

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

<p>1. Report Type <small>(Select One)</small></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>Board of Education District 4</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: _____</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> <div style="border: 1px solid black; width: 100%; height: 30px; margin-top: 10px;"></div>
---	---	--

3. Identifying and Contact Information

(1) Alexis Williams (2) 05/06/2022
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) 2330 Scenic Highway, Suite 634 Snellville GA 30078
Mailing Address City State Zip Code

(4) _____ and/ or alexis@votealexiswilliams.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: Brittany Ellison | Melvin Everson
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"/> 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 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>*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></p>			

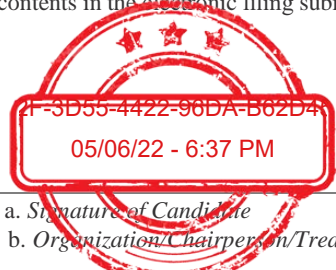
State of _____ County of _____

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 the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on _____, 20_____

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	\$0.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$446.03	\$11,700.00
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	\$4,425.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$446.03	\$16,125.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$446.03	\$16,125.00

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	\$0.00
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$446.03	\$8,687.31
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	\$77.69
11	Total expenditures reported this period. (Line 9 + 10)	\$446.03	\$8,765.00
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$446.03	\$8,765.00

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	\$7,360.00
----	--	--------	------------

* 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.

CFC-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.	\$0.00
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)	\$0.00
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	\$0.00
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)	\$0.00
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	\$0.00
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)	\$0.00

* 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 RUTH	Date 2022-02-24	Occupation COUNSELOR	<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 \$0.00
Last Name ASKEW	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer SELF EMPLOYED			
Address 5000 REDCLIFF COURT					
Address2					Description
City DUNWOODY					
State GA	Zip 30338				
Aff. Comm.					
First Name or Business Name RUTH	Date 2022-04-15	Occupation COUNSELOR		<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. \$50.00
Last Name ASKEW	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer SELF EMPLOYED			
Address 5000 REDCLIFF COURT					
Address2					Description
City DUNWOODY					
State GA	Zip 30338				
Aff. Comm.					
First Name or Business Name LAUREN	Date 2022-03-31	Occupation RETIRED	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		Cash Amt. \$300.00
Last Name BISCHOF	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer RETIRED			
Address 4055 BOLES CREEK DRIVE NW					
Address2					Description
City DULUTH					
State GA	Zip 30096				
Aff. Comm.					

Itemized Contributions Page Total \$ 450.00 \$ 0.00

CFC-CCDR 1/14

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
GREG		2022-03-18	REAL ESTATE BROKER			\$250.00
Last Name CANTRELL						
Address 285 S PERRY STREET						
Address2		<input checked="" type="checkbox"/> Monetary	Employer LIVING STONE PROPERTIES			Description
City LAWRENCEVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30046	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
A		2022-02-11	SOFTWARE DEV		\$300.00	\$0.00
Last Name CLARK						
Address 115 LITTLE RIDGE ROAD						
Address2		<input checked="" type="checkbox"/> Monetary	Employer HITACHI SOLUTIONS			Description
City BERKELEY LAKE		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
A		2022-03-12	SOFTWARE DEV		\$100.00	\$0.00
Last Name CLARK						
Address 115 LITTLE RIDGE ROAD						
Address2		<input checked="" type="checkbox"/> Monetary	Employer HITACHI SOLUTIONS			Description
City BERKELEY LAKE		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
A		2022-03-28	SOFTWARE DEV		\$1,000.00	\$0.00
Last Name CLARK						
Address 115 LITTLE RIDGE ROAD						
Address2		<input checked="" type="checkbox"/> Monetary	Employer HITACHI SOLUTIONS			Description
City BERKELEY LAKE		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total					\$ 1,650.00	\$ 0.00

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

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

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

CFC-CCDR 1/14

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
A		2022-04-12	SOFTWARE DEV			\$100.00
Last Name CLARK						
Address 115 LITTLE RIDGE ROAD						
Address2		<input checked="" type="checkbox"/> Monetary	Employer HITACHI SOLUTIONS	Description		
City BERKELEY LAKE		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name CONSERVATIVE REPUBLICAN WOMEN		2022-04-21	Occupation		\$500.00	\$0.00
Last Name						
Address 4918 DILLARDS MILL WAY						
Address2		<input checked="" type="checkbox"/> Monetary	Employer		Description	
City PEACHTREE CORNERS		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name KENNETH		2022-04-18	Occupation RETIRED		\$200.00	\$0.00
Last Name CRAFT, JR.						
Address 3935 RAEBURN ROAD						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED		Description	
City CUMMING		<input type="checkbox"/> In-Kind				
State GA	Zip 30028	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name MARGARET		2022-03-29	Occupation RETIRED		\$500.00	\$0.00
Last Name EMMELHAINZ						
Address 3660 HIGHCROFT CIRCLE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED		Description	
City PEACHTREE CORNERS		<input type="checkbox"/> In-Kind				
State GA	Zip 30092	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total					\$ 1,300.00	\$ 0.00

