

CFC-CCDR 1/14

4/14

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 |

<p>1. Report Type (Select One)</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>DIST. 4 Gwinnett Co. Commissioner</u> <small>(Include county, municipality, district, post or judicial circuit)</small></p> <p>Filer ID: <u>C2009000216</u> <small>(Filer ID that begins with the letter "C")</small></p> <p>Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>JOHN HEARD for Commissioner</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> <p>JUL - 8 2014 <i>JH</i></p> <p>GWINNETT COUNTY ELECTIONS OFFICE</p>
--	---	--

3. Identifying and Contact Information

(1) JOHN WILSON HEARD (2) 7-4-14
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 1430 Eugene Terrace Lawrenceville GA 30046
Mailing Address City State Zip Code

(4) 770 963 4366 and/or John.Heard@GwinnettCounty.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"/> January 31, ____ (year) <input type="checkbox"/> June 30, ____ (year)	<input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> March 31, ____ (year) <input checked="" type="checkbox"/> June 30, <u>2014</u> (year) <input 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)
<p>Supplemental Reporting</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 GA County of Gwinnett

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

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

JOHN HEARD

RECEIVED
JUL - 8 2014
GWINNETT COUNTY
ELECTIONS OFFICE

CFC-CCDR 1/14

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

CONTRIBUTIONS RECEIVED

1		In-Kind Estimated Value	Cash Amount
	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:		
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.		35m 48
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		16550
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.		715 ⁰⁰
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		17265
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		53042 ⁴⁸

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.		7990 ³¹
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		40984 ⁴⁵
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)		40984 ⁴⁵
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		48974 ⁷⁶

INVESTMENTS

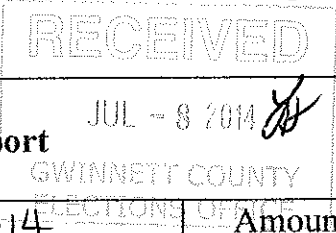
13	Total value of investments held at the beginning of this reporting period.		—
14	Total value of investments held at the end of this reporting period.		—

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)		4067 ⁷²
----	--	--	--------------------

* 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.

John Heard



CFC-CCDR 1/14

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

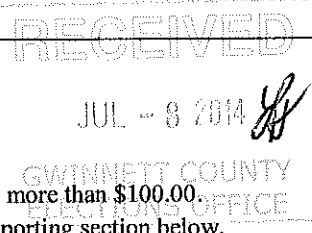
Election Cycle*: <u>Primary</u> Election Year: <u>2014</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	—
2	Loans received this reporting period.	—
3	Deferred payment of expenses this reporting period	—
4	Payments made on loans this reporting period.	—
5	Credits 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*: <u>Primary</u> Election Year: <u>2014</u>		<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*: <u>Primary</u> Election Year: <u>2014</u>		<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

Public Officer/Candidate/Other Than Candidate Committee Name

John Heard

CFC-CCDR 1/14



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 SR Homes Last Name Address 1424 N Brown Rd Address2 Suite 100 City Lawrenceville State GA Zip 30043 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 Builder Employer	<input checked="" 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	200	Est. Value
First Name or Business Name Brand Partners Last Name Address 3326 Peachtree Rd NE Address2 Suite 100 City Atlanta State GA Zip 30326 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 Developer 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	2500	Est. Value
First Name or Business Name John Lewis Last Name John Lewis Address 2496 Sunnyside Ln 2496 Belmont Dr Address2 2496 Belmont Dr City Brook State GA Zip 30519 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 Farmer Management Employer Farmer	<input checked="" 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	2000 250	Est. Value

Itemized Contributions Page Total \$ **2950**

Public Officer/Candidate/Other Than Candidate Committee Name

John Heard

Page **4** of **19**

CFC-CCDR 1/14

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Pender Last Name: Johnson Address: 4021 Indian Shores Address2: City: DeKalb State: GA Zip: 30620 Aff. Comm.	5/8/14	Housewife	<input checked="" 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	300 ⁰⁰	
RECEIVED JUL - 8 2014 GWINNETT COUNTY ELECTIONS OFFICE					
Description:					
Pacy Last Name: Lonsford Address: 3525 Hampton Hill Rd Address2: City: Buford State: GA Zip: 30519 Aff. Comm.	4/25/14	Self Employed	<input checked="" 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	250 ⁰⁰	
Description:					
Wayne Last Name: Hill Address: 1227 Peachtree Blvd Address2: City: Buford State: GA Zip: 30516 Aff. Comm.	4/13/14	Retired	<input checked="" 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	200 ⁰⁰	
Description:					
Vendue Properties Last Name: Address: 4398 Lochsa Ave Address2: City: Suwanee GA State: GA Zip: 30024 Aff. Comm.	5/6/14	Investor	<input checked="" 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	500 ⁰⁰	
Description:					

