

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>Atlanta Bd of Education Member District 2</u> <small>(Include county, municipality, district, post or judicial seat)</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; height: 20px; width: 100%;"></div> |
|---|--|--|

3. Identifying and Contact Information

(1) Stephen Owens (2) 10/13/2025
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) 723 Peeples Street, SW Atlanta GA 30310
Mailing Address City State Zip Code

(4) (404) 751-6592 and/ or step.owens@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"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year) | <input type="checkbox"/> January 31, _____ (year) <input type="checkbox"/> April 30, _____ (year) <input type="checkbox"/> June 30, _____ (year) <input checked="" type="checkbox"/> September 30, 2025 _____ (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> | | | |

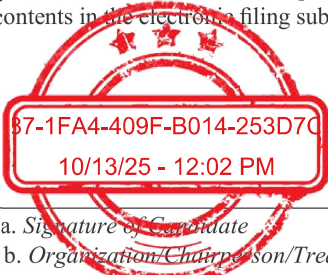
State of _____ County of _____

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 | \$9,721.00 |
| 3 | Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page. | \$0.00 | \$3,885.00 |
| 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 | \$0.00 |
| 5 | Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4) | \$0.00 | \$3,885.00 |
| 6 | Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5) | \$0.00 | \$13,606.00 |

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 | \$1,381.20 |
| 9 | Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page. | \$0.00 | \$5,260.58 |
| 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 | \$5,260.58 |
| 12 | Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11) | \$0.00 | \$6,641.78 |

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 | \$6,964.22 |
|----|--|--------|------------|

* 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 Jacob | Date 2025-07-26 | 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. \$25.00 | Est. Value \$0.00 |
| Last Name Shepherd | | | | | |
| Address 126 Greenville St | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer | | | Description |
| City Newnan | | | | | |
| State GA | Zip 30263 | | | | |
| Aff. Comm. | | | | | |
| | | | | | |
| First Name or Business Name Aimee | Date 2025-07-31 | 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. \$25.00 | Est. Value \$0.00 |
| Last Name Hodges | | | | | |
| Address 15129 2800 Road | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer | | | Description |
| City Hotchkiss | | | | | |
| State GA | Zip 81419 | | | | |
| Aff. Comm. | | | | | |
| | | | | | |
| First Name or Business Name Caitlin | Date 2025-07-20 | 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. \$10.00 | Est. Value \$0.00 |
| Last Name Highland | | | | | |
| Address 1157 White Oak Ave SW | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | Employer | | | Description |
| City Atlanta | | | | | |
| State GA | Zip 30310 | | | | |
| Aff. Comm. | | | | | |
| | | | | | |

