

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

1. Report Type (Select One) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment Amendment # _____	2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought: <u>Mayor of Alpharetta</u> <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID: <u>C2018000002</u> <small>(Filer ID that begins with the letter "C")</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Friends of Jim Gilvin</u> Filer ID: <u>F2011009625</u> <small>(Filer ID that begins with the letter "NC")</small>	Use Earlier of Post Mark or Hand Delivered Date <div style="border: 2px solid black; padding: 5px; font-size: 1.2em; font-weight: bold;">10/07/19</div>
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3. Identifying and Contact Information

(1) Jim Gilvin (2) 10/07/2019
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 600 Newport Shr Alpharetta GA 30005
Mailing Address City State Zip Code

(4) 404 271 2716 and/or jimgilvin@bellsouth.net
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: Mike Perry | Bob Koncerak
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, ____ (year) <input type="checkbox"/> October 25, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)	<input type="checkbox"/> 6 days before Primary Run-Off ____ (year) <input type="checkbox"/> 6 days before General Run-Off ____ (year) <input type="checkbox"/> 6 days before Special Primary Run-Off ____ (year) <input type="checkbox"/> 6 days before Special Run-Off ____ (year)	<input type="checkbox"/> 15 days before Special Primary, ____ (year) <input type="checkbox"/> 15 days before Special, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)
Supplemental Reporting <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<small>*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>		

State of Georgia County of Fulton

I, Jim Gilvin, 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 and also electronically filed.

Sworn to and subscribed before me on October 7, 2019

Signature of Notary Public

01/17/2023
 Commission Expiration

a. Signature of Candidate
 b. Organization/Chairperson/Treasurer

CFC-CCDR 1114

**State of Georgia
Campaign Contribution Disclosure Report
Summary Report**

CONTRIBUTIONS RECEIVED

1	<input type="checkbox"/> I have no contributions to report. <input 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.		34403
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		200
3a	All loans received this reporting period.		—
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.		95.70
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		295.70
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		34698.70

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.		2076.30
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		32541
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		—
11	Total expenditures reported this period. (Line 9 + 10)		32541
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		34617.30

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)		81.40
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* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

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State of Georgia Campaign Contribution Disclosure Report Outstanding Indebtness		
Election Cycle*: <u>General</u> Election Year: <u>2019</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	<u>46194</u>
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	<u>28500</u>
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)	<u>17694</u>
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

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State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

Must list contributions received by a single contributor for which the aggregate total more than \$100.00.
Note: Loans are no longer reported in "Itemized Contributions" section. See Loan Reporting section below.

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name or Business Name ACEC GA PAC Last Name Address 233 Peachtree St. Address2 Harris Tower, St. 700 City Atlanta State GA Zip 30303 Aff. Comm.	Date 09/10/2019 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer	<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	Est. Value Description
First Name or Business Name Last Name Address Address2 City State Zip Aff. Comm.	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value Description
First Name or Business Name Last Name Address Address2 City State Zip Aff. Comm.	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value Description

Itemized Contributions Page Total \$ 200 \$

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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: <u>Jim</u> Last Name: <u>Gilvin</u> Address: <u>600 Newport Sh</u> Address2: City: <u>Alpharetta</u> State: <u>GA</u> Zip: <u>30005</u>	Date: <u>07/02/2019</u> <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: <u>Candidate</u> Employer: <u>City of Alpharetta</u>	<u>Repay Candidate Loan</u>	<u>3000</u>
First Name: <u>Avolve Digital</u> Last Name: Address: Address2: City: State: Zip:	Date: <u>07/20/2019</u> <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:	<u>Website Consulting</u>	<u>425</u>
First Name: <u>Chris</u> Last Name: <u>Savas</u> Address: Address2: City: State: Zip:	Date: <u>08/05/2019</u> <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: <u>Photographer</u> Employer:	<u>Photography</u>	<u>600</u>

Page Total \$ 4025

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

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>New Prospect Strategies</i>	Last Name	Date <i>08/08/2019</i>	Occupation	Campaign Consulting	1000
Address					
Address2	City	<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					
First Name <i>Avolve Digital</i>	Last Name	Date <i>08/19/2019</i>	Occupation	Website Consulting	116
Address					
Address2	City	<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					
First Name <i>City of Alpharetta</i>	Last Name	Date <i>08/19/2019</i>	Occupation	Qualifying Fees	900
Address					
Address2	City	<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					
First Name <i>Jim</i>	Last Name <i>Gilwin</i>	Date	Occupation	Repay Candidate Loan	6000
Address <i>600 Newport Sh</i>					
Address2	City <i>Alpharetta</i>	<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	Employer		
State <i>GA</i>					

* 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 \$ 8016

Public Officer/Candidate/Other Than Candidate Committee Name Friends of Jim Gilwin Page 6 of 7

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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 <i>New Prospect Strategies</i> Last Name Address Address2 City State Zip	Date <i>08/29/2019</i> <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 <i>Campaign Consulting</i> Employer	<i>Campaign Consulting</i>	1000
First Name <i>Jim</i> Last Name <i>Gilwin</i> Address <i>600 Newport Str</i> Address2 City <i>Alpharetta</i> State <i>GA</i> Zip <i>30005</i>	Date <i>08/30/2019</i> <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 <i>Candidate</i> Employer	<i>Loan Repayment</i>	19000
First Name <i>Jim Gilwin</i> Last Name <i>Gilwin</i> Address Address2 City State Zip	Date <i>09/16/2019</i> <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 <i>Candidate</i> Employer	<i>Loan Repayment</i>	500

Page Total \$ 20500

* 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