Itemized Contributions Page Total \$ 1250⁰⁰ \$

* 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

Public Officer/Candidate/Other Than Candidate Committee Name

John Hill

CFC-CCDR 1/14

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Ciara Reathy Last Name Address 1595 NewHoped Address2 City Lawrenceville 6 State GA Zip 30046 Aff. Comm.	5/6/14	Realtor Employer	<input checked="" 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	250 ⁰⁰	
CPAC Last Name Address 277 Senic Hwy Address2 City Lawrenceville State GA Zip 30046 Aff. Comm.	5/6/14	PAC Employer	<input checked="" 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	300 ⁰⁰	
Thomas Last Name Address 2580 M. Water Crossing Address2 City Pacific State GA Zip 30014 Aff. Comm.	5/6/14	Attorney Employer	<input checked="" 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	200 ⁰⁰	
Anthony Powell Last Name Address 960 Kenyan Ct Address2 City Lawrenceville State GA Zip 30046 Aff. Comm.	5/6/14	Attorney Employer	<input checked="" 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	250 ⁰⁰	

RECEIVED
JUL - 8 2014
GWINNETT COUNTY
ELECTIONS OFFICE

Itemized Contributions Page Total \$ 1000⁰⁰ \$

* 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

John H. ...

CFC-CCDR 1/14

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Anderson Tula Carr Last Name	5/5/14	Attorney	<input checked="" 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	1000	
Address 1 Sugarloaf Pkwy Address 2 Suite 4000 City Duluth State GA Zip 30097	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			
RECEIVED JUL - 8 2014 SWINNETT COUNTY DESCRIPTIONS OFFICE					
Charles Last Name Arnold	5/6/14	Retired	<input checked="" 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	500	
Address 1595 Newhope Rd Address 2 City Lawrenceville State GA Zip 30046	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Clyde Last Name Strickland	5/6/14	Retired	<input checked="" 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	500	
Address 1471 Egan in Town Address 2 City Lawrenceville State GA Zip 30046	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Merritt Properties Last Name	5/6/14	Land Investment	<input checked="" 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	250	
Address PO Box 656 Address 2 City Lawrenceville State GA Zip 30046	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description

Itemized Contributions Page Total \$ 1350⁰⁰

* 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

Public Officer/Candidate/Other Than Candidate Committee Name

John Arnold

CFC-CCDR 1/14

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Tracy Mason	5/6/14	attorney	<input checked="" 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	2500	
			<div style="border: 1px solid black; padding: 5px; text-align: center;"> RECEIVED JUL - 8 2014 GWINNETT COUNTY ELECTIONS OFFICE </div>		
Address: 295 South Collier St	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description		
Address2: Suite D					
City: Lawrenceville					
State: GA Zip: 30046					
Aff. Comm.					
First Name or Business Name: Sutton Family Homes	5/6/14	Builder	<input checked="" 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	3000	
Address: PO Box 246	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description		
Address2					
City: Dorchester 6					
State: GA Zip: 30546					
Aff. Comm.					
First Name or Business Name: Jean Lamb	4/30/14	Farmer	<input checked="" 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	2500	
Address: 2495 Sunny Hill Ln	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description		
Address2					
City: Buford					
State: GA Zip: 30519					
Aff. Comm.					
First Name or Business Name: Peachtree Shoals Inc	4/30/14	Builder	<input checked="" 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	500	
Address: 4415 Swana Dam Rd	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description		
Address2					
City: Swannee					
State: GA Zip: 30024					
Aff. Comm.					

