

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>Board of Commissioners District 2</u> <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID _____ <small>(Filer ID that begins with the letter "C")</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Jaime I Trevari</u> Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>	Local Location Codes: Use Earlier of Post Mark or Hand Delivered Date Qualifying Office Filer ID: <div style="border: 1px solid black; padding: 2px; text-align: center;">Q2006000277</div>
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3. Identifying and Contact Information

(1) Jaime I Trevari (2) 01/03/2015
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 6110 Zachary dr Morcross 30093
Mailing Address City Zip Code

(4) 770 242-0002 and/ or jtrevari@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: Jaime I Trevari Jeffrey S. Scott
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, 2014 (year) <input type="checkbox"/> June 30, 2014 (year)	<input type="checkbox"/> January 31, 2014 (year) <input type="checkbox"/> March 31, 2014 (year) <input type="checkbox"/> June 30, 2014 (year) <input type="checkbox"/> September 30, 2014 (year) <input type="checkbox"/> October 25, 2014 (year) <input checked="" type="checkbox"/> Dec. 31, 2014 (year)	<input type="checkbox"/> 6 days before Primary Run-Off 2014 (year) <input type="checkbox"/> 6 days before General Run-Off 2014 (year) <input type="checkbox"/> 6 days before Special Primary Run-Off 2014 (year) <input type="checkbox"/> 6 days before Special Run-Off 2014 (year)	<input type="checkbox"/> 15 days before Special Primary, 2014 (year) <input type="checkbox"/> 15 days before Special, 2014 (year) <input type="checkbox"/> Dec. 31, 2014 (year)

*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)

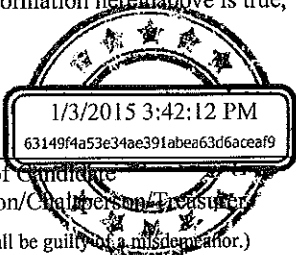
State of Georgia County of _____

I, the undersigned, being duly sworn, do swear or affirm, certify and say that this affidavit and the information hereinabove is true, complete and correct to the best of my knowledge and belief.

Sworn to and subscribed before me on _____,

Signature of Notary Public _____ Commission Expiration _____

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



(Any person who knowingly fails to comply with or who knowingly violates any of the provisions of the Act shall be guilty of a misdemeanor.)

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.	\$1,566.00	\$12,200.02
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$450.00	\$100.00
3a	All loans received this reporting period.		\$191.48
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.		\$450.00
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)	\$450.00	\$291.48
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$2,016.00	\$12,491.50

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	\$8,808.30
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$1,791.85
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	\$39.72
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$1,831.57
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$10,639.87

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	\$1,851.63
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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.

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.	
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	
					Description	
First Name Steady Limosine Service	Date 1/3/2015	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$100.00	Est. Value \$0.00	
Last Name					Description	
Address 1225 Chimney Trace way						
Address 2					<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer
City Lawrenceville						
State Zip						
Aff. Comm.						
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 Jeffrey	Date 1/3/2015	Occupation Retired	<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. \$450.00	Est. Value \$0.00	
Last Name Thomas					Description volunteer dinner	
Address 6380 Glenbrook Dr						
Address 2					<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer
City Tucker						
State Zip GA 30084						
Aff. Comm.						

Itemized Contributions Page Total

\$550.00

\$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

**State of Georgia
Campaign Contribution Disclosure Report
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.) Jaime		1. 11/17/2014	First Name Jaime		1.
Lender Last Name Trevari		2. \$49.72	Last Name Trevari		2. retired
Address 6110 Zachary Sr		3. <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 <input type="checkbox"/> Special Primary	Address same		3. <input type="checkbox"/> Public Officer <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address 2			Address 2		
City Norcross			City same		
State GA	Zip 30093		State GA	Zip 30093	
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.) Jaime		1. 11/17/2014	First Name Jaime		1.
Lender Last Name Trevari		2. \$141.76	Last Name Trevari		2. retired
Address 6110 Zachary Sr		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 <input type="checkbox"/> Special Primary	Address same		3. <input type="checkbox"/> Public Officer <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address 2			Address 2		
City Norcross			City same		
State GA	Zip 30093		State GA	Zip 30093	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total			\$191.48

* 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	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Pappadeaux Seafood Kitchen Last Name Address 5635 Jimmy Carter Blvd Address 2 City Norcross State GA Zip 30071	Date 11/17/2014 <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	Volunteer Appreciation Dinner	\$450.00
First Name Last Name Address Address 2 City Norcross State AK Zip	Date 1/1/1900 <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		\$0.00

Page Total \$450.00

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)

**State of Georgia
Campaign Contribution Disclosure Report
Investments Statement**

1. Investment Name		Account #
Institution/Person Holding Account _____		Value at beginning of reporting period \$
Mailing Address _____		Value at end of reporting period \$
Address2 _____		Difference in value \$
City _____ State _____ Zip _____		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>		\$0.00	Page Total Cash Dividends:		<u>\$0.00</u>
<u>Total value of investments at end of reporting period</u>		\$0.00	Page Total Interest Paid Out:		<u>\$0.00</u>
<u>Total difference in value</u>		\$0.00	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.