

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>ACC Commissioner District 7</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>William Overend</u> Filer ID: _____ (Filer ID that begins with the letter "NC")	
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3. Identifying and Contact Information

(1) William Overend		(2) 4/6/2018	
<i>Full Name of Candidate or Other Than Candidate Campaign Committee</i>		<i>Today's Date</i>	
(3) P.O. Box 1401		Athens	GA 30603
<i>Mailing Address</i>	City	State	Zip Code
(4) 706-613-6614		and/ or <u>billoverend@icloud.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: William Overend		<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 type="checkbox"/> June 30, 2018 (year) Supplemental Reporting <input type="checkbox"/> June 30, 2018 (year) <input type="checkbox"/> December 31, 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)

*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, William Overend, 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 _____, _____

4/6/2018 10:13:06 PM

26701ecdd3654e19aa3eb0224316fb2b

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.	\$0.00	\$1,275.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$900.00	\$1,540.00
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	\$0.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$900.00	\$1,540.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$900.00	\$2,815.00

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	\$82.36
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$393.81
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	\$182.79
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$576.60
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$658.96

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)	\$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*: Primary		Election Year: 2018	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		\$1,000.00
2	Loans received this reporting period.		\$0.00
3	Deferred payment of expenses this reporting period.		\$0.00
4	Payments made on loans this reporting period.		\$0.00
5	Credits received on loans this reporting period.		\$0.00
6	Payments this reporting period on previously deferred expenses.		\$0.00
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		\$1,000.00

* 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 Lyn	Date 2/2/2018	Occupation Nurse	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$25.00	Est. Value \$0.00	
Last Name Lovstrom						
Address 1727 Russells Point Ct	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description	
Address 2						
City Lawrenceville						
State GA						Zip 30043
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 Leon	Date 2/2/2018	Occupation retired	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name Galis						
Address 997 Riverbend Parkway	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description	
Address 2						
City Athens						
State GA						Zip 30606
Aff. Comm.						

* S. C. Johnson, T. M. Lutz, J. K. L. G. S. S. G. E. B. (1981), J. M. M. (1982).

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

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

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 Paul	Date 2/6/2018	Occupation Retired	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value
Last Name Kurtz				\$0.00	
Address 362 W. Cloverhurst Ave.					
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.					
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 Laura	Date 2/22/2018	Occupation Business Manager	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$25.00	Est. Value
Last Name Floyd				\$0.00	
Address 345 Morton Farm lane					
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 Canopy Studio		Description
City Athens					
State GA	Zip 30605				
Aff. Comm.					

Itemized C

* 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, Run-Off General 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 Brian	Date 3/12/2018	Occupation Attorney	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$200.00	Est. Value	
Last Name Carney				\$0.00		
Address 263 Milledge Circle						
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		Employer Self	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 Bertis	Date 3/29/2018	Occupation Attorney	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value	
Last Name Downs				\$0.00		
Address 738 Cobb Street						
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		Employer Self	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 Russell	Date 3/30/2018	Occupation Professor	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$200.00	Est. Value		
Last Name Gabriel					\$0.00		
Address 111 Bob Wages Road							
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source			Description		
City Bogart							
State GA	Zip 30622						
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 Kyle	Date 3/30/2018	Occupation Retired	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$50.00	Est. Value		
Last Name Pilgrim					\$0.00		
Address 110 Holmes Court							
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source			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 Drew	Date 3/6/2018	Occupation Contractor	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value	
Last Name Dekle				\$0.00		
Address 194 Westview Drive						
Address 2		Employer			Description	
City Athens						
State GA						
Zip .30606		Self				
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 Rabun	Date 3/28/2018	Occupation Pharmacist	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$50.00	Est. Value	
Last Name Wiley				\$0.00		
Address 194 Westview Dr						
Address 2		Employer			Description	
City						
State GA						
Zip 30606		Hodgson's				
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 Howard	Date 3/27/2018	Occupation Retired	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value
Last Name Scott					\$0.00
Address 345 Hancock Ave					
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source	Employer n/a		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 Eric	Date 3/27/2018	Occupation Attorney	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$40.00	Est. Value
Last Name Krasle					\$0.00
Address 425 N. Lumpkin Street, Suite 210					
Address 2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source	Employer Self		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	Occupation & Employer			Estimated Value			
	Contribution Type*				Description			
First Name or Business Name Jason	Date 2/16/2018	Occupation Photographer	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$0.00	Est. Value			
Last Name Thrasher				\$300.00				
Address 125 Witherspoon Rd								
Address 2	<input type="checkbox"/> Monetary <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on <input type="checkbox"/> Loan	Employer Self	<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								Headshots/Photography
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 William	Date 2/2/2018	Occupation Attorney	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$600.00	Est. Value			
Last Name Overend				\$600.00				
Address 580 Westview Drive								
Address 2	<input type="checkbox"/> Monetary <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on <input type="checkbox"/> Loan	Employer Self	<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								Yard Signs
Zip 30606								
Aff. Comm.								

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.)	1.	First Name		1.
Lender Last Name	2.	Last Name		2.
Address	3.	Address		3.
Address 2		Address 2		
City		City		
State	Zip	State	Zip	<input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate <input type="checkbox"/> Committee Name

Reference: OCGA § 21-5-34(b)(1)

Loan Page Total

\$0.00

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

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

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

State of Georgia
Campaign Contribution Disclosure Report
Itemized Expenditures

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

List Name and Mailing Address of Recipient	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Apex Signs and Designs	Date 2/5/2018	Occupation Printing Services	Stickers for Yard Signs	\$279.06
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			
Address 2		Employer		
City Athens				
State GA	Zip 30601			
First Name MOO.COM	Date 2/25/2018	Occupation Print Services	Flyers	\$114.75
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			
Address 2		Employer		
City				
State GA	Zip 30601			

Page Total \$393.81

* 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.