. \$500.00	Est. Value
Last Name Pope	1/31/2018	Owner			\$0.00
Address 135 Westover Dr.					
Address 2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer The Place	<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	
City Athens					
State GA					
Zip 30605					
Aff. Comm.					

Itemized Contributions Page Total \$750.00 \$0.00

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

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

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name Andrew	Date 1/31/2018	Occupation Owner	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$101.00	Est. Value		
Last Name Levy					\$0.00		
Address 450 Sunset Dr							
Address 2		Employer DTproductions			Description		
City Athens							
State GA	Zip 30606						
Aff. Comm.							
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
First Name or Business Name Colby	Date 1/25/2018	Occupation Technician	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$1,000.00	Est. Value		
Last Name Widner					\$0.00		
Address PO Box 7831							
Address 2		Employer University of Georgia			Description		
City Athens							
State GA	Zip 30604						
Aff. Comm.							

Itemized C

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name or Business Name Christina	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$700.00	Est. Value
Last Name Batten	1/30/2018	Specialist			\$0.00
Address 2035 Timothy Rd					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Athens	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source	NCR			
Zip 30606	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle** Cash Amount	In-Kind Contributions Estimated Value Description	
First Name or Business Name Cameron	Date	Occupation			
Last Name Harrelson	1/18/2018	Self Employed			
Address 4355 Lexington Road					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Athens	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30605	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total \$1,200.00 \$0.00

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

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

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Dan	Date 1/26/2018	Occupation Insurance	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value
Last Name Perrin					\$0.00
Address 139 Clifton Dr					
Address 2					Description
City					
State GA	Zip 30606				
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Exponential	Date 11/1/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$0.00	Est. Value
Last Name					\$1,000.00
Address					
Address 2					Description
City Athens					
State GA	Zip 				
Aff. Comm.	Campaign T-shirts				

Itemized C

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

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.) Richie	1. 9/1/2017	First Name	1. Owner
Lender Last Name Knight	2. \$8,000.00	Last Name	2. HW Production Company, LLC
Address 314 E Washington St	3. <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Primary	Address	3.
Address 2		Address 2	<input type="checkbox"/> Public Officer <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
City Athens		City	
State GA	Zip 30601	State	Zip

Reference: OCGA § 21-5-34(b)(1)

Loan Page Total

\$8,000.00

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

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

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

State of Georgia
Campaign Contribution Disclosure Report
Itemized Expenditures

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

List Name and Mailing Address of Recipient	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Bel	Date 1/31/2018	Occupation	Printing	\$159.43
Last Name Jean				
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		
Address 2				
City				
State GA	Zip 30601			
First Name Anedot	Date 1/31/2018	Occupation	Credit Card Fees	\$144.06
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		
Address 2				
City				
State GA	Zip 30601			

Page Total \$303.49

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

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

State of Georgia
Campaign Contribution Disclosure Report
Addendum Statement

The Addendum Statement should be used for explanation of any additional information needed to complete an accurate filing of this report.

Information that is to be reported in the body of the report should not be listed on Addendum Statement.