

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 (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>County Commissioner District 5</u> <small>(Include county, municipality, district, post or judicial seat)</small> Filer ID _____ <small>(Filer ID that begins with the letter "C")</small>	Use Earlier of Post Mark or Hand-Delivered Date <div style="border: 1px solid black; padding: 5px; display: inline-block;"> APR 11 2022 11:05AM </div>
	Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee To Elect Dexter L. Fisher</u> Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>	

3. Identifying and Contact Information

(1) Dexter L. Fisher (2) 7/05/2022
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) 125 Melbourne Drive Alhens GA 30606
Mailing Address City State Zip Code

(4) 708-224-4313 and/ or dexterfisher@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: Jennifer Zwirn | Sterling Gardner
Name of Committee Chairperson Name of Committee Treasurer

4. Period for which you are Reporting

You Must Check Only One Box

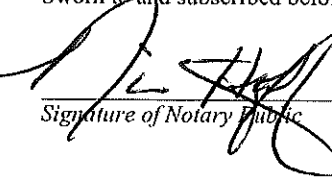
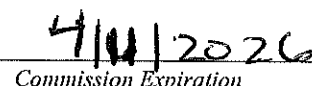

My Non-Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Election
<input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)	<input type="checkbox"/> January 31, _____ (year) <input type="checkbox"/> April 30, _____ (year) <input checked="" type="checkbox"/> June 30, <u>2022</u> (year) <input type="checkbox"/> September 30, _____ (year) <input type="checkbox"/> October 25, _____ (year) <input type="checkbox"/> Dec. 31, _____ (year)	<input checked="" type="checkbox"/> 6 days before Primary Run-Off <u>2022</u> (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)			

*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

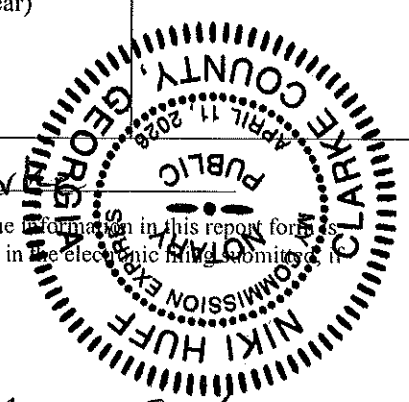
State of Georgia County of Clay

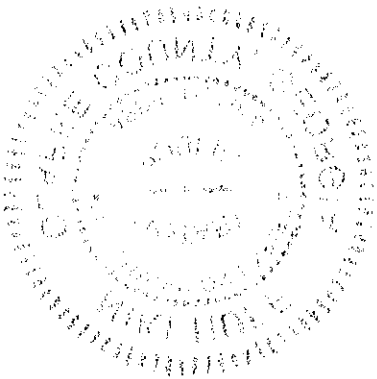
I, Dexter L. Fisher, being duly sworn (affirm), depose and say that the information in this report for _____ is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on 7/6, 20 22

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	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 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.		\$25,110.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		\$10,450.00
3a	All loans received this reporting period.		
3b	Interest earned on campaign account this reporting period.		
3c	Total amount of investments sold this reporting period.		
3d	Total amount of cash dividends and interest paid out this reporting period.		
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.	\$100.00	\$2465.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		\$12,915.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		\$38,025.00

EXPENDITURES MADE

7	I have no expenditures to report. <input 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.		\$12,706.86
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		\$21,468.76
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	\$850.43	
11	Total expenditures reported this period. (Line 9 + 10)		\$22,319.16
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$35,026.02

INVESTMENTS

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

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)		\$2998.98
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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 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 DGD Marketing Last Name Address PO Box 5761 Address2 City Athens State Ga Zip 30604	Date 6/12/2022 <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 Employer	Mailers and Texting Services.	\$7629.00 ✓
First Name CV House LLC Last Name Address 550 Dearing Street Apt.29 Address2 City State Ga. Zip 30606	Date 6/13/2022 <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 Employer	Video Services	\$2250.00 ✓
First Name DGD Marketing Last Name Address PO Box 5761 Address2 City Athens State Ga. Zip 30604	Date 6/21/2022 <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 Employer	Consulting Services	\$2500.00 ✓