Itemized Contributions Page Total \$ 60.00 \$ 0.00

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| First Name or Business Name | | Date | Occupation | | Cash Amt. | Est. Value |
|-----------------------------------|-------|--|------------|---|-----------|------------|
| Phillip | | 2025-07-04 | | <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 | | | | | | |
| Grant | | | | | | |
| Address | | | | | | |
| 147 Annes Court | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City | | <input type="checkbox"/> In-Kind | | | | |
| Athens | | <input type="checkbox"/> Common Source | | | | |
| State | Zip | <input type="checkbox"/> Credit Received on Loan | | | | |
| GA | 30606 | | | | | |
| Aff. Comm. | | | | | | |
| Terrence | | 2025-07-07 | | <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 | \$0.00 |
| Last Name | | | | | | |
| Wilson | | | | | | |
| Address | | | | | | |
| 241 South Chattahoochee Drive | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City | | <input type="checkbox"/> In-Kind | | | | |
| Hogansville | | <input type="checkbox"/> Common Source | | | | |
| State | Zip | <input type="checkbox"/> Credit Received on Loan | | | | |
| GA | 30230 | | | | | |
| Aff. Comm. | | | | | | |
| Mason | | 2025-07-09 | | <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 | | | | | | |
| Goodwin | | | | | | |
| Address | | | | | | |
| 1181 Bouldercrest Drive | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City | | <input type="checkbox"/> In-Kind | | | | |
| Atlanta | | <input type="checkbox"/> Common Source | | | | |
| State | Zip | <input type="checkbox"/> Credit Received on Loan | | | | |
| GA | 30316 | | | | | |
| Aff. Comm. | | | | | | |
| Jennifer | | 2025-07-09 | | <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 | | | | | | |
| Owens | | | | | | |
| Address | | | | | | |
| 2986 Jefferson Street | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City | | <input type="checkbox"/> In-Kind | | | | |
| Atlanta | | <input type="checkbox"/> Common Source | | | | |
| State | Zip | <input type="checkbox"/> Credit Received on Loan | | | | |
| GA | 30341 | | | | | |
| Aff. Comm. | | | | | | |
| Itemized Contributions Page Total | | | | | \$ 375.00 | \$ 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 |
|-----------------------------------|--------------|--|------------|---|------------|-------------|
| Ife | | 2025-07-09 | | | | \$150.00 |
| Last Name Floyd | | | | | | |
| Address 1312 Lochland Ct SE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30316 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Erin | | 2025-07-09 | | | \$100.00 | \$0.00 |
| Last Name Robinson | | | | | | |
| Address 3998 Carlinswood Way | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Stone Mountain | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30083 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Lindsay | | 2025-07-09 | | | \$100.00 | \$0.00 |
| Last Name Garland | | | | | | |
| Address 1687 Carr Cir NW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30318 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Patricia | | 2025-07-11 | | | \$5.00 | \$0.00 |
| Last Name Russell | | | | | | |
| Address 3016 Avondale Avenue | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Knoxville | | <input type="checkbox"/> In-Kind | | | | |
| State TN | Zip 37917 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Itemized Contributions Page Total | | | | | \$ 3355.00 | \$ 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 | | Cash Amt. | Est. Value |
|-----------------------------------|--------------|--|------------|---|-----------|-------------|
| Dominique | | 2025-07-12 | | <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 Sims | | | | | | |
| Address 166 Carter Ave SE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30317 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Jessica | | 2025-07-15 | | <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 Hood | | | | | | |
| Address 103 E Hill St | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Decatur | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30030 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Alex | | 2025-07-16 | | <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 Camardelle | | | | | | |
| Address 1849 Warren Way | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30344 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Caitlin | | 2025-08-20 | | <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 | \$10.00 | \$0.00 |
| Last Name Highland | | | | | | |
| Address 1157 White Oak Ave SW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30310 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Itemized Contributions Page Total | | | | | \$ 460.00 | \$ 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 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 |
|-----------------------------------|--------------|--|------------|---|-----------|-------------|
| Jacob | | 2025-08-26 | | | | \$25.00 |
| Last Name Shepherd | | | | | | |
| Address 126 Greenville St | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Newnan | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30263 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Aimee | | 2025-08-31 | | | \$25.00 | \$0.00 |
| Last Name Hodges | | | | | | |
| Address 15129 2800 Road | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Hotchkiss | | <input type="checkbox"/> In-Kind | | | | |
| State CO | Zip 81419 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Neva | | 2025-08-13 | | | \$50.00 | \$0.00 |
| Last Name Butkis | | | | | | |
| Address 671 N Allyson Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Baton Rouge | | <input type="checkbox"/> In-Kind | | | | |
| State LA | Zip 70815 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Karen | | 2025-08-13 | | | \$100.00 | \$0.00 |
| Last Name Harrington | | | | | | |
| Address 318 Gibson St SE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30316 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Itemized Contributions Page Total | | | | | \$ 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 |
|--|--------------|--|------------|---|-----------|-------------|
| Allison | | 2025-08-16 | | | | \$250.00 |
| Last Name Knowles | | | | | | |
| Address 431 Harold Ave NE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30307 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Ryan | | 2025-08-18 | | | \$500.00 | \$0.00 |
| Last Name Nikitin | | | | | | |
| Address 842 Oakhill Ave SW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30310 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Elizabeth | | 2025-08-18 | | | \$50.00 | \$0.00 |
| Last Name Bogue Simpson | | | | | | |
