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BY: ERC.....

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Georgia Government Transparency & Campaign Finance Commission
200 Piedmont Avenue S.E. | Suite 1416 - West Tower | Atlanta Georgia, 30334

DECLARATION OF INTENTION TO ACCEPT CAMPAIGN CONTRIBUTIONS (FORM DOI) –
COUNTY/MUNICIPAL LEVEL FILERS

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

1 Today's Date: 8/16/2021

2 Candidate (full name): Douglas J. DeLito
 Address: 370 Brecken Way
 City, State, Zip: Alpharetta, GA 30009
 Telephone (optional): 404-386-4538 Email: douglde@comcast.net

3 Name County/City: Fulton / Alpharetta Party Affiliation (optional):
 Name of Office Sought or Held: City Council - Post 3
 (include office, district, post, or judicial seat) Democrat Non-Partisan
 Republican Other

4 Next Election Year: 2021

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

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

6 Treasurer (full name): _____
 Address: _____
 City, State, Zip _____
 Email: _____

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

[Signature]
Signature of Candidate

8/16/2021
Date