Page Total \$ \$12,379.00

* 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

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name DGD Marketing Last Name		Date Date	Occupation Occupation	Marketing Material	\$900.66 ✓
Address PO Box 5761 Address2 City Athens State Ga. Zip 30604					
First Name WXAG Last Name		Date 6/15/2022 and 5/04/2022	Occupation Occupation	Radio Ads.	\$1000.00 ✓
Address 855 Sunset Drive Suite 16 Address2 City Athens State Ga. Zip 30606					
First Name Joann Last Name Echols		Date 5/14/2022	Occupation Occupation	Reimbursement FOR CAR MAGNETS	\$395.87 ✓
Address 112 Wisteria Way Address2 City Athens State Ga. Zip 30606					
First Name International Grill and Bar Last Name		Date 5/24/2022	Occupation Occupation	CAMPAIGN/Event Party	\$1376.25 ✓
Address 1155 Mitchell Bridge Rd. Address2 City Athens State Ga. 30605 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 \$ \$3672.78

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 Quintaevious Last Name Clay Address 2901 Green Ln Unit 2932 Address2 City Athens State Ga Zip 30606	Date 6/21/2022 <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 Employer	Sign Holder	\$200.00
First Name Mikaya Last Name Cooler Address 112 Wisteria Way Address2 City Athens State Ga Zip 30606	Date 6/21/2022 <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 Employer	Sign Holder	\$113.00
First Name Social Sphere Media LLC Last Name Address 1116 Brookstone Estates Dr. Address2 City Loganville State Ga Zip 30052	Date 6/6/2022 <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	Occupation Employer	Social Media Ad Campaign	\$2500.00

Page Total \$ **2813.00**

* 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

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 Audrey Last Name Fisher Address 125 Melbourne Drive Address2 City Athens State Ga Zip 30606	Date 5/01/2022 <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" 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 Employer	Campagin Materials	\$428.17 ✓
First Name Audrey Last Name Fisher Address 125 Melbourne Drive Address2 City Athens State Ga. Zip 30606	Date 5/27/2022 <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" 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 Employer	T-Shirts for the Campagin	\$155.87 ✓
First Name Rashe's Cuisine Last Name Address 585 Vine Street, Suite 3 Address2 City Athens State Ga. Zip 30601	Date 5/23/2022 <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 Employer	Meet and Greet Garthering	\$516.40 ✓

Page Total \$ 1100.44

* 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 Joann	Last Name Echols	Date 6/13/2022	Occupation	Reimbursement for paying Sign Holders	\$525.00 ✓
Address 112 Wisteria Way					
Address2	City Athens	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" 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					
First Name Tyreon	Last Name Millsap	Date 6/21/2022	Occupation	Sign Holder	\$200.00 ✓
Address 135 Peachtree Lane					
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					
First Name Masi	Last Name Mack	Date 6/23/2022	Occupation	Sign Holder	\$188.00 ✓
Address 135 Peachtree Lane					
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.					
First Name Javaan	Last Name Mack	Date 6/23/2022	Occupation	Sign Holder	\$188.00 ✓
Address 135 Peachtree Lane					
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					