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

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

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

CFC-CCDR 1/14

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
CLAUDIA		2022-02-28	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	\$100.00
Last Name FRENCH						
Address 2731 KINGSTREAM WAY						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			Description
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30039	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
CLAUDIA		2022-04-14	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	\$100.00	\$0.00
Last Name FRENCH						
Address 2731 KINGSTREAM WAY						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			Description
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30039	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
DELOIS		2022-02-16	GLOBAL HEALTH CONSULTANT	<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	\$0.00
Last Name GREENWOOD						
Address 586 LAKESHORE DRIVE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer SELF EMPLOYED			Description
City BERKELEY LAKE		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
DELOIS		2022-03-12	GLOBAL HEALTH CONSULTANT	<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	\$25.00	\$0.00
Last Name GREENWOOD						
Address 586 LAKESHORE DRIVE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer SELF EMPLOYED			Description
City BERKELEY LAKE		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total \$					\$325.00	\$0.00

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

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

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

CFC-CCDR 1/14

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
WILLIAM		2022-03-24	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	\$150.00
Last Name HEANER						
Address 4320 DOVE POINT						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			
City BERKELEY LAKE		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Description						
KATHY		2022-03-09	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	\$100.00	\$0.00
Last Name HILDEBRAND						
Address 2113 WATERWAY LANE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30078	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Description						
KATHY		2022-03-23	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	\$100.00	\$0.00
Last Name HILDEBRAND						
Address 2113 WATERWAY LANE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30078	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Description						
JOHN		2022-04-17	SOFTWARE ENGINEER	<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	\$250.00	\$0.00
Last Name HIMMELEIN						
Address 2937 OAK MEADOW LANE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer BROADCOM			
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30078	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Description						
Itemized Contributions Page Total					\$ 600.00	\$ 0.00

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

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

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

CFC-CCDR 1/14

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
ALEXIS		2022-02-16	BUSINESS OWNER		<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	\$1,000.00
Last Name HUNTER WILLIAMS						
Address 3090 GOLFE LINKS DRIVE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer SELF EMPLOYED			
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30039	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
ALEXIS		2022-03-11	BUSINESS OWNER	<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	\$0.00	\$300.00
Last Name HUNTER WILLIAMS						
Address 3090 GOLFE LINKS DRIVE						
Address2		<input type="checkbox"/> Monetary	Employer SELF EMPLOYED			
City SNELLVILLE		<input checked="" type="checkbox"/> In-Kind				
State GA	Zip 30039	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
ALEXIS		2022-04-30	BUSINESS OWNER	<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	\$0.00	\$146.03
Last Name HUNTER WILLIAMS						
Address 3090 GOLFE LINKS DRIVE						
Address2		<input type="checkbox"/> Monetary	Employer SELF EMPLOYED			
City SNELLVILLE		<input checked="" type="checkbox"/> In-Kind				
State GA	Zip 30039	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
CAMILLA		2022-04-15	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	\$250.00	\$0.00
Last Name HUNTER						
Address 805 SUTHERLAND ARCH						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			
City CHEAPEAKE		<input type="checkbox"/> In-Kind				
State VA	Zip 23320	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total					\$ 1,250.00	\$ 446.03

* 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

CFC-CCDR 1/14

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
LANCE		2022-03-21	ADVISOR			\$350.00
Last Name LAYSON						
Address 2081 HAVENVIEW COURT						
Address2		<input checked="" type="checkbox"/> Monetary	Employer SELF EMPLOYED			Description
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30078	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
CATHERINE		2022-02-11	RETIRED		\$200.00	\$0.00
Last Name LOEW						
Address 4124 TREADDUR BAY LANE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			Description
City PEACHTREE CORNERS		<input type="checkbox"/> In-Kind				
State GA	Zip 30092	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
CATHERINE		2022-03-12	RETIRED		\$150.00	\$0.00
Last Name LOEW						
Address 4124 TREADDUR BAY LANE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			Description
City PEACHTREE CORNERS		<input type="checkbox"/> In-Kind				
State GA	Zip 30092	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
CATHERINE		2022-03-21	RETIRED		\$500.00	\$0.00
Last Name LOEW						
Address 4124 TREADDUR BAY LANE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			Description
City PEACHTREE CORNERS		<input type="checkbox"/> In-Kind				
State GA	Zip 30092	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total					\$ 1,200.00	\$ 0.00