Itemized Contributions Page Total \$ 1300 \$

* 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

Public Officer/Candidate/Other Than Candidate Committee Name

J. H. [Signature]

CFC-CCDR 1/14

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Colonial GMC	5/12/14	Car Dealer	<input checked="" 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	500 ⁰	RECEIVED JUL - 8 2014 GWINNETT COUNTY ELECTIONS OFFICE
Last Name					
Address					
Address2					
City					
State					
Zip					
Aff. Comm.	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description		
Dustin	5/15/14	Self	<input checked="" 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	2000 ⁰	
Last Name					
Address					
Address2					
City					
State					
Zip					
Aff. Comm.	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description		
S.L. Coam LLC	5/15/14	Cms	<input checked="" 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	1000 ⁰	
Last Name					
Address					
Address2					
City					
State					
Zip					
Aff. Comm.	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description		
Terry C	5/16/14	Retired	<input checked="" 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	200 ⁰	
Last Name					
Address					
Address2					
City					
State					
Zip					
Aff. Comm.	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Description		

Itemized Contributions Page Total \$ 3700⁰⁰

* 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

J. H. Head

CFC-CCDR 1/14

First Name or Business Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
Tom Last Name: Martin Address: 2190 Lollwater Court Address2: 2 City: Carmichael State: CA Zip: 95043 Aff. Comm.	5/14/14	Banker	<input checked="" 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	1000	
Wheeler Band Last Name Address: 1160 Siskdale Blvd Address2: 19 City: Dutch State: CA Zip: 95041 Aff. Comm.	5/15/14	Property Manager	<input checked="" 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	2500	
CLA Assn. Last Name Address: 1505 Lakeview Address2: South 190 City: Lawrenceville State: GA Zip: 30043 Aff. Comm.		Manager	<input checked="" 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	1000	
Bryan Last Name: Ashworth Address: 6204 Cascade Falls Address2 City: Buford State: GA Zip: 30516 Aff. Comm.	5/12/14	Self	<input checked="" 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	250	

RECEIVED
 JUL - 8 2014
 GWINNETT COUNTY
 ELECTIONS OFFICE

Itemized Contributions Page Total \$ 4750⁰⁰

* 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
Clifford Burton	5/12/14	Self	250	
<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		<input checked="" 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	RECEIVED JUL - 8 2014 GWINNETT COUNTY ELECTIONS OFFICE	
Address 10556 Greenmount Walk	Employer			Description
Address2				
City Alpharetta				
State GA	Zip 30009			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		<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	Employer			Description
Address2				
City				
State	Zip			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		<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	Employer			Description
Address2				
City				
State	Zip			
Aff. Comm.				
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		<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	Employer			Description
Address2				
City				
State	Zip			
Aff. Comm.				

Itemized Contributions Page Total \$ 250

* 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

J. H. Hens

RECEIVED

JUL - 8 2011

CFC-CCDR 1/14

GWINNETT COUNTY
ELECTIONS OFFICE

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.	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	
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 <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	
Reference: OCGA § 21-5-34(b)(1)				Loan Page Total \$ <u>0</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

John Hand

RECEIVED

JUL - 8 2014

WINNETT COUNTY ELECTIONS OFFICE

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: ABC Direct Last Name: Address: PO Box 1485 Address2: City: Lawrenceville State: Lawrenceville Zip 30046	Date: 4/16/14 <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: Printer/Mailing Employer:	Mailout	381.50
First Name: Southeast Signs Last Name: Address: Address2: City: Lawrenceville State: GA Zip 30046	Date: 4/16/14 <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: Printer/Sign Co Employer:	Signs	2695.73
First Name: Artistic Bldg Supply Last Name: Address: Address2: City: Lawrenceville State: GA Zip 30046	Date: 4/19/14 <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: Bldg Supply Employer:	Sign Post	1067.51

Page Total \$ 4164.74

* 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

Public Officer/Candidate/Other Than Candidate Committee Name

John Newell

RECEIVED

JUL - 8 2014

GWINNETT COUNTY

CFC-CCDR 1/14

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name ABC Direct	Last Name	Date 7/24/14	Occupation Print & Mail	Mail Out	3897 ³¹
Address PO Box 1485					
Address2	City Lawrenceville	State GA	Zip 30046	<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					
State	Zip	First Name Medic Services	Date 4/24/14	Occupation Printing	Mail Out
Last Name	Address Medic Services				
Address2 PO Box 1485	City Lawrenceville	State GA	Zip 30046	<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					
State	Zip	First Name Gwinnett Elections	Date 4/26/14	Occupation	Late File Fee
Last Name N	Address				
Address2	City	State	Zip	<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					
State	Zip	First Name Medic Services	Date 4/29/14	Occupation Printing	Mail Out
Last Name	Address PO Box 1485				
Address2	City Lawrenceville	State GA	Zip 30046	<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					

