

CFC-CCDR 1/14

4/14

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

<p>1. Report Type (Select One)</p> <p><input checked="" type="checkbox"/> Original</p> <p><input type="checkbox"/> Amendment</p> <p>Amendment # _____</p>	<p>2. Filing is being made on behalf of (Select One):</p> <p>Candidate or Public Official Office Held or Sought: <u>Commissioner District 9</u> <small>(Include county, municipality, district, post or judicial circuit)</small></p> <p>Filer ID: _____ <small>(Filer ID that begins with the letter "C")</small></p> <p>Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee to Elect Ovita Thornton</u></p> <p>Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small></p>	<p>Use Earlier of Post Mark or Hand Delivered Date</p> <p style="text-align: center;">APR 5 2019</p>
--	--	--

3. Identifying and Contact Information

(1) Ovita Thornton (2) March 31, 2018
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 170 Fowler Drive Athens GA 30601
Mailing Address City State Zip Code

(4) 706 202 4437 and/or ovita4district9@gmail.com
Primary Contact Phone Number E-Mail

(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? Yes No

(6) If yes, is the committee registered with the Commission? Yes No

(7) If yes, complete the following: Cory Thornton | Kenneth Dious
Name of Committee Chairperson Name of Committee Treasurer

4. Period for which you are Reporting

You Must Check Only One Box

My Non Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Election
<input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> June 30, ____ (year)	<input type="checkbox"/> January 31, ____ (year) <input checked="" type="checkbox"/> March 31, <u>2018</u> (year) <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> September 30, ____ (year) <input type="checkbox"/> October 25, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)	<input type="checkbox"/> 6 days before Primary Run-Off ____ (year) <input type="checkbox"/> 6 days before General Run-Off ____ (year) <input type="checkbox"/> 6 days before Special Primary Run-Off ____ (year) <input type="checkbox"/> 6 days before Special Run-Off ____ (year)	<input type="checkbox"/> 15 days before Special Primary, ____ (year) <input type="checkbox"/> 15 days before Special, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)
<p>Supplemental Reporting</p> <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<p><small>*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)</small></p>		

Sworn to and signed by Kenneth Dious State of Georgia County of Athens-Clark

I, Kenneth Dious, 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 signed by [Signature] on April 16, 2018

NOTARY PUBLIC, MADISON COUNTY GA
MY COMMISSION EXPIRES 11/21/20

[Signature] Nov. 21, 2020 [Signature]
Signature of _____ Commission Expiration a. Signature of Candidate
b. Organization/Chairperson/Treasurer

CFC-CCDR 1/14

**State of Georgia
Campaign Contribution Disclosure Report
Summary Report**

CONTRIBUTIONS RECEIVED

1	<input type="checkbox"/> I have no contributions to report. <input 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.		\$ 2,430.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		5,300.00
3a	All loans received this reporting period.		- 0 -
3b	Interest earned on campaign account this reporting period.		- 0 -
3c	Total amount of investments sold this reporting period.		- 0 -
3d	Total amount of cash dividends and interest paid out this reporting period.		- 0 -
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.		1,506.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		6,806.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		9,236.00

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.		516.22
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		3,826.92
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		164.11
11	Total expenditures reported this period. (Line 9 + 10)		3,991.03
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		4,507.25

INVESTMENTS

13	Total value of investments held at the beginning of this reporting period.		- 0 -
14	Total value of investments held at the end of this reporting period.		- 0 -

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)		\$ 4,728.75
----	--	--	-------------

* 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.

CFG-CCDR 1/14

**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.	0
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	
Election Cycle*: _____ Election Year: _____		<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.	0
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	
Election Cycle*: _____ Election Year: _____		<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.	0
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

CFC-CCDR 1/14

State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

Must list contributions received by a single contributor for which the aggregate total more than \$100.00.
Note: Loans are no longer reported in "Itemized Contributions" section. See Loan Reporting section below.

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value
					Description
First Name or Business Name	Date	Occupation		Cash Amt	Est. Value
Last Name	SEE SPREADSHEET		<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		
Address					
Address2				<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer
City					
State	Zip				
Aff. Comm.					
First Name or Business Name	Date	Occupation		Cash Amt	Est. Value
Last Name	SEE SPREADSHEET		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
Address					
Address2				<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer
City					
State	Zip				
Aff. Comm.					
First Name or Business Name	Date	Occupation		Cash Amt	Est. Value
Last Name	SEE SPREADSHEET		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
Address					
Address2				<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer
City					
State	Zip				
Aff. Comm.					

