

Campaign Contribution Disclosure Report

Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1416 West Tower | Atlanta, GA 30334 | 404-463-1980 | www.ethics.ga.gov

1. Report Type <small>(Select One)</small> <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 District 1 Commissioner</u> <small>(Include county, municipality, district, post or judicial seat)</small> Filer ID _____ <small>(Filer ID that begins with the letter "C")</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: _____ Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>	Use Earlier of Post Mark or Hand-Delivered Date <div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div>
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3. Identifying and Contact Information

(1) Audrey Hughes (2) _____
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) 544 Lacebark Drive Athens GA 30605
Mailing Address City State Zip Code

(4) 706-612-6897 and/ or audreyforathens@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: Ani Fischer | Laurie Camp
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"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)	<input type="checkbox"/> January 31, _____ (year) <input checked="" type="checkbox"/> April 30, <u>2022</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)
Supplemental Reporting <input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)	<small>*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34i</small>		

State of Georgia County of Clayton

I, _____, 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 one completed in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on May 2nd, 2022

[Signature] 2/27/2026
Signature of Notary Public Commission Expiration

[Signature]
Signature of Candidate b. Organization/Chairperson/Treasurer

State of Georgia
Campaign Contribution Disclosure Report
Summary Report

CONTRIBUTIONS RECEIVED

1	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 officesought, 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	0
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		\$2700 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.		\$1580 ⁰⁰
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		\$4280 ⁰⁰
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		\$4280 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	0
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	0	\$3780.79
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	0
11	Total expenditures reported this period. (Line 9 + 10)		\$3780.79
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$3780.79

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)		\$499.21
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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*: <u>General</u>		Election Year: <u>2022</u>	<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.		0
2	Loans received this reporting period.		0
3	Deferred payment of expenses this reporting period		0
4	Payments made on loans this reporting period.		0
5	Credits received on loans this reporting period		0
6	Payments this reporting period on previously deferred expenses.		0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		0
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*: _____		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*	Employer			Description
First Name or Business Name Last Name Address Address2 City State Zip Aff. Comm.	Date Contribution Type* <input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer CCSD	<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. \$450 ⁰⁰	Est. Value Description
First Name or Business Name Last Name Address Address2 City State Zip Aff. Comm.	Date Contribution Type* <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer Multiple Choices	<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 Description
First Name or Business Name Last Name Address Address2 City State Zip Aff. Comm.	Date Contribution Type* <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer CCSD	<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 Description

Itemized Contributions Page Total \$ 650⁰⁰ \$ _____

CFC-CCDR 10/19

First Name or Business Name		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.	Est. Value
Anna Last Name Whitfield Address 1161D sunrise Ave Address2 City Raleigh State NC Zip 27608 Aff. Comm.		March 22, 2022	Professor Employer NC State			\$100 ⁰⁰
		<input checked="" type="checkbox"/> Monetary				Description
		<input type="checkbox"/> In-Kind				
		<input type="checkbox"/> Common Source				
		<input type="checkbox"/> Credit Received on Loan				
Beverly Last Name Tuttle Address 130 Wesley Dr Address2 City Athens State GA Zip 30605 Aff. Comm.		March 24, 2022	Retired Employer	<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	\$100 ⁰⁰	
		<input checked="" type="checkbox"/> Monetary				Description
		<input type="checkbox"/> In-Kind				
		<input type="checkbox"/> Common Source				
		<input type="checkbox"/> Credit Received on Loan				
Joan Last Name Strickland Address 547 Lex Strickland Rd Address2 City Claxton State GA Zip 30417 Aff. Comm.		March 24, 2022	Retired Employer	<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	\$200 ⁰⁰	
		<input checked="" type="checkbox"/> Monetary				Description
		<input type="checkbox"/> In-Kind				
		<input type="checkbox"/> Common Source				
		<input type="checkbox"/> Credit Received on Loan				
Mary Last Name Williams Address 169 Falling Shoals Dr Address2 City Athens State GA Zip 30605 Aff. Comm.		March 26, 2022	Retired Employer	<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	\$200 ⁰⁰	
		<input checked="" type="checkbox"/> Monetary				Description
		<input type="checkbox"/> In-Kind				
		<input type="checkbox"/> Common Source				
		<input type="checkbox"/> Credit Received on Loan				

Itemized Contributions Page Total \$ 600⁰⁰ \$

* 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

First Name or Business Name George Last Name Whitfield Address 284 Whitfield Rd Address2 City Moultrie State GA Zip 31768 Aff. Comm.	Date March 27, 2022 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Retired Employer	<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 ¹⁰	Est. Value Description
First Name or Business Name Cardlyn Last Name Howell Address 341 Ashton Pl Address2 City Athens State GA Zip 30605 Aff. Comm.	Date March 28, 2022 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Retired Employer	<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. \$300 ¹⁰	Est. Value Description
First Name or Business Name Shiril Last Name Wunderlich Address 185 Elderberry Cir Address2 City Athens State GA Zip 30605 Aff. Comm.	Date March 30, 2022 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Hair Stylist Employer Cutting Edge Salon	<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 ¹⁰	Est. Value Description
First Name or Business Name Bobb Last Name Long Address 120 Emerald Dr Address2 City Athens State GA Zip 30605 Aff. Comm.	Date March 30, 2022 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Insurance Agent Employer Primerica	<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 ¹⁰	Est. Value Description

