

## Campaign Contribution Disclosure Report Ballot Measure 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

<b>1. Report Type</b> (Select One)  <input checked="" type="checkbox"/> Original  <input type="checkbox"/> Amendment  Amendment # _____	<b>2. Name of proposed Constitutional Amendment, Statewide Referendum, or Ballot Question in any County or Municipal Election:</b> Gwinnett County- Approve contract for transit services  _____ _____ (Include county or municipality in case of local ballot question)  Filer ID: _____ (Filer ID that begins with the letter "NC")	Use Earlier of Post Mark or Hand Delivered Date   <div style="border: 1px solid black; width: 100%; height: 20px;"></div>
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**3. Identifying and Contact Information**

(1) Yes to MARTA Committee (2) \_\_\_\_\_  
 Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 743 E. College Ave., Suite B Decatur GA 30030  
 Mailing Address City State Zip Code

(4) \_\_\_\_\_ and/ or schoenbergjh2@gmail.com  
 Primary Contact Phone Number E-Mail

(5) Jeffrey Schoenberg | Jeffrey Schoenberg  
 Name of Committee Chairperson Name of Committee Treasurer

**4. Period for which you are Reporting** Year of Election 2019


**You Must Check Only One Box**

<b>Constitutional Amendment or Statewide Referendum</b>  <input type="checkbox"/> 75 days before Date of Election, _____ (year) <input type="checkbox"/> 45 days before Date of Election, _____ (year) <input type="checkbox"/> 15 days before Date of Election, _____ (year) <input type="checkbox"/> Prior to December 31, _____ (year)	<b>County or Municipal Ballot Question</b>  <input checked="" type="checkbox"/> 15 days before Date of Election, <u>2019</u> (year) <input type="checkbox"/> Prior to December 31, _____ (year)
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State of Georgia County of DeKalb

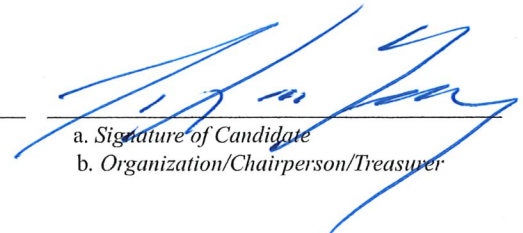
I Jeffrey Schoenberg, being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on 3/8, 20 19



Signature of Notary Public

Bryce E Farbstein  
 NOTARY PUBLIC  
 DeKalb County, GEORGIA  
 My Commission Expires 12/03/2022  
 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.)

RECEIVED  
 GWINNETT COUNTY  
 ELECTIONS OFFICE  
 2019 MAR 11 PM 6:43

**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.	0	0
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	0	20,000
3a	All loans received this reporting period.		0
3b	Interest earned on campaign account this reporting period.		0
3c	Total amount of investments sold this reporting period.		0
3d	Total amount of cash dividends and interest paid out this reporting period.		0
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	236
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	0	20,236
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	0	20,236

**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	0
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	0	11,616.12
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	134.27
11	Total expenditures reported this period. (Line 9 + 10)	0	11,750.39
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	0	11,750.39

**INVESTMENTS**

13	Total value of investments held at the beginning of this reporting period.		0
14	Total value of investments held at the end of this reporting period.		0

**TOTAL NET BALANCE ON HAND**

15	Net balance on hand. (Line 6 - 12 + 14)	0	8,485.61
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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*: <u>March 19, 2019</u> Election Year: <u>2019</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	0
3	Deferred payment of expenses this reporting period	0
4	Payments made on loans this reporting period.	0
5	Credits received on loans this reporting period	0
6	Payments this reporting period on previously deferred expenses.	0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	0
Election Cycle*: <u>March 19, 2019</u> Election Year: <u>2019</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	0
3	Deferred payment of expenses this reporting period	0
4	Payments made on loans this reporting period.	0
5	Credits received on loans this reporting period	0
6	Payments this reporting period on previously deferred expenses.	0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	0
Election Cycle*: <u>March 19, 2019</u> Election Year: <u>2019</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	0
3	Deferred payment of expenses this reporting period	0
4	Payments made on loans this reporting period.	0
5	Credits received on loans this reporting period	0
6	Payments this reporting period on previously deferred expenses.	0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	0

\* 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	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name / Business Name Sierra Club Georgia PAC -  Last Name - Independent Committee  Address  Address2  City Decatur  State GA  Zip  Aff. Comm.	Date 01/28/2019   <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 checked="" 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. 20,000	Est. Value   Description
First Name / Business Name  Last Name  Address  Address2  City  State  Zip  Aff. Comm.	Date   <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 / Business Name  Last Name  Address  Address2  City  State  Zip  Aff. Comm.	Date   <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 \$ 20,000 \$ 0