| Address 112 Scott St NW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30314 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Caitlin | | 2025-08-18 | | | \$100.00 | \$0.00 |
| Last Name Cornwell | | | | | | |
| Address 536 Peoples St. SW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30310 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Itemized Contributions Page Total | | | | | \$ 900.00 | \$ 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 |
|-----------------------------------|--------------|--|------------|---|-----------|-------------|
| Krista | | 2025-08-18 | | | | \$50.00 |
| Last Name Verdelotti | | | | | | |
| Address 680 Lawton St SW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30310 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Lexi | | 2025-08-20 | | | \$25.00 | \$0.00 |
| Last Name Awotwi | | | | | | |
| Address 1575 Beecher St SW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30310 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Charisse | | 2025-08-23 | | | \$100.00 | \$0.00 |
| Last Name Davis | | | | | | |
| Address 2321 Honeysuckle Lane | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Smyrna | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30080 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Monica | | 2025-08-25 | | | \$50.00 | \$0.00 |
| Last Name Biggs | | | | | | |
| Address 964 Beecher St SW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30310 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Itemized Contributions Page Total | | | | | \$ 225.00 | \$ 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 | | Cash Amt. | Est. Value |
|-----------------------------------|--------------|--|------------|---|-----------|-------------|
| Mary | | 2025-08-25 | | <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 Baron | | | | | | |
| Address 3837 Enclave Way | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Tucker | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30084 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Adam | | 2025-08-26 | | <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 Martin | | | | | | |
| Address 1193 Foster Pl NW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30318 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Shannon | | 2025-08-29 | | <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 Cofrin | | | | | | |
| Address 700 Park Dr NE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30306 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Caitlin | | 2025-09-20 | | <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 | \$10.00 | \$0.00 |
| Last Name Highland | | | | | | |
| Address 1157 White Oak Ave SW | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30310 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Itemized Contributions Page Total | | | | | \$ 385.00 | \$ 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 |
|-----------------------------------|--------------|--|------------|---|-----------|-------------|
| Jacob | | 2025-09-26 | | | | \$25.00 |
| Last Name Shepherd | | | | | | |
| Address 126 Greenville St | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Newnan | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30263 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Aimee | | 2025-09-30 | | | \$25.00 | \$0.00 |
| Last Name Hodges | | | | | | |
| Address 15129 2800 Road | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Hotchkiss | | <input type="checkbox"/> In-Kind | | | | |
| State CO | Zip 81419 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Megan | | 2025-09-02 | | | \$25.00 | \$0.00 |
| Last Name Rowlett | | | | | | |
| Address 2615 Woodhill Circle | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City East Point | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30344 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Stephen | | 2025-09-07 | | | \$250.00 | \$0.00 |
| Last Name Suits | | | | | | |
| Address 737 Myrtle St NE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30308 | <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 |
|-----------------------------------|--------------|--|------------|---|-----------|-------------|
| Rebecca | | 2025-09-10 | | | | \$25.00 |
| Last Name Duren | | | | | | |
| Address 858 Virgil St NE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30307 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Dominique | | 2025-09-10 | | | \$100.00 | \$0.00 |
| Last Name Sims | | | | | | |
| Address 166 Carter Ave SE | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30317 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Whitney | | 2025-09-13 | | | \$50.00 | \$0.00 |
| Last Name Macon | | | | | | |
| Address 266 Windsor St, Apt B | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Cambridge | | <input type="checkbox"/> In-Kind | | | | |
| State MA | Zip 02139 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Priscilla | | 2025-09-13 | | | \$100.00 | \$0.00 |
| Last Name Maxwell | | | | | | |
| Address PO Box 994 | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | Description |
| City Montreat | | <input type="checkbox"/> In-Kind | | | | |
| State NC | Zip 28757 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Itemized Contributions Page Total | | | | | \$ 275.00 | \$ 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 | | Cash Amt. | Est. Value |
|-----------------------------------|--------------|--|------------|---|-----------|-------------|
| Elizabeth | | 2025-09-13 | | <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 Bowen | | | | | | |
| Address 8109 Beaver Creek Rd | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Alpharetta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30318 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Meenal | | 2025-09-13 | | <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 Patel Patel | | | | | | |
| Address 756 Blossom Rd | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Encinitas | | <input type="checkbox"/> In-Kind | | | | |
| State CA | Zip 92024 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| Daniel | | 2025-07-09 | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | \$200.00 | \$0.00 |
| Last Name Kanso | | | | | | |
| Address 90 Cliffcreek Trace | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | | | |
| City Atlanta | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 30350 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| | | | | <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 | \$0.00 | \$0.00 |
| Last Name | | | | | | |
| Address | | | | | | |
| Address2 | | <input type="checkbox"/> Monetary | Employer | | | |
| City | | <input type="checkbox"/> In-Kind | | | | |
| State | Zip | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | Description |
| 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