Itemized Contributions Page Total \$ 850¹⁰ \$

* 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

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
CJ Amason 540 Forest Rd Athens GA 30605	March 30, 2022	Chief Culture + Communications Officer Cadet PBAFD, LLC	<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	\$100 ⁰⁰	
Ani Fischer 201 Hidden Spring Way Athens GA 30605	April 1, 2022	Homemaker ∅	<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	\$100 ⁰⁰	
Jack Curry 105 Heathstone Ct Athens GA 30605	April 1, 2022	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	\$200 ⁰⁰	
Mark Martin 340 Cone Dr Athens GA 30601	April 2, 2022	teacher CCSD	<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	\$100 ⁰⁰	

Itemized Contributions Page Total \$ 500⁰⁰ \$

* 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

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
First Name or Business Name: <u>Carolyn</u> Last Name: <u>Ashley</u> Address: <u>1061 Summit Cir</u> Address2: City: <u>Watkinsville</u> State: <u>GA</u> Zip: <u>30677</u> Aff. Comm.:	Date: <u>April 5, 2022</u> <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation: <u>Retired</u> Employer:	<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.: <u>\$100^{ED}</u>	Est. Value:
First Name or Business Name: Last Name: Address: Address2: City: State: Zip: Aff. Comm.:	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation: Employer:	<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: Description:
First Name or Business Name: Last Name: Address: Address2: City: State: Zip: Aff. Comm.:	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation: Employer:	<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: Description:
First Name or Business Name: Last Name: Address: Address2: City: State: Zip: Aff. Comm.:	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation: Employer:	<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: Description:
First Name or Business Name: Last Name: Address: Address2: City: State: Zip: Aff. Comm.:	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation: Employer:	<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: Description:

Itemized Contributions Page Total \$ 100^{ED} \$

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

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

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

Loan Reporting

Name of Lender & Mailing Address	1. Date of Loan 2. Amount of Loan 3. Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1. Occupation & 2. Place of Employment 3. Fiduciary Relationship***
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State		State	
Zip		Zip	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State		State	
Zip		Zip	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total \$ <u>0</u>	

* 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

NA - No loans

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 ACC Board of Elections Last Name	Date March 7, 2022	Occupation Employer	Qualifying Fee	\$450 ⁰⁰
Address 155 E Washington St 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 UPS Store Last Name	Date March 26, 2022	Occupation Employer	Signs + Business Cards	\$282.37
Address 1720 Epps Bridge Pkwy Ste 108 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 30606				
First Name Office Depot Last Name	Date March 26, 2022	Occupation Employer	Receipt book + office supplies	\$26.01
Address 3045 Atlanta Hwy 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 30606				

Page Total \$ 758.38

* 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 10/19

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name CUSTOM BUTTONS	Last Name	Date MARCH 31, 2022	Occupation	Campaign Buttons	\$498.43
Address 24825 N. 116th Ave, Ste 100					
Address2	City Phoenix	<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		
State AZ Zip 85085					
First Name Satisfactory Printing	Last Name	Date April 1, 2022	Occupation	Campaign T-shirts	\$659.88
Address 1347 W Broad St					
Address2	City Athens	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
State GA Zip 30606					
First Name UPS Store	Last Name	Date April 9, 2022	Occupation	Signs, Door hangers, Voter Register, + Thank You Notes	\$1522.60
Address 1701720 Epps Bridge Pkwy Ste 108					
Address2	City Athens	<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		
State GA Zip 30606					
First Name Georgia United Credit Union	Last Name	Date April 12, 2022	Occupation	check printing	\$20.50
Address 190 Gaines School Rd					
Address2	City Athens	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
State GA Zip 30605					

* 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

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name LIPS store		Date April 26, 2022	Occupation Employer	Expenditure Purpose Postcards	Amount Paid \$321.00
Last Name					
Address 1720 Epps Bridge Pkwy Ste 108		<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	Expenditure Purpose	Amount Paid
Address2					
City Athens		<input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer	Expenditure Purpose	Amount Paid
State GA	Zip 30606				
First Name		Date	Occupation Employer	Expenditure Purpose	Amount Paid
Last Name					
Address		<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer	Expenditure Purpose	Amount Paid
Address2					
City		<input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer	Expenditure Purpose	Amount Paid
State	Zip				
First Name		Date	Occupation Employer	Expenditure Purpose	Amount Paid
Last Name					
Address		<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer	Expenditure Purpose	Amount Paid
Address2					
City		<input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer	Expenditure Purpose	Amount Paid
State	Zip				
First Name		Date	Occupation Employer	Expenditure Purpose	Amount Paid
Last Name					
Address		<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer	Expenditure Purpose	Amount Paid
Address2					
City		<input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer	Expenditure Purpose	Amount Paid
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 \$ **321.00**

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: \$ _____

NA - NO Investments

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.

I listed all expenses on the
Itemized Expense Report.