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

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

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

CFC-CCDR 1/14

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
WENDY		2022-02-27	MANAGER		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$500.00
Last Name LYNCH						
Address 5475 WEDGEWOOD COURT						
Address2		<input checked="" type="checkbox"/> Monetary	Employer AT&T			
City LILBURN		<input type="checkbox"/> In-Kind				
State GA	Zip 30047	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Description						
WENDY		2022-03-03	MANAGER	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$1,000.00	\$0.00
Last Name LYNCH						
Address 5475 WEDGEWOOD COURT						
Address2		<input checked="" type="checkbox"/> Monetary	Employer AT&T			
City LILBURN		<input type="checkbox"/> In-Kind				
State GA	Zip 30047	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Description						
PHILANA		2022-02-11	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	\$50.00	\$0.00
Last Name NOWAK						
Address 1787 BONNETT POINT LANE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer HOMEMAKER			
City HOSCHTON		<input type="checkbox"/> In-Kind				
State GA	Zip 30548	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Description						
PHILANA		2022-03-15	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	\$75.00	\$0.00
Last Name NOWAK						
Address 1787 BONNETT POINT LANE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer HOMEMAKER			
City HOSCHTON		<input type="checkbox"/> In-Kind				
State GA	Zip 30548	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Description						
Itemized Contributions Page Total					\$ 1,625.00	\$ 0.00

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

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

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

CFC-CCDR 1/14

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
MICHAEL		2022-03-29	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	\$500.00
Last Name PETRIK						
Address 4134 TREADDUR BAY LN						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			Description
City PEACHTREE CORNERS		<input type="checkbox"/> In-Kind				
State GA	Zip 30092	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
LIDIA		2022-04-06	TEACHER	<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	\$500.00	\$0.00
Last Name POPOVICI						
Address 3946 PENINSULA COURT						
Address2		<input checked="" type="checkbox"/> Monetary	Employer GCPS			Description
City LAWRENCEVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30044	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
STEPHANIE		2022-02-11	OWNER	<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	\$250.00	\$0.00
Last Name RUSCH						
Address 1350 KILDARE COURT SW						
Address2		<input checked="" type="checkbox"/> Monetary	Employer SALON JOHN FRANCIS			Description
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30039	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
STEPHANIE		2022-03-15	OWNER	<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	\$500.00	\$0.00
Last Name RUSCH						
Address 1350 KILDARE COURT SW						
Address2		<input checked="" type="checkbox"/> Monetary	Employer SALON JOHN FRANCIS			Description
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30039	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total \$					\$1,750.00	\$0.00

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

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

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

CFC-CCDR 1/14

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
STEPHANIE		2022-04-12	OWNER			\$100.00
Last Name RUSCH						
Address 1350 KILDARE COURT SW						
Address2		<input checked="" type="checkbox"/> Monetary	Employer SALON JOHN FRANCIS			
City SNELLVILLE		<input type="checkbox"/> In-Kind				
State GA	Zip 30039	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
PHIL		2022-04-15	CITY COUNCIL PEACHTREE CORNERS, GA		\$250.00	\$0.00
Last Name SADD						
Address 6848 LOCKRIDGE DRIVE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer COUNTY GOVERNMENT			
City PEACHTREE CORNERS		<input type="checkbox"/> In-Kind				
State GA	Zip 30360	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
LEE ANN		2022-02-14	RETIRED		\$100.00	\$0.00
Last Name SENNE						
Address 514 LAKESHORE DRIVE NW						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			
City DULUTH		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
LEE ANN		2022-04-01	RETIRED		\$50.00	\$0.00
Last Name SENNE						
Address 514 LAKESHORE DRIVE NW						
Address2		<input checked="" type="checkbox"/> Monetary	Employer RETIRED			
City DULUTH		<input type="checkbox"/> In-Kind				
State GA	Zip 30096	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Itemized Contributions Page Total					\$ 500.00	\$ 0.00