Itemized Contributions Page Total \$ _____ \$ _____

CFC-CCDR 1/14

First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				

Itemized Contributions Page Total \$ _____ \$ _____

* 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

Public Officer/Candidate/Other Than Candidate Committee Name

Ovita Thornton

State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Little Management Last Name Group Address 5000 Smokey Rd. Address2 City ATHENS State GA Zip 30601	Date 2/12/18 <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	Occupation management of event facility Employer 	deposit on rental of facility	\$ 200.-
First Name Delvin Last Name Roberts Address Address2 City Monroe State GA Zip 30622	Date 3/4/18 <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	Occupation D.J. Employer 	provide music at event	300.-
First Name Athens Clarke Co. Last Name Bd. of Elections Address Address2 City Athens State GA Zip 30601	Date 3/6/18 <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	Occupation govt. Employer 	Candidate qualifying fee	450.-

Page Total \$ **950.-**

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

CFC-CCDR 1/14

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name: <i>Little Management</i> Last Name: <i>Group</i> Address: <i>5000 Smokey Rd</i> Address2: City: <i>Athens</i> State: <i>GA</i> Zip: <i>30601</i>	Date: <i>3/4/18</i> <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	Occupation: <i>management of event facility</i> Employer:	<i>rental of facility</i>	<i>\$600.-</i>
First Name: <i>A.G.E. Graphics</i> Last Name: Address: <i>678 Collins Rd.</i> Address2: City: <i>Little Hocking</i> State: <i>Ohio</i> Zip: <i>45742</i>	Date: <i>3/13/18</i> <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	Occupation: <i>manufacturer of signs</i> Employer:	<i>yard signs</i>	<i>\$190.-</i>
First Name: <i>Greater GA. Printers</i> Last Name: Address: <i>P.O. Box 75</i> Address2: City: <i>Crawford</i> State: <i>GA</i> Zip: <i>30630</i>	Date: <i>3/4/18</i> <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	Occupation: <i>manufacture signs</i> Employer:	<i>foam board signs</i>	<i>\$128.40</i>
First Name: <i>ZEBRA MAGAZINE</i> Last Name: Address: <i>400 Hawthorne Ave</i> Address2: City: <i>ATHENS</i> State: <i>GA</i> Zip: <i>30606</i>	Date: <i>3/24/18</i> <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	Occupation: <i>magazine publication</i> Employer:	<i>AD/publicity</i>	<i>\$450.-</i>

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

Page Total \$ *1,368.40*

CFC-CCDR 1/14

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name HATTIE	Last Name LAWSON	Date 3/26/18	Occupation Retired	Reimbursement for yard sign posts	\$200.-
Address P.O. Box 80984		Employer N/A			
Address2		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
City Athens					
State GA	Zip 30608				
First Name Quita	Last Name Thornton	Date 3/27/18	Occupation CCSD Bd. member	Reimbursement of advancement for expenses pd. relating to Campaign	\$1,058.52
Address 170 Fowler Dr.		Employer			
Address2		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
City Athens					
State GA	Zip 30601				
First Name Family Connections	Last Name Communities in Schools	Date 3/24/18	Occupation	ad/publicity	\$250.-
Address		Employer			
Address2		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
City Athens					
State GA	Zip				
First Name	Last Name	Date	Occupation		
Address		Employer			
Address2		<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
City					
State	Zip				

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)Public Officer/Candidate/Other Than Candidate Committee Name Page Total \$ **1,508.52**

Public Officer/Candidate/Other Than Candidate Committee Name

Quita Thornton

Page **8** of **11**

Total Amount of Expenditures of \$100 or less:

Purchase Square	\$ 53.49	
ACC U Govt. (fire station rental).....	50.00	
Walmart (envelopes).....	20.37	
Squares charges.....	<u>40.35</u>	
Total Expenses.....		\$ 164.11

CFC-CCDR 1/14

**State of Georgia
Campaign Contribution Disclosure Report
Investments Statement**

1. Investment Name	Account #
Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	Difference in value \$
	Interest Paid Out \$
	Cash Dividends \$

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss

2. Investment Name	Account #
Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	Difference in value \$
	Interest Paid Out \$
	Cash Dividends \$

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss

<u>Total value of investments at beginning of reporting period \$</u>	Page Total Cash Dividends: \$ _____
<u>Total value of investments at end of reporting period \$</u>	Page Total Interest Paid Out: \$ _____
<u>Total difference in value \$</u>	Page Total Profit: \$ _____
	Page Total Loss: \$ _____

CFC-CCDR 1/14

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.

