

Georgia Government Transparency & Campaign Finance Commission
 REGISTRATION FORM FOR A COMMITTEE OTHER THAN A CANDIDATE'S
FORM RO

2015 MAY 21 A 11:25 *AAA*

INCOMPLETE FORMS WILL NOT BE PROCESSED • If form is handwritten, it must be legible.

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| 1 | Today's Date: <u>5/21/2015</u> | Registration Year: <u>2015</u> | <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amended |
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| 2 | Type of Committee (check one): <input type="checkbox"/> Political Party <input type="checkbox"/> Political Action Committee <input type="checkbox"/> Statewide Referendum <input type="checkbox"/> Individual <input type="checkbox"/> Independent Committee <input type="checkbox"/> Constitutional Amendment <input type="checkbox"/> Corporation <input type="checkbox"/> Recall Committee (Provide information below) <input checked="" type="checkbox"/> County or Municipal Ballot Question _____ Public Officer _____ Office Held _____ Year Of Last Election | | |
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| 3 | Committee (Full Name): <u>2017-2022 Education SPLOST Renewal Committee</u> Address: <u>P.O. Box 492139</u> <u>Lawrenceville, GA 30049-0036</u> City, State, Zip: Telephone Number (optional): _____ Email: _____ | | |
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| 4 | Committee Affiliation (if any): _____ | | |
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| 5 | Chairperson (full name): <u>Sean Murphy</u> Address: <u>3316 Bagley Passage</u> <u>Duluth, GA 30097-3789</u> Email: <u>seanmurphy295@gmail.com</u> City, State, Zip: | | |
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| 6 | Treasurer (full name): <u>Norwood Davis</u> Address: <u>1554 Chadwick Point Ct.</u> <u>Lawrenceville, GA 30043-7002</u> Email: <u>norwood.davis@gmail.com</u> City, State, Zip: | | |
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I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

Michael Leungood
 Signature of Person