

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) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment Amendment # _____	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>Committee to Elect Richie Knight</u> Filer ID: _____ (Filer ID that begins with the letter "NC")
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3. Identifying and Contact Information

(1) Richard Marcus Knight, Jr		(2) <u>4/4/2018</u>
<i>Full Name of Candidate or Other Than Candidate Campaign Committee</i>		<i>Today's Date</i>
(3) 314 E Washington Street <i>Mailing Address</i>	Athens <i>City</i>	GA <i>State</i> 30601 <i>Zip Code</i>
(4) 706-308-4877 <i>Primary Contact Phone Number</i>	and/ or	richie@hwpProduction.com <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: Colby Widner <i>Name of Committee Chairperson</i>		Cameron Harrelson <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 type="checkbox"/> June 30, 2018 (year)	<input type="checkbox"/> January 31, 2018 (year) <input checked="" type="checkbox"/> March 31, 2018 (year) <input type="checkbox"/> June 30, 2018 (year) <input type="checkbox"/> September 30, 2018 (year) <input type="checkbox"/> October 25, 2018 (year) <input type="checkbox"/> Dec. 31, 2018 (year)	<input type="checkbox"/> 6 days before Primary Run-Off 2018 (year) <input type="checkbox"/> 6 days before General Run-Off 2018 (year) <input type="checkbox"/> 6 days before Special Primary Run-Off 2018 (year) <input type="checkbox"/> 6 days before Special Run-Off 2018 (year)	<input type="checkbox"/> 15 days before Special Primary, 2018 (year) <input type="checkbox"/> 15 days before Special, 2018 (year) <input type="checkbox"/> Dec. 31, 2018 (year)
Supplemental Reporting <input type="checkbox"/> June 30, 2018 (year) <input type="checkbox"/> December 31, 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)			

State of Georgia

County of _____

I, Richard Marcus Knight, Jr, 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 _____, _____

4/4/2018 12:47:55 AM

9f136986ca834b57b7361ae3e310220f

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.	\$6,950.00	\$20,150.29
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$1,000.00	\$3,209.00
3a	All loans received this reporting period.		\$0.00
3b	Interest earned on campaign account this reporting period.		\$0.00
3c	Total amount of investments sold this reporting period.		\$0.00
3d	Total amount of cash dividends and interest paid out this reporting period.		\$0.00
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.	\$0.00	\$6,520.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$1,000.00	\$9,729.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$7,950.00	\$29,879.29

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	\$347.71
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$13,586.25
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	\$13,586.25
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$13,933.96

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)	\$7,950.00	\$16,293.04
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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 Christina	Date 3/30/2018	Occupation Marketing	<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 Batten					\$1,000.00
Address 2035 Timothy Rd					
Address 2					Description
City Athens					
State GA					
Zip 30606					
Aff. Comm.					Video
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 Jon	Date 2/12/2018	Occupation Engineering	<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 Williams					\$0.00
Address 115 Fortson circle					
Address 2					Description
City Athens					
State GA					
Zip 30606					
Aff. Comm.					

* Cet article a été mis en ligne le 20 mai 2011 par L'Inist-CNRS. Son contenu peut être consulté et téléchargé à l'adresse www.sciencedirect.com.

* 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)

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 Matthew	Date 3/31/2018	Occupation Teaching Assistant	<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 Spire					\$0.00
Address PO Box 631					
Address 2					Description
City Valley Center					
State CA					
Zip 92082					
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 William	Date 3/28/2018	Occupation Fundraising Professional	<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 Bain					\$0.00
Address 420 Holman Ave					
Address 2					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 William	Date 3/28/2018	Occupation Fundraising Professional	<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 Bain					\$0.00
Address 420 Holman Ave					
Address 2					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 William	Date 3/28/2018	Occupation Fundraising Professional	<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 Bain					\$0.00
Address 420 Holman Ave					
Address 2					Description
City Athens					
State GA					
Zip 30606					
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)					

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 Rob	Date 3/14/2018	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. \$101.00	Est. Value
Last Name Yongue					\$0.00
Address 700 Mitchell Bridge Road					
Address 2					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 Leanna	Date 3/10/2018	Occupation lobbyist	<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 Brown					\$0.00
Address 1160 Cedar Trail					
Address 2					Description
City Bishop					
State GA					
Zip 30621					
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 Leanna	Date 3/10/2018	Occupation lobbyist	<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 Brown					\$0.00
Address 1160 Cedar Trail					
Address 2					Description
City Bishop					
State GA					
Zip 30621					
Aff. Comm.					
Full Name of Contributor Mailing Address (Affiliation of Committee if any)					

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 Paul	Date 3/9/2018	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. \$101.00	Est. Value
Last Name Mazzone					\$0.00
Address 3201 Old Church Cove NE					
Address 2					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	Occupation & Employer			Estimated Value
First Name or Business Name Stephen	Date 3/3/2018	Occupation Director	<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 Balfour					\$0.00
Address 135 Boundary Street					
Address 2					Description
City Athens					
State GA					
Zip 30607					
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 Alan	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Cash Amt. \$101.00	Est. Value
Last Name Cason	3/1/2018	Owner			\$0.00
Address 299 Lenox 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 abraKIDabra TOYS	<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					
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 Michelle	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Cash Amt. \$101.00	Est. Value
Last Name Commeyras	2/22/2018	Retired			\$0.00
Address 1734 East Broad Street					
Address 2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired	<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					
Aff. Comm.					

