

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>Cobb County Board of Education, Post 5</u> <small>(Include county, municipality, district, post or judicial circuit)</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: 20px; margin: 0 auto;"></div>
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3. Identifying and Contact Information

(1) Laura Judge (2) 02/04/2024
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) 1395 E Cobb Drive #72041 Marietta GA 30068
Mailing Address City State Zip Code

(4) _____ and/ or electlaurajudge@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: _____ | _____
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 checked="" type="checkbox"/> January 31, <u>2024</u> (year) <input type="checkbox"/> April 30, _____(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>			

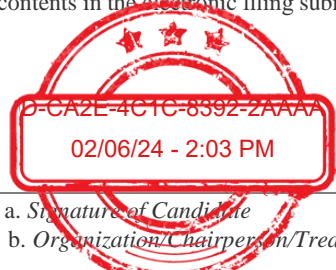
State of _____ County of _____

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	\$15,600.39
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$2,243.00
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	\$520.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$0.00	\$2,763.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$0.00	\$18,363.39

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	\$13,578.86
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$2,169.27
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	\$0.00
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$2,169.27
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$15,748.13

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	\$2,615.26
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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.

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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 Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name Steph Last Name Elenbaum Address 703 Lanyard Drive Address2 City Newport State NC Zip 28570 Aff. Comm.	Date 2024-01-05 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Physician Employer US Navy	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00 Description
First Name or Business Name Patricia Last Name Prince Address 2904 Woodhollow trail Address2 City Edmond State OK Zip 73012 Aff. Comm.	Date 2024-01-05 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation HR Employer Ascent Resources Management	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00 Description
First Name or Business Name Mark Last Name Pinsky Address 1568 E Bank Dr Address2 City Marietta State GA Zip 30068 Aff. Comm.	Date 2024-01-11 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Sales Manager Employer RNDC	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00 Description

Itemized Contributions Page Total \$ 300.00 \$ 0.00

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First Name or Business Name		Date	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Alfred		2024-01-16	Not Employed		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$100.00
Last Name Sharpless						
Address 2002 Candelar Dr						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Not Employed			
City High Point		<input type="checkbox"/> In-Kind				
State NC	Zip 27265	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name Seleana		Date 2024-01-31	Occupation Senior Director	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$300.00	Est. Value \$0.00
Last Name Wright						
Address 14540 Idlebrook Ct						
Address2		<input checked="" type="checkbox"/> Monetary	Employer APCO			
City Manassas		<input type="checkbox"/> In-Kind				
State VA	Zip 20112	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name Heather		Date 2024-01-31	Occupation attorney	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Peck						
Address 4611 Chattahoochee Xing						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Inspire Brands			
City Marietta		<input type="checkbox"/> In-Kind				
State GA	Zip 30067	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name Dana		Date 2024-01-31	Occupation Program Director	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Schneider						
Address 1950 Grand Lake Court						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Emory			
City Alpharetta		<input type="checkbox"/> In-Kind				
State GA	Zip 30004	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Itemized Contributions Page Total					\$ 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

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First Name or Business Name		Date	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Donald		2024-01-30	Chair			\$100.00
Last Name Yohn						
Address 1811 Winchester Dr						
Address2		<input checked="" type="checkbox"/> Monetary	Employer NterOne			Description
City Prosper		<input type="checkbox"/> In-Kind				
State TX	Zip 75078	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name Jaha		2024-01-30	Occupation Dentist	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Howard						
Address 4300 Paces Ferry Rd						
Address2 Suite 405		<input checked="" type="checkbox"/> Monetary	Employer Self			Description
City Atlanta		<input type="checkbox"/> In-Kind				
State GA	Zip 30339	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name Matt		2024-01-30	Occupation Not Employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Crisp						
Address 345 Anders Path						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Not Employed			Description
City Marietta		<input type="checkbox"/> In-Kind				
State GA	Zip 30064	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name Pascal		2024-01-29	Occupation Pilot Trainee	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Gonzalez						
Address 570 Appalachian Trail South						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Airline			Description
City Jacksonville		<input type="checkbox"/> In-Kind				
State NC	Zip 28546	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total					\$ 950.00	\$ 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