### 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      Zip	
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      Zip	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total    \$ 0	

\* 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 Best Print and Design		Date 02/01/2019	Occupation	Printing- Brochures and Flyers	430.92
Last Name					
Address 4187-B Snapfinger Woods Dr.		<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		
Address2					
City Decatur					
State GA	Zip 30035				
First Name Marlon		Date 02/01/2019	Occupation Co-Chair	Co-sponsorship, Public Information Event	166.08
Last Name Allen					
Address P.O. Box 814		<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" 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 Go Gwinnett		
Address2					
City Lawrenceville					
State GA	Zip 30046				
First Name Best Print and Design		Date 02/06/2019	Occupation	Printing- Yard Signs	819.00
Last Name					
Address 4187-B Snapfinger Woods Dr.		<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		
Address2					
City Decatur					
State GA	Zip 30035				

Page Total \$ 1,416.00

\* 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>Juniperus, LLC</b> Last Name Address <b>216 14th St. NW, Suite C</b> Address2 City <b>Atlanta</b> State <b>GA</b> Zip <b>30318</b>	Date <i>02/11/2019</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 <b>Communications Consultant</b> Employer Employer	<i>Communications</i>	<b>525.60</b>
First Name <b>Run the Reagan, Inc.</b> Last Name Address <b>3274 Stone Mountain Highway</b> Address2 City <b>Snellville</b> State <b>GA</b> Zip <b>30078</b>	Date <b>02/09/2019</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	Occupation Employer Employer	<i>Sponsorship</i>	<b>150.00</b>
First Name <b>Best Print and Design</b> Last Name Address <b>4187-B Snapfinger Woods Dr.</b> Address2 City <b>Decatur</b> State <b>GA</b> Zip <b>30035</b>	Date <b>02/14/2019</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	Occupation Employer Employer	<i>Printing Brochures</i>	<b>864.00</b>
First Name <b>Jason</b> Last Name <b>Lathbury</b> Address <b>Requested</b> Address2 City <b>Requested</b> State Zip	Date <b>02/16/2019</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	Occupation <b>Web Services</b> Employer Self	<i>Website Design</i>	<b>180.00</b>

\* 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 \$ 1,719.60

## 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 Juniperus, LLC Last Name Address 216 14th St. NW Address2 Suite C City Atlanta State GA      Zip 30318	Date 02/19/2019 <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	Communications	272.50
First Name Sierra Club of Georgia Last Name Address 743 E. College Ave. Address2 Suite B City Decatur State GA      Zip 30030	Date 02/19/2019 <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	Field Services	5,000.00
First Name Staples, Inc. Last Name Address 500 Staples Drive Address2 City Framingham State MA      Zip 01702	Date 02/27/2019 <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	Office Supplies	169.11

Page Total \$ 5,411.61

\* 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**  
**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 Lincoln Fill Station and Home Brew		Date 02/28/2019	Occupation	Public Information Event	204.91
Last Name		<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		
Address 2280 Henry Clower Blvd					
Address2					
City Snellville					
State GA	Zip 30078				
First Name Best Print and Design		Date 03/04/2019	Occupation	Printing	864.00
Last Name		<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		
Address 4187-B Snapfinger Woods Dr.					
Address2					
City Decatur					
State GA	Zip 30035				
First Name Facebook, Inc.		Date 03/04/2019	Occupation	Advertising	750.00
Last Name		<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		
Address 1 Hacker Way					
Address2					
City Menlo Park					
State CA	Zip 94025				

Page Total \$ 1,818.91

\* 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 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 Facebook, Inc. <hr/> Last Name <hr/> Address 1 Hacker Way <hr/> Address2 <hr/> City Menlo Park <hr/> State CA      Zip 94025	Date 03/08/2019 <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 <hr/> Employer	Advertising	750.00
First Name QT Corp. <hr/> Last Name <hr/> Address 4340 Bells Ferry Rd. <hr/> Address2 <hr/> City Kennesaw <hr/> State GA      Zip 30144	Date 03/08/2019 <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 <hr/> Employer	Gas Expenses- Field Services	500.00
First Name <hr/> Last Name <hr/> Address <hr/> Address2 <hr/> City <hr/> 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 <hr/> Employer	Advertising	

Page Total \$ 1,250.00

\* 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>	Account #
Institution/Person Holding Account _____ Mailing Address <u>743 E. College Ave., Suite B</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>	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					
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>0</u>
<u>Total value of investments at end of reporting period \$</u>	Page Total Interest Paid Out: \$ <u>0</u>
<u>Total difference in value \$</u>	Page Total Profit: \$ <u>0</u>
	Page Total Loss: \$ <u>0</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.