

**Georgia Government Transparency & Campaign Finance Commission
DECLARATION OF INTENTION TO ACCEPT CAMPAIGN CONTRIBUTIONS
FORM DOI**

INCOMPLETE FORMS WILL NOT BE PROCESSED - If form is handwritten, it must be legible.

1	Today's Date:
2	Candidate (full name): <u>Sadiyah Abdullah</u> Address: <u>7646 River Crest Dr</u> City, State, Zip: <u>Columbus, GA. 31904</u> Telephone (optional): <u>803.587.5465</u> Email: <u>abdulls1211@gmail.com</u>
3	Select Office Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> County <input type="checkbox"/> Municipal Name of Office Sought or Held: <u>District 2 School Board</u> <small>(include district, post, or judicial circuit if applicable)</small>
4	Incumbent: <u>Nickie Tillery</u> Next Election Year: <u>2022</u>

Complete sections 5 and 6 ONLY if you have a campaign committee.
This information does not register a campaign committee. (Please use Form RC to register.)

5	Campaign Committee Chairperson (full name): _____ Address: _____ City, State, Zip: _____ Email: _____
6	Treasurer (full name): _____ Address: _____ City, State, Zip: _____ Email: _____

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.


 Signature of Candidate

3-7-2022
 Date