Itemized Contributions Page Total \$202.00 \$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 3/31/2018	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 French				\$0.00		
Address 210 University drive						
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 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	
First Name or Business Name Hulet	Date 3/31/2018	Occupation Occupational Therapist	<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 Smith				\$0.00		
Address 1367 Sydney's Pass						
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 Watkinsville						
State GA	Zip 30677					
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 Blaine	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. \$250.00	Est. Value
Last Name Bostelman	3/12/2018	Chief Operations Officer			\$0.00
Address 160 Skyline Parkway					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Athens	<input type="checkbox"/> In-Kind	University Cancer & Blood Center			
State GA	<input type="checkbox"/> Common Source				
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** Received Date Contribution Type*	Cash Amount Description	In-Kind Contributions
First Name or Business Name Chris	Date	Occupation			Estimated Value
Last Name Ryan	3/31/2018	Owner			
Address 111 Trillium Lane					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Athens	<input type="checkbox"/> In-Kind	Self Employed			
State GA	<input type="checkbox"/> Common Source				
Zip 30605	<input type="checkbox"/> Credit Received on Loan				
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	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name or Business Name Taylor	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Cash Amt. \$1,000.00	Est. Value
Last Name Griffith	2/26/2018	Software			\$0.00
Address 583 Woodland Hills Drive					
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	<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					
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 Richard	Date	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Cash Amt. \$200.00	Est. Value
Last Name Russell Jr	3/28/2018	Attorney			\$0.00
Address PO Box 1242					
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 Lueder, Larkin & Hunter	<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 Winder					
State GA					
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	Occupation & Employer			Estimated Value
	Contribution Type*				Description
	Date	Occupation			Est. Value
First Name or Business Name Anthony Chiropractic Office	3/29/2018		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary	\$100.00	\$0.00
Last Name					
Address 335 Hawthorne Lane					
Address 2	<input checked="" type="checkbox"/> Monetary	Employer	<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	<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

\$100.00

\$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

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 <input type="checkbox"/> Primary	Address	3.	
Address 2		Address 2		
City		City	<input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name	
State	Zip	State	Zip	

Reference: OCGA § 21-5-34(b)(1)

Loan Page Total

\$0.00

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

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

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

State of Georgia
Campaign Contribution Disclosure Report
Itemized Expenditures

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

List Name and Mailing Address of Recipient	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name HEG, LLC	Date 3/5/2018	Occupation	Printing - Signs	\$3,280.00
Last Name				
Address 3350 Northlake Parkway, B4	<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 Atlanta				
State GA	Zip 30345			
First Name Bel-Jean Copy Print	Date 2/26/2018	Occupation	Printing - Push Cards	\$129.47
Last Name				
Address 163 E Broad 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	Employer		
Address 2				
City Athens				
State GA	Zip 30601			
First Name Bel-Jean Copy Print	Date 3/22/2018	Occupation	Printing - Push Cards	\$186.18
Last Name				
Address 163 E Broad 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	Employer		
Address 2				
City Athens				
State GA	Zip 30601			

Page Total \$3,595.65

* 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

First Name Athens Anti-Discrimination Movement		Date 3/2/2018	Occupation	Never Again Youth March Sponsorship	\$200.00
Last Name					
Address					
Address 2			Employer		
City Athens					
State GA	Zip 30601				
First Name Anedot		Date 3/31/2018	Occupation	Credit Card Fees	\$134.10
Last Name					
Address 4017 Buena Vista St. #109					
Address 2			Employer		
City Dallas					
State TX	Zip 75204				
First Name Moonshadow Mobile		Date 2/19/2018	Occupation	Campaign Data	\$799.00
Last Name					
Address 859 Willamette St					
Address 2			Employer		
City Eugene					
State OR	Zip 97401				

Page Total \$1,133.10

* 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

First Name Allen	Date 2/20/2018	Occupation	Campaign Staff	\$3,200.00
Last Name Fox				
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	Zip			
First Name Tony	Date 3/25/2018	Occupation	Campaign Staff	\$1,800.00
Last Name Lucadamo				
Address	Employer			
Address 2				
City				
State	Zip			
First Name Cameron	Date 3/30/2018	Occupation	Campaign Staff	\$2,000.00
Last Name Harrelson				
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	Zip			

Page Total \$7,000.00

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

First Name Gay & Lesbian Victory Fund	Date 3/11/2018	Occupation	Event	\$250.00	
Last Name					
Address	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer			
Address 2					
City					
State	Zip				
First Name Network For Good	Date 3/12/2018	Occupation	Jeannette Rankin Forums on Race	\$257.50	
Last Name					
Address 1 Huntington Road, Suite 701					
Address 2	Employer				
City Athens					
State	Zip	<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			
GA	30606				
First Name ACC Board of Elections	Date 3/8/2018	Occupation			
Last Name					
Address 155 E Washington 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	Candidate Qualifying Fee	\$1,350.00		
Address 2					
City Athens					
State				Zip	
GA				30601	

Page Total \$1,857.50

* 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.