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

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

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

CFC-CCDR 1/14

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
PEGGY		2022-04-25	RE BROKER		<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	\$500.00
Last Name SLAPPEY						
Address 2160 MORNINGSIDE DRIVE						
Address2 STE 250		<input checked="" type="checkbox"/> Monetary	Employer PEGGY SLAPPEY PROPERTIES, INC			Description
City BUFORD		<input type="checkbox"/> In-Kind				
State GA	Zip 30518	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
DINA		2022-03-22	OWNER	<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	\$400.00	\$0.00
Last Name SNYDER						
Address 5831 DEER CROSSING DRIVE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer TRANSITIONAL WORK SOLUTIONS			Description
City SUGAR HILL		<input type="checkbox"/> In-Kind				
State GA	Zip 30518	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
CHRISTINE		2022-03-02	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	\$0.00
Last Name TASKER						
Address 5314 SILVER CREEK DRIVE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer HOMEMAKER			Description
City LILBURN		<input type="checkbox"/> In-Kind				
State GA	Zip 30047	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
CHRISTINE		2022-03-30	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	\$50.00	\$0.00
Last Name TASKER						
Address 5314 SILVER CREEK DRIVE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer HOMEMAKER			Description
City LILBURN		<input type="checkbox"/> In-Kind				
State GA	Zip 30047	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total					\$ 1,050.00	\$ 0.00

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

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

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

CFC-CCDR 1/14

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. \$0.00	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 Zip		State Zip	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2. \$0.00	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 Zip		State Zip	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total \$ 0.00	

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

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

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

CFC-CCDR1/14

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 ANEDOT Last Name Address 1340 POYDRAS STREET Address2 SUITE 1770 City NEW ORLEANS State LA Zip 70112	Date 2022-02-14 <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	MERCHANT PROCESSING FEE	\$44.00
First Name ANEDOT Last Name Address 1340 POYDRAS STREET Address2 SUITE 1770 City NEW ORLEANS State LA Zip 70112	Date 2022-02-21 <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	MERCHANT PROCESSING FEE	\$6.60
First Name ANEDOT Last Name Address 1340 POYDRAS STREET Address2 SUITE 1770 City NEW ORLEANS State LA Zip 70112	Date 2022-02-28 <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	MERCHANT PROCESSING FEE	\$23.70

Page Total \$ 74.30

* 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 ANEDOT		Date 2022-03-07	Occupation	MERCHANT PROCESSING FEE	\$78.60
Last Name					
Address 1340 POYDRAS STREET		<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		
Address2 SUITE 1770					
City NEW ORLEANS					
State LA	Zip 70112				
First Name ANEDOT		Date 2022-03-14	Occupation	MERCHANT PROCESSING FEE	\$41.50
Last Name					
Address 1340 POYDRAS STREET		<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		
Address2 SUITE 1770					
City NEW ORLEANS					
State LA	Zip 70112				
First Name ANEDOT		Date 2022-03-21	Occupation	MERCHANT PROCESSING FEE	\$36.30
Last Name					
Address 1340 POYDRAS STREET		<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		
Address2 SUITE 1770					
City NEW ORLEANS					
State LA	Zip 70112				
First Name ANEDOT		Date 2022-03-28	Occupation	MERCHANT PROCESSING FEE	\$60.50
Last Name					
Address 1340 POYDRAS STREET		<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		
Address2 SUITE 1770					
City NEW ORLEANS					
State LA	Zip 70112				

* 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 \$ 216.90**

CFC-CCDR 1/14

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name ANEDOT		Date 2022-04-04	Occupation	MERCHANT PROCESSING FEE	\$99.40
Last Name					
Address 1340 POYDRAS STREET		<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		
Address2 SUITE 1770					
City NEW ORLEANS					
State LA	Zip 70112				
First Name ANEDOT		Date 2022-04-11	Occupation	MERCHANT PROCESSING FEE	\$22.90
Last Name					
Address 1340 POYDRAS STREET		<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		
Address2 SUITE 1770					
City NEW ORLEANS					
State LA	Zip 70112				
First Name ANEDOT		Date 2022-04-18	Occupation	MERCHANT PROCESSING FEE	\$32.10
Last Name					
Address 1340 POYDRAS STREET		<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		
Address2 SUITE 1770					
City NEW ORLEANS					
State LA	Zip 70112				
First Name ANEDOT		Date 2022-04-25	Occupation	MERCHANT PROCESSING FEE	\$11.50
Last Name					
Address 1340 POYDRAS STREET		<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		
Address2 SUITE 1770					
City NEW ORLEANS					
State LA	Zip 70112				