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 \$ <u>0.00</u> | |

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

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

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

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 ActBlue Last Name Address PO Box 962017 Address2 City Boston State MA Zip 02196 | Date 2025-07-01 <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 | | \$14.45 |
| First Name ActBlue Last Name Address PO Box 962017 Address2 City Boston State MA Zip 02196 | Date 2025-08-01 <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 | | \$18.62 |
| First Name ActBlue Last Name Address PO Box 962017 Address2 City Boston State MA Zip 02196 | Date 2025-09-01 <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 | | \$25.67 |

Page Total \$ 58.74

* 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 TikTok Promote | | Date 2025-07-03 | Occupation | | \$84.00 |
| Last Name | | | | | |
| Address 5800 Bristol Parkway C3 | | | | | |
| 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 Culver City | | | | | |
| State CA | Zip 90230 | | | | |
| First Name Brie | | Date 2025-07-03 | Occupation | | \$273.70 |
| Last Name Owens | | | | | |
| Address 723 Peeples St. SW | | | | | |
| Address2 | | <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer | | |
| City Atlanta | | | | | |
| State GA | Zip 30310 | | | | |
| First Name My Friend's Bottle Shop | | Date 2025-07-07 | Occupation | | \$123.54 |
| Last Name | | | | | |
| Address 275 Memorial Dr SE Suite A | | | | | |
| 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 30312 | | | | |
| First Name Brie | | Date 2025-07-10 | Occupation | | \$106.97 |
| Last Name Owens | | | | | |
| Address 723 Peeples St. SW | | | | | |
| Address2 | | <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer | | |
| City Atlanta | | | | | |
| State GA | Zip 30310 | | | | |

* 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 \$ 588.21**

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid | |
|--|--------------------|---|-----------------------|---------------------|-------------|-----------|
| First Name Brie | Last Name Owens | Date 2025-07-10 | Occupation | | \$82.55 | |
| Address 723 Peebles St. SW | | | | | | |
| Address2 | City Atlanta | <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment | Employer | | | |
| State GA | | | | | | Zip 30310 |
| Address 405 N Angier Ave. NE | | | | | | |
| Address2 | City Atlanta | <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 30308 |
| Address 1287 Glenwood Ave SE Suite A | | | | | | |
| Address2 | City Atlanta | <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 30316 |
| Address 875 M.L.K. Jr Dr SW | | | | | | |
| Address2 | City Atlanta | <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 30314 |
| Address Chick-fil-A | | | | | | |
| Address2 | City Atlanta | <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 30314 |
| Address Chick-fil-A | | | | | | |

* 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 \$ 383.12**

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|---|-----------|---|-----------------------|---------------------|-------------|
| First Name Good Party LLC | | Date 2025-08-11 | Occupation | | \$10.00 |
| Last Name | | | | | |
| Address Los Angeles | | | | | |
| 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 Los Angeles | | | | | |
| State CA | Zip 90026 | | | | |
| First Name Super Cheap Signs | | Date 2025-08-18 | Occupation | | \$444.27 |
| Last Name | | | | | |
| Address 12800 Anderson Mill Rd Box 400, BLDG D-1 | | | | | |
| 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 Cedar Park | | | | | |
| State TX | Zip 78613 | | | | |
| First Name Mail Chimp | | Date 2025-08-18 | Occupation | | \$20.00 |
| Last Name | | | | | |
| Address 405 N Angier Ave. NE | | | | | |
| 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 30318 | | | | |
| First Name West End Print Shop | | Date 2025-08-19 | Occupation | | \$490.50 |
| Last Name | | | | | |
| Address 964 Ralph David Abernathy Blvd SW | | | | | |
| 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 30310 | | | | |

* 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 \$ 9964.77**

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|--|-----------|---|-----------------------|---------------------|-------------|
| First Name USPS | | Date 2025-08-19 | Occupation | | \$903.60 |
| Last Name | | | | | |
| Address 848 Oglethorpe Ave SW | | <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 Atlanta | | | | | |
| State GA | Zip 30310 | | | | |
| First Name Kroger | | Date 2025-08-25 | Occupation | | \$33.17 |
| Last Name | | | | | |
| Address 590 Cascade Ave SW | | <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 Atlanta | | | | | |
| State GA | Zip 30310 | | | | |
| First Name BJ's Wholesale Club | | Date 2025-09-02 | Occupation | | \$86.07 |
| Last Name | | | | | |
| Address 3585 N Commerce Dr | | <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 East Point | | | | | |
| State GA | Zip 30344 | | | | |
| First Name Dunkin Donuts | | Date 2025-09-02 | Occupation | | \$52.69 |
| Last Name | | | | | |
| Address 1302 Ralph David Abernathy 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 | | | | | |
| City Atlanta | | | | | |
| State GA | Zip 30310 | | | | |

* 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 \$ 1,075.53**

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|---|-----------|---|-----------------------|---------------------|-------------|
| First Name Atlanta North Georgia Labor Council | | Date 2025-09-02 | Occupation | | \$35.00 |
| Last Name | | | | | |
| Address 501 Pulliam St SW #517 | | <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 Atlanta | | | | | |
| State GA | Zip 30312 | | | | |
| First Name Chick-fil-A | | | Date 2025-09-08 | Occupation | |
| Last Name | | | | | |
| Address 875 M.L.K. Jr Dr SW | | <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 Atlanta | | | | | |
| State GA | Zip 30314 | | | | |
| First Name Good Party LLC | | | Date 2025-09-10 | Occupation | |
| Last Name | | | | | |
| Address Los Angeles | | <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 Los Angeles | | | | | |
| State CA | Zip 90026 | | | | |
| First Name West End Ace Hardware | | | Date 2025-09-15 | Occupation | |
| Last Name | | | | | |
| Address 964 Ralph David Abernathy Blvd SW | | <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 Atlanta | | | | | |
| State GA | Zip 30310 | | | | |