* 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 \$ 1101.00

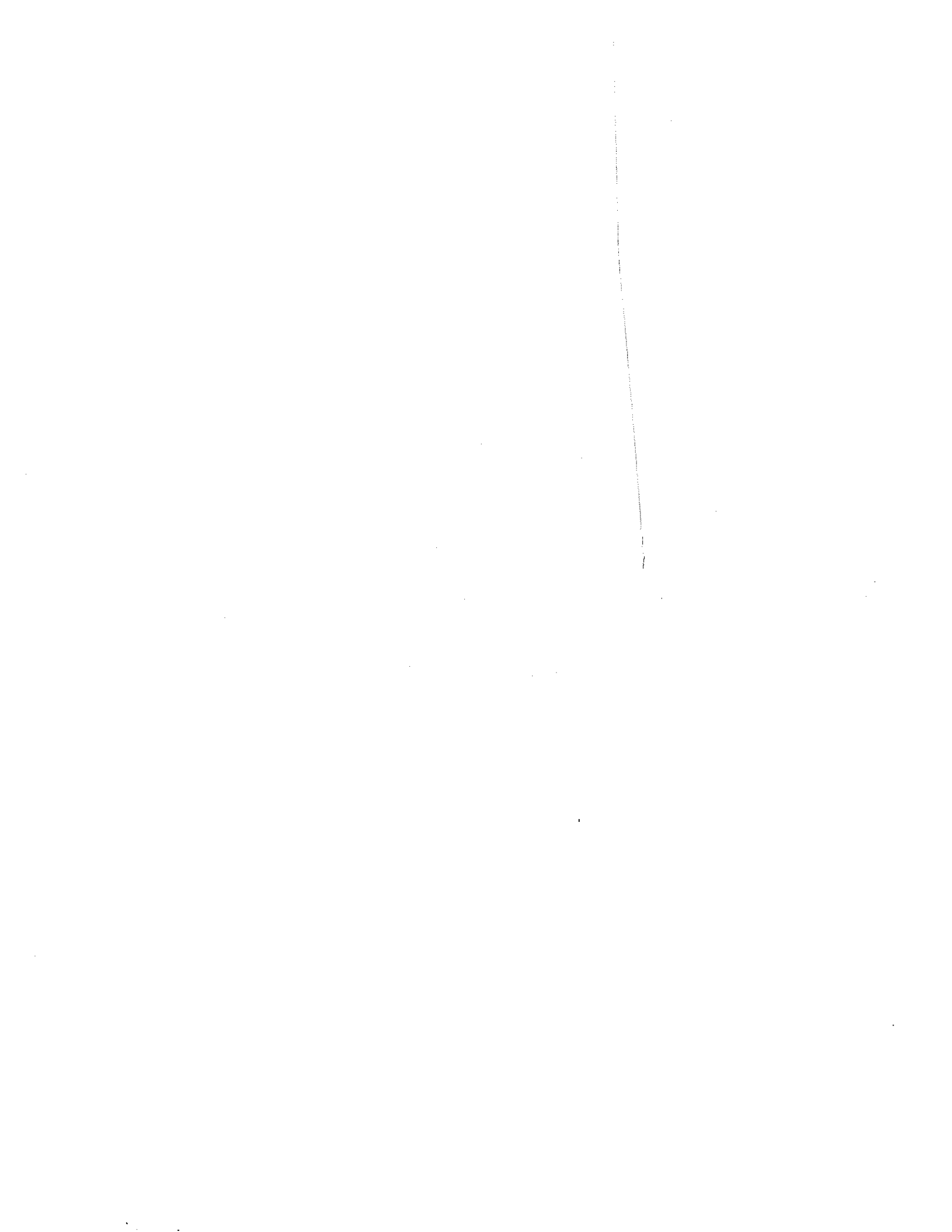
State of Georgia Cign Contribution Disclosure Report Itemized Expenditures

Must list expenditure 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 Department of Revenue Last Name Address 1800 Century Boulevard N Address2 City Atlanta State Ga Zip 30345	Date 2/25/2022 <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 Employer	Tax ID Number	\$279.00
First Name Joann Last Name Echols Address 112 Wisteria Way Address2 City Athens State Ga Zip 30606	Date 3/28/2022 <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" 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 Employer	Printing of Flyers	\$123.54
First Name Last Name Address Address2 City Loganville State Zip	Date <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	Occupation Employer		

