

## Campaign Contribution Disclosure Report

### Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1402 West Tower | Atlanta, GA 30334 | 404-463-1980 | [www.ethics.ga.gov](http://www.ethics.ga.gov)

<p><b>1. Report Type</b> <small>(Select One)</small></p> <p><input type="checkbox"/> Original</p> <p><input checked="" type="checkbox"/> Amendment</p> <p>Amendment # <u>3</u></p>	<p><b>2. Filing is being made on behalf of (Select One):</b></p> <p><b>Candidate or Public Official</b> Office Held or Sought <u>Alpharetta City Council, Post 4</u> <small>(Include county, municipality, district, post or judicial circuit)</small></p> <p>Filer ID _____ <small>(Filer ID that begins with the letter "C")</small></p> <p><b>Organization or Person Other than Candidate's Campaign Committee</b> Committee Name: <u>Friends of John Hipes, Inc.</u></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; padding: 5px; text-align: center; font-size: 1.2em;">9/16/19</div>
--	--	--

**3. Identifying and Contact Information**

(1) John D. Hipes / Friends of John Hipes, Inc. (2) 09/16/2019  
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 178 S. Main Street, Suite 250 Alpharetta GA 30009  
Mailing Address City State Zip Code

(4) (770) 664-6699 and/ or jhipes@hbilawfirm.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: John Hipes | Karen Hipes  
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"/> January 31, ____ (year) <input type="checkbox"/> March 31, ____ (year) <input type="checkbox"/> June 30, ____ (year) <input checked="" type="checkbox"/> September 30, <u>2019</u> (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><b>Supplemental Reporting</b></p> <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<p><small>*Persons leaving office with excess funds until such funds are expended as provided in the Act                      *Unsuccessful candidates with excess funds, or who receive contributions to retire debt incurred, until such funds are expended, or such unpaid debts are satisfied (December 31 filing only)</small></p>		

State of Georgia County of Fulton

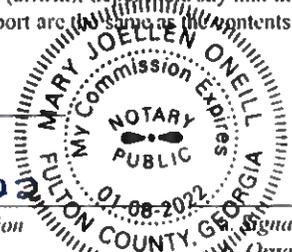
I, JOHN HIPES, being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on Sept. 16, 2019

M. Joellen O'Neill  
Signature of Notary Public

1-8-2022  
Commission Expiration

\_\_\_\_\_  
Signature of Candidate  
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.	.	\$22808.24
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		\$2150.00
3a	All loans received this reporting period.	.	\$749.76
3b	Interest earned on campaign account this reporting period.	.	
3c	Total amount of investments sold this reporting period.	.	
3d	Total amount of cash dividends and interest paid out this reporting period.	.	
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.		\$64.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		2963.76
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		\$25570.00

**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.		\$1502.40
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		\$20442.81
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		\$50.06
11	Total expenditures reported this period. (Line 9 + 10)		\$20492.87
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$21995.27

**INVESTMENTS**

13	Total value of investments held at the beginning of this reporting period.	.	
14	Total value of investments held at the end of this reporting period.	.	

**TOTAL NET BALANCE ON HAND**

15	Net balance on hand. (Line 6 - 12 + 14)		\$3574.73
----	--	--	-----------

\* 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.

**State of Georgia  
Campaign Contribution Disclosure Report  
Outstanding Indebtness**

Election Cycle*: <u>General</u>		Election Year: <u>2019</u>	<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.		<b>\$14106.97</b>
2	Loans received this reporting period.		<b>\$749.76</b>
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		<b>\$14856.73</b>
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		<b>\$0.00</b>
Election Cycle*: _____		Election Year: _____	<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.		
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		
Election Cycle*: _____		Election Year: _____	<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.		
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		

\* 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	
	Date	Occupation			Description	
First Name or Business Name <b>J. Thomas Salata Attorney at Law</b>  Last Name  Address 2500 Northwinds Parkway  Address2 Suite 330  City Alpharetta  State      Zip GA              30009  Aff. Comm.	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Occupation Attorney  Employer J. Thomas Salata Attorney at Law	<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. 500.00	Est. Value   Description	
First Name or Business Name <b>Jule</b>  Last Name Haley  Address 165 Cumming Street  Address2  City Alpharetta  State      Zip GA              30009  Aff. Comm.	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Occupation Technology  Employer Edge Solutions		<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. 200.00	Est. Value   Description
First Name or Business Name <b>Mark and Amy</b>  Last Name Spiegel  Address 235 Marjean Way  Address2  City Alpharetta  State      Zip GA              30009  Aff. Comm.	<input checked="" type="checkbox"/> Monetary  <input type="checkbox"/> In-Kind  <input type="checkbox"/> Common Source  <input type="checkbox"/> Credit Received on Loan	Occupation Senior Living  Employer Formation Development Group, LLC			<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. 250.00

Itemized Contributions Page Total \$ 950.00 \$ \_\_\_\_\_

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Randy	07/23/2019	Contractor	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	500.00	
Last Name Schiltz					
Address 14300 Providence Road					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Milton	<input type="checkbox"/> In-Kind	t-Olive Properties			
State GA	<input type="checkbox"/> Common Source				
Zip 30004	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					Description
Kimberly	08/06/2019	Unknown	<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	
Last Name Jager					
Address 2505 Milford Lane					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Alpharetta	<input type="checkbox"/> In-Kind	Kimberly-Clark			
State GA	<input type="checkbox"/> Common Source				
Zip 30009	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					Description
Jan	09/15/2019	Veterinarian	<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	
Last Name Hines					
Address 80 Milton Ave.					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Alpharetta	<input type="checkbox"/> In-Kind	Alpharetta Animal Hospital			
State GA	<input type="checkbox"/> Common Source				
Zip 30009	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					Description
Douglas	08/21/2019	Tax services	<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	
Last Name DeRito					
Address 370 Braeden Way					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Alpharetta	<input type="checkbox"/> In-Kind	Ryan, LLC			
State GA	<input type="checkbox"/> Common Source				
Zip 30009	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					Description