* 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 \$ 113.01**

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|---|-----------|-------------------------|---|---------------------|-------------|
| First Name Chick-fil-A | | Date 2025-09-15 | Occupation | | \$39.82 |
| Last Name | | | | | |
| Address 875 M.L.K. Jr Dr SW | | | <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 | | |
| Address2 | | | | | |
| City Atlanta | | | | | |
| State GA | Zip 30314 | | | | |
| First Name Mail Chimp | | Date 2025-09-17 | Occupation | | \$20.00 |
| Last Name | | | | | |
| Address 405 N Angier Ave. NE | | | <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 | | |
| Address2 | | | | | |
| City Atlanta | | | | | |
| State GA | Zip 30308 | | | | |
| First Name Super Cheap Signs | | Date 2025-09-19 | Occupation | | \$468.75 |
| Last Name | | | | | |
| Address 12800 Anderson Mill Rd Box 400, BLDG D-1 | | | <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 | | |
| Address2 | | | | | |
| City Cedar Park | | | | | |
| State TX | Zip 78613 | | | | |
| First Name Clash Graphics | | Date 2025-09-19 | Occupation | | \$528.15 |
| Last Name | | | | | |
| Address 2233 Peachtree Rd STE 202 | | | <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 | | |
| Address2 | | | | | |
| City Atlanta | | | | | |
| State GA | Zip 30309 | | | | |

* 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 \$ 1,056.72**

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|--|-----------|---|-----------------------|---------------------|-------------|
| First Name Hop City West End | | Date 2025-09-19 | Occupation | | \$47.89 |
| Last Name | | | | | |
| Address 1000 White St SW | | <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 Atlanta | | | | | |
| State GA | Zip 30310 | | | | |
| | | | | | |
| First Name Wal-Mart | | Date 2025-09-22 | Occupation | | \$26.77 |
| Last Name | | | | | |
| Address 835 M.L.K. Jr Dr NW | | <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 Atlanta | | | | | |
| State GA | Zip 30314 | | | | |
| | | | | | |
| First Name Chick-fil-A | | Date 2025-09-22 | Occupation | | \$99.55 |
| Last Name | | | | | |
| Address 875 M.L.K. Jr Dr SW | | <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 Atlanta | | | | | |
| State GA | Zip 30314 | | | | |
| | | | | | |
| First Name Kroger | | Date 2025-09-26 | Occupation | | \$72.58 |
| Last Name | | | | | |
| Address 590 Cascade Ave SW | | <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 Atlanta | | | | | |
| State GA | Zip 30310 | | | | |
| | | | | | |

* 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 \$ 246.79**

CFC-CCDR 1/14

| List Name and Mailing Address of Recipient | | Exp. Date Exp. Type* | Occupation & Employer | Expenditure Purpose | Amount Paid |
|--|-----------|-------------------------|---|---------------------|-------------|
| First Name BJ's Wholesale | | Date 2025-09-26 | Occupation | | \$100.76 |
| Last Name | | | | | |
| Address 3585 N Commerce Dr | | | <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 | | |
| Address2 | | | | | |
| City East Point | | | | | |
| State GA | Zip 30344 | | | | |
| First Name McAlisters | | Date 2025-09-29 | Occupation | | \$355.45 |
| Last Name | | | | | |
| Address 1299 Northside Dr NW Suite 500 | | | <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 | | |
| Address2 | | | | | |
| City Atlanta | | | | | |
| State GA | Zip 30318 | | | | |
| First Name Chick-fil-A | | Date 2025-09-29 | Occupation | | \$67.48 |
| Last Name | | | | | |
| Address 875 M.L.K. Jr Dr SW | | | <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 | | |
| Address2 | | | | | |
| City Atlanta | | | | | |
| State GA | Zip 30314 | | | | |
| First Name West End Print Shop | | Date 2025-09-30 | Occupation | | \$250.00 |
| Last Name | | | | | |
| Address 964 Ralph David Abernathy Blvd SW | | | <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 | | |
| Address2 | | | | | |
| City Atlanta | | | | | |
| State GA | Zip 30310 | | | | |

* 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 \$ 773.69**

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.