Page Total \$ **402.54**

* 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 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	
<i>see Attached</i>	Received Date	Occupation & Employer			Estimated Value	
	Contribution Type*	Employer			Description	
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						
City	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Cash Amt.	Est. Value	
State						
Zip						
Aff. Comm.				Cash Amt.	Est. Value	
First Name or Business Name						
Last Name						
Address						
Address2						
City	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Cash Amt.	Est. Value	
State						
Zip						
Aff. Comm.				Cash Amt.	Est. Value	
First Name or Business Name						
Last Name						
Address						
Address2						
City	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Cash Amt.	Est. Value	
State						
Zip						
Aff. Comm.				Cash Amt.	Est. Value	
First Name or Business Name						
Last Name						
Address						
Address2						
City	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Cash Amt.	Est. Value	
State						
Zip						
Aff. Comm.				Cash Amt.	Est. Value	
First Name or Business Name						

Itemized Contributions Page Total \$ _____ \$ _____

Dexter Fisher Champaign Contributions

NAME	ADDRESS	OCCUPATION	EMPLOYER	CONTRIBUTIONS
Joseph Douglas	132 River Bottom Circle, Athens, Ga. 30606	Retired		\$250.00
Dr. James & Lynn Brown	1081 Riverside Drive, Watkinsville, Ga. 30677-6130	Physican & Educator	Private Practice	\$150.00
Jessica Bailey	995 Heards Fany Road, Atlanta, Ga. 30328	Retired		\$250.00
Daryl Bloodsaw	2342 Autumn Maple Drive, Braselton, Ga. 30517	Senior Pastor	Ebenezer Baptist Church, West	\$250.00
Jason Leonard	318 E. Washington Street, Athens, Ga. 30606	Business Owner		\$200.00
Dwight Perry	768 Harvesl Brook Drive, Lawrenceville, Ga. 30043	Business Consultant		\$200.00
Nancy Hart	150 Colonial Drive, Athens, Ga. 30606	Retired		\$200.00
Robert Locklin	910 James Huff Road, Monroe, Ga. 30656	Manager		\$200.00
Dexter Fisher	125 Melbourne Drive	Retired		\$300.00
Michael Buchholz	194 Holman Ave, Athens, Ga.	Retired		\$150.00
Wayne and Fran Dean	655 Kings Road, Athens, Ga	Retired		\$200.00
Kathy Hoard	248 Springdale Street, Athens, Ga.	Retired		\$250.00
Vincent Hamby	375 West Rutherford Street, Athens, Ga. 30606	Business Owner		\$200.00
Edward Gardner	1129 Oak Grove Road, Athens, Ga. 30607	CEO Work Force Development	Boys & Girls Club	\$300.00
Committee to Elect John Culppeper	575 Fortson Road, Athens, Ga.	Business Owner		\$1,000.00
Richard Boone	430 Riverbottom Road, Athens, Ga.	Retired		\$500.00
April Hughes	11605 Jefferson Rd., Athens, Ga.	Business Owner		\$1,500.00
Sieve Middlebrook	274 Moss Side Dr., Athens, Ga. 30607	Business Owner		\$1,000.00
Edwin Lowe	1130 Knob Creek Dr, Athens, Ga.	CPA		\$250.00
Walter Wilboughby	183 Ponderosa Drive, Athens, Ga.	Contractor		\$250.00
Robert Scott	1457 Ruth Jackson Rd. Bogart, Ga.	Business Owner		\$500.00
Alan Reddish	107 Indigo LN, Athens, Ga.	Retired		\$500.00
Georgia Association of Realtors	6085 Barfield Road, Atlanta, Ga.		Athens Area Association of Realtors	\$1,600.00
Bob Carson	560 Hill Street, Athens, Ga. 30605	Business Owner	Carson Advisory Group	\$250.00
			Total Contributions over \$100.00	\$10,450.00