* 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 \$ 11602³¹

RECEIVED

JUL - 8 2014

WINNEBAGO COUNTY
ELECTIONS

CFC-CCDR 1/14

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name: ABC Direct Last Name: [blank] Address: PO 1485 Address2: [blank] City: Lawrenceville State: GA Zip: 30046	Date: 4/29/14	Occupation: Mail Employer: [blank]	Expenditure Purpose: Mailout <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	Amount Paid: 5717 ⁷³
First Name: Medic Services Last Name: [blank] Address: PO Box 1485 Address2: [blank] City: Lawrenceville State: GA Zip: 30046	Date: 4/30/14	Occupation: Printing Employer: [blank]	Expenditure Purpose: Mailout <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	Amount Paid: 3655 ⁹³
First Name: ABC Direct Last Name: [blank] Address: PO Box 1485 Address2: [blank] City: Lawrenceville State: GA Zip: 30046	Date: 4/30/14	Occupation: Mail Employer: [blank]	Expenditure Purpose: Mailout <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	Amount Paid: 5717 ⁷³
First Name: ABC Last Name: [blank] Address: PO Box 1485 Address2: [blank] City: Lawrenceville State: GA Zip: 30046	Date: 5/15/14	Occupation: Mail Employer: [blank]	Expenditure Purpose: Mailout <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	Amount Paid: 3545 ⁵⁰

* 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 \$ 18636⁵⁹

Public Officer/Candidate/Other Than Candidate Committee Name

John Head

Page 15 of 19

RECEIVED

JUL - 8 2014

CFC-CCDR 1/14

WINNEBAGO COUNTY
ELECTIONS OFFICE

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid	
First Name <i>Medica Services</i>	Date <i>5/16/14</i>	Occupation <i>Printing</i>	Employer	Expenditure Purpose <i>Mailout</i>	Amount Paid <i>2882⁵⁰</i>	
Last Name						
Address <i>PO Box 1485</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	Date <i>5/16/14</i>	Occupation <i>Printing</i>	Employer	Amount Paid <i>1793⁵⁴</i>	
Address2						
City <i>Lawrenceville</i>						
State <i>GA</i>						Zip <i>30046</i>
First Name <i>ABC Direct</i>						
Last Name						
Address <i>PO Box 1485</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	Date <i>5/19/14</i>	Occupation <i>Mail out Payment</i>	Employer	Amount Paid <i>1505²⁹</i>	
Address2						
City <i>Lawrenceville</i>						
State <i>GA</i>						Zip <i>30046</i>
First Name						
Last Name <i>GMC Flexcard</i>						
Address <i>PO Box 1485</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	Date <i>5/20/14</i>	Occupation <i>Election Party</i>	Employer	Amount Paid <i>400⁰⁰</i>	
Address2						
City <i>Lawrenceville</i>						
State <i>GA</i>						Zip <i>30046</i>
First Name <i>Cavanaugh Grill</i>						
Last Name						

* 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 \$ *6581²⁹*

JH Hand

RECEIVED

JUL - 8 2014

CFC-CCDR 1/14

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>Orange Band</i> Last Name		Date <i>5/20/14</i>	Occupation <i>Coach/Singer</i> Employer	<i>Entertainment</i>	<i>300.00</i>
Address <i>50 Victor St.</i> Address2 City <i>Lawrenceville GA</i> State <i>GA</i> Zip <i>30044</i>		<input checked="" type="checkbox"/> Expenditure <input checked="" 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		
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	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	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	Employer		

* 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 \$ *300.00*

Public Officer/Candidate/Other Than Candidate Committee Name

JH [Signature]

RECEIVED

JUL - 8 2011

WINNETT COUNTY ELECTIONS OFFICE

CFC-CCDR 1/14

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 \$, Value at end of reporting period \$, Difference in value \$, Interest Paid Out \$, Cash Dividends \$

Investment Transactions table with columns: Date, Person(s) Involved in Transaction, Value of investment purchased, Value of investment sold, Profit, Loss

2. Investment Name, Account #, 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 table with columns: Date, Person(s) Involved in Transaction, Value of investment purchased, Value of investment sold, Profit, Loss

Total value of investments at beginning of reporting period \$, Total value of investments at end of reporting period \$, Total difference in value \$, Page Total Cash Dividends: \$, Page Total Interest Paid Out: \$, Page Total Profit: \$, Page Total Loss: \$

Jh. Deal

RECEIVED

JUL - 8 2014

GWINNETT COUNTY
ELECTIONS OFFICE

CFC-CCDR 1/14

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.

N/A