Itemized Contributions Page Total \$ 1200.00 \$

\* 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

## 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.) John	1. 8/30/2019	First Name Friends of John Hipes, Inc.	1. Campaign committee
Lender Last Name Hipes	2. 749.76	Last Name	2. 178 S. Main St. Ste 250 Alpharetta, GA
Address 12295 Dancliff Trace	3. <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Address 178 S. Main Street	3. <input checked="" type="checkbox"/> Public Officer
Address2	<input type="checkbox"/> Special	Address2 Suite 250	<input type="checkbox"/> Candidate
City Alpharetta	<input type="checkbox"/> Special Primary	City Alpharetta	<input type="checkbox"/> Other Than Candidate Committee Name
State GA      Zip 30009	<input type="checkbox"/> Run-Off Primary	State GA      Zip 30009	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General	Address	3. <input type="checkbox"/> Public Officer
Address2	<input type="checkbox"/> Special	Address2	<input type="checkbox"/> Candidate
City	<input type="checkbox"/> Special Primary	City	<input type="checkbox"/> Other Than Candidate Committee Name
State      Zip	<input type="checkbox"/> Run-Off Primary	State      Zip	
	<input type="checkbox"/> Run-Off General		
	<input type="checkbox"/> Run-Off Special		
	<input type="checkbox"/> Run-Off Special Primary		
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total \$ 749.76	

\* 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

## 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 <b>New Prospect Strategies, LLC</b> Last Name	Date <b>08/07/2019</b>	Occupation Campaign consultant	Consulting services and printing	1332.44	
Address <b>44 Milton Ave.</b> Address2 <b>Suite 127</b> City <b>Alpharetta</b> State <b>GA</b> Zip <b>30009</b>	<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 <b>New Prospect Strategies, LLC</b>			
First Name <b>Clayton CameraCraft Photography</b> Last Name		Date <b>08/13/2019</b>			Occupation Photographer
Address <b>352 Pebble Trail</b> Address2 City <b>Alpharetta</b> State <b>GA</b> Zip <b>30009</b>		<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 <b>Clayton CameraCraft Photography</b>		
First Name Last Name <b>City of Alpharetta</b> Address <b>2 Park Plaza</b> Address2 City <b>Alpharetta</b> State <b>GA</b> Zip <b>30009</b>	Date <b>08/19/2019</b>		Occupation City clerk's office	Candidate qualifying fee	450.00
<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 <b>City of Alpharetta</b>				

Page Total \$ 2036.32

\* 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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <b>New Prospect Strategies, LLC</b> Last Name	Date <b>09/01/2019</b>	Occupation <b>Campaign consultant</b>  Employer <b>New Prospect Strategies, LLC</b>	Consulting services	1300.00
Address <b>44 Milton Ave.</b> Address2 <b>Suite 127</b> City <b>Alpharetta</b> State <b>GA</b> Zip <b>30009</b>	<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			
First Name <b>Paper Source</b> Last Name	Date <b>05/03/2019</b>	Occupation <b>Retail / Stationary store</b>  Employer <b>Paper Source</b>	Stationary / Thank You cards	168.66
Address <b>4160 Avalon Blvd</b> Address2 City <b>Alpharetta</b> State <b>GA</b> Zip <b>30009</b>	<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			
First Name <b>Appen Media Group</b> Last Name	Date <b>08/30/2019</b>	Occupation <b>Newspaper / Internet media</b>  Employer <b>Appen Media Group</b>	Advertising / Public thank you	581.10
Address <b>319 N. Main Street</b> Address2 City <b>Alpharetta</b> State <b>GA</b> Zip <b>30009</b>	<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			
First Name <b>Committee to Elect Dan Merkel</b> Last Name	Date <b>08/28/2019</b>	Occupation <b>Campaign committee</b>  Employer <b>Committee to Elect Dan Merkel</b>	Campaign donation	1500.00
Address <b>1775 Ridge Oak Place</b> Address2 City <b>Alpharetta</b> State <b>GA</b> Zip <b>30022</b>	<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 checked="" type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			

\* 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 \$ 3549.76

## 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 John  Last Name Hipes  Address 12295 Dancliff Trce  Address2  City Alpharetta  State GA      Zip 30009	Date 09/16/2019  <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input checked="" 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 Attorney  Employer Hipes & Belle Isle, LLC	Repay personal loan to campaign	14856.73
First Name  Last Name  Address  Address2  City  State      Zip	<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	Occupation  Employer		
First Name  Last Name  Address  Address2  City  State      Zip	<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	Occupation  Employer		

Page Total \$ 14856.73

\* 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

## State of Georgia Campaign Contribution Disclosure Report Investments Statement

<b>1. Investment Name</b>	<b>Account #</b>
Institution/Person Holding Account _____ Mailing Address <u>178 S. Main Street, Suite 250</u> _____ Address2 _____ _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	Difference in value \$
	Interest Paid Out \$
	Cash Dividends \$

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

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

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

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

**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.

[Empty area for Addendum Statement]