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First Name or Business Name		Date	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Tracy		2024-01-05	Not Employed		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$5.00
Last Name O'Connor						
Address 3438 Weymouth Court						
Address2		<input checked="" type="checkbox"/> Monetary	Employer None			
City Memphis		<input type="checkbox"/> In-Kind				
State GA	Zip 30062	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Jolinda		2024-01-06	Not Employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$25.00	\$0.00
Last Name Vishio						
Address 1366 Riverside Rd						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Not Employed			
City Roswell		<input type="checkbox"/> In-Kind				
State GA	Zip 30076	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Erendira		2024-01-10	Software Consultant	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$20.00	\$0.00
Last Name Brumley						
Address 1070 Martin Ridge Road						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Daugherty			
City Roswell		<input type="checkbox"/> In-Kind				
State GA	Zip 30076	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Kristin		2024-01-12	Business Analyst	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$10.00	\$0.00
Last Name Fournier						
Address 1237 independence way						
Address2		<input checked="" type="checkbox"/> Monetary	Employer BIM Networks			
City Marietta		<input type="checkbox"/> In-Kind				
State GA	Zip 30062	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Itemized Contributions Page Total					\$ 60.00	\$ 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

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First Name or Business Name		Date	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Andrew		2024-01-13	Copy Editor		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$25.00
Last Name Meyers						
Address 271 Cross Gate Dr.						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Self			
City Marietta		<input type="checkbox"/> In-Kind				
State GA	Zip 30068	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Chelsea		2024-01-13	HR	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$15.00	\$0.00
Last Name Clements						
Address 165 Roswell farms lane						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Gray			
City Roswell		<input type="checkbox"/> In-Kind				
State GA	Zip 30075	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Hannah		2024-01-20	Preschool Director	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$18.00	\$0.00
Last Name Williams						
Address 2684 Hidden Springs Ct.						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Seeds of Wonder			
City Marietta		<input type="checkbox"/> In-Kind				
State GA	Zip 30062	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Theresa		2024-01-30	Teacher	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	\$25.00	\$0.00
Last Name Levy						
Address 2241 Snug Harbor NE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Cobb			
City Marietta		<input type="checkbox"/> In-Kind				
State GA	Zip 30066	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				Description
Itemized Contributions Page Total					\$ 83.00	\$ 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

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First Name or Business Name Allison		Date 2024-01-28	Occupation Not Employed	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Feldman						
Address 500 Wilscot Lane						
Address2		<input checked="" type="checkbox"/> Monetary	Employer Not Employed			Description
City Marietta		<input type="checkbox"/> In-Kind				
State GA	Zip 30068	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name Sharman		Date 2024-01-29	Occupation Historian	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Southall						
Address 1665 Ellenwood Drive						
Address2		<input checked="" type="checkbox"/> Monetary	Employer GDOT			Description
City Roswell		<input type="checkbox"/> In-Kind				
State GA	Zip 30075	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$0.00	Est. Value \$0.00
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$0.00	Est. Value \$0.00
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				

Itemized Contributions Page Total \$ 100.00 \$ 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

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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 Daniel Last Name Coley Address 2100 Shiloh Valley Dr NW Address2 1002 City Kennesaw State GA Zip 30144	Date 2024-01-02 <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	\$800.00
First Name Mailchimp Last Name Address 675 Ponce De Leon Avenue, Northeast Address2 Suite 5000 City Atlanta State GA Zip 30308	Date 2024-01-05 <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	Email	\$24.50
First Name Publix Last Name Address 4269 Roswell Rd Address2 Suite 108 City Marietta State GA Zip 30062	Date 2024-01-22 <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	Event Material	\$11.69

Page Total \$ 836.19

* 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

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Mailchimp		Date 2024-01-25	Occupation	email	\$26.50
Last Name			Employer		
Address 675 Ponce De Leon Avenue, Northeast					
Address2 Suite 5000		<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		
City Atlanta					
State GA	Zip 30308				
First Name Katie		Date 2024-01-26	Occupation	Consulting	\$1,200.00
Last Name Winston			Employer		
Address 1704 Oak Haven Dr					
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	Employer		
City Marietta					
State GA	Zip 30008				
First Name Facebook		Date 2024-01-31	Occupation	Ads	\$15.00
Last Name			Employer		
Address 1 Hacker Way					
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	Employer		
City Menlo Park					
State CA	Zip 94025				
First Name Georgia Secretary of State Office		Date 2024-01-10	Occupation	Annual Registration	\$50.00
Last Name			Employer		
Address 204 State Capitol					
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	Employer		
City Atlanta					
State GA	Zip 30334				

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)Public Officer/Candidate/Other Than Candidate Committee Name **Page Total \$** \$1,291.50

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Actblue		Date 2024-01-31	Occupation	fees	\$41.58
Last Name			Employer		
Address 366 Summer 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					
City Somerville					
State MA	Zip 02144				
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 \$ 41.58**

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>
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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.