* 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 \$ \$165.90**

CFC-CCDR 1/14

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name GWINETT COUNTY GOVERNMENT		Date 2022-03-07	Occupation	QUALIFYING FEE	\$494.24
Last Name					
Address 75 LANGLEY DRIVE		<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		
Address2					
City LAWRENCEVILLE					
State GA	Zip 30046				
First Name ALEXIS		Date 2022-04-30	Occupation BUSINESS OWNER	IN KIND: USE OF OFFICE RENTAL	\$146.03
Last Name HUNTER WILLIAMS					
Address 3090 GOLFE LINKS DRIVE		<input type="checkbox"/> Expenditure <input checked="" 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 SELF EMPLOYED		
Address2					
City SNELLVILLE					
State GA	Zip 30039				
First Name PEACH STATE APPROACH		Date 2022-02-25	Occupation	GENERAL CONSULTING	\$1,500.00
Last Name					
Address 3332 DEVAUGHN DRIVE		<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		
Address2					
City MARIETTA					
State GA	Zip 30066				
First Name PRINTING TRADE COMPANY		Date 2022-04-05	Occupation	CAMPAIGN SIGNS, STICKERS AND PUSHCARDS	\$3,784.20
Last Name					
Address 2790 SIMPSON CIRCLE		<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		
Address2					
City NORCROSS					
State GA	Zip 30071				

* 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 \$ 5,924.47**

CFC-CCDR 1/14

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid	
First Name RTA STRATEGY LLC	Last Name	Date 2022-04-05	Occupation	CAMPAIGN FINANCE CONSULTING, TREASURY AND DISCLOSURE REPORTING	\$1,900.00	
Address PO BOX 1483						
Address2	City ROSWELL	<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 30077
Address PO BOX 166						
First Name THE SNELLVILLE AMERICA LEGION	Last Name	Date 2022-03-11	Occupation	IN KIND: USE OF COMMUNITY SPONSORSHIP	\$300.00	
Address PO BOX 166						
Address2	City SNELLVILLE	<input type="checkbox"/> Expenditure <input checked="" 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 30078
Address 9371 IRVINE BLVD						
First Name VAIL DUNLAP & ASSOCIATES	Last Name	Date 2022-04-05	Occupation	MAGNETS	\$223.12	
Address 9371 IRVINE BLVD						
Address2 #100	City IRVINE	<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 CA						Zip 92618
Address 9371 IRVINE BLVD						
First Name VAIL DUNLAP & ASSOCIATES	Last Name	Date 2022-04-15	Occupation	MAGNETS	\$173.79	
Address 9371 IRVINE BLVD						
Address2 #100	City IRVINE	<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 CA						Zip 92618
Address 9371 IRVINE BLVD						

* 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 \$ 2,596.91**

CFC-CCDR 1/14

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name VAIL DUNLAP & ASSOCIATES		Date 2022-04-29	Occupation	MAGNETS	\$154.86
Last Name			Employer		
Address 9371 IRVINE BLVD		<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	
Address2 #100					
City IRVINE					
State CA	Zip 92618				
First Name		Date	Occupation		\$0.00
Last Name			Employer		
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	
Address2					
City					
State	Zip				
First Name		Date	Occupation		\$0.00
Last Name			Employer		
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	
Address2					
City					
State	Zip				
First Name		Date	Occupation		\$0.00
Last Name			Employer		
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	
Address2					
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 \$ 154.86**

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 \$ \$0.00
	Value at end of reporting period \$ \$0.00
	Difference in value \$ \$0.00
	Interest Paid Out \$ \$0.00
	Cash Dividends \$ \$0.00

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
		\$0.00	\$0.00	\$0.00	\$0.00

2. Investment Name	Account #
Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$ \$0.00
	Value at end of reporting period \$ \$0.00
	Difference in value \$ \$0.00
	Interest Paid Out \$ \$0.00
	Cash Dividends \$ \$0.00

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
		\$0.00	\$0.00	\$0.00	\$0.00

<u>Total value of investments at beginning of reporting period \$</u> <u>Total value of investments at end of reporting period \$</u> <u>Total difference in value \$</u>	Page Total Cash Dividends: \$ <u>0.00</u> Page Total Interest Paid Out: \$ <u>0.00</u> Page Total Profit: \$ <u>0.00</u> Page Total Loss: \$ <u>0.00</u>
---	---

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.