	A	B	C	D	E	F	G
	NAME	ADDRESS	CITY/STATE/ZIP	DATE REC'D/ Contr. Type	OCCUPATION	ELECTION CYCLE	CASH AMOUNT
1	Francis Berry	160 Mulberry St.	Athens, Ga. 30601	2/23/18 - Monetary		general	\$100.00
2	Rosemary M. Bowen	585 Research Dr.	Athens, Ga. 30606	2/23/18 - Monetary		general	\$100.00
3	Robert D. Finch	P.O. Box 48071	Athens, Ga. 30601	3/6/18 - Monetary	Retired	general	\$1,000.00
4	David & Mary Kissell	311 Chesterfield Rd.	Bogart, Ga. 30622	3/6/18 - Monetary	Retired	general	\$100.00
5	Melissa Link	148 Hiwassee Ave.	Athens, Ga. 30601	3/6/18 - Monetary	Educator	general	\$100.00
6	Valcong, Shirley Daniel	1300 Belmont Rd.	Athens, Ga. 30605	3/6/18 - Monetary	Retired	general	\$100.00
7	Bertis Downs	P.O. Box 1983	Athens, Ga. 30603	3/8/18 - Monetary	businessman	general	\$100.00
8	Richard/Sunjato Winfield	160 Hampton Ct.	Athens, Ga. 30605	3/14/18 - Monetary	self employed/attyn	general	\$100.00
9	Nancy Denson	P.O. Box 1222	Athens, Ga. 30603	3/14/18 - Monetary	Mayor	general	\$150.00
10	Lacy Johnson	4000 Smokey Rd.	Athens, Ga. 30601	3/14/18 - Monetary	Retired	general	\$150.00
11	Lee Smith	425 Rivermont Rd.	Athens, Ga. 30606	3/27/18 - Monetary	Retired	general	\$100.00
12	St'onna Wilkins	421 Carrie Ct.	Athens, Ga. 30606	3/30/18 - Monetary	Reg. Nurse	general	\$200.00
13	Dr. Le Lang	115 Sycamore Dr.	Athens, Ga.	3/30/18 - monetary	Counselor	general	\$100.00
14	Ken Dious	375 West Rutherford St	Athens, Ga. 30606	3/30/18 - Monetary	Attorney	general	\$100.00
15	Mike Hamby	P.O. Box 48071	Athens, Ga. 30601	3/30/18 - Monetary	Commissioner	general	\$100.00
16	Alfreeda Finch	P.O. Box 48071	Athens, Ga. 30601	3/30/18 - Monetary	Retired	general	\$100.00
17	Ben Rivers	P.O. Box 6425	Athens, Ga. 30604	3/30/18 - Monetary	Retired	general	\$100.00
18	Travis Thornton	1763 Maple Walk	Atlanta, Ga. 30315	3/30/18 - Monetary	Teacher	general	\$500.00
19	Sarah Ellis	321 Dubose Ave.	Athens, Ga. 30601	3/30/18 - Monetary	Realtor	general	\$200.00
20	Bertis Downs	P.O.Box 1983	Athens, Ga. 30603	3/30/18 - Monetary	businessman	general	\$100.00
21	Robin Brinkley	580 Westview Drive	Athens, Ga 30605	3/31/18 - Monetary	Attorney	general	\$100.00
22	William Overland	4328 Desert Park Ave	N. Las Vegas, NV 89085	3/31/18 - Monetary	Veternarian	general	\$1,000.00
23	Kyle Thornton	118 Green Top Way	Athens, Ga. 30605	3/31/18 - Monetary	Educator	general	\$100.00
24	Denise A. Spanger	235 Dubose Avenue	Athens, Ga. 30601	3/31/18 - Monetary	Prof. of Educat.	general	\$200.00
25	Barbara Benson						
26							
27							
28							
29							
30							
31							
32							
33	Common Source					TOTAL	\$1,506.00

Ovita Thornton
3/31/18
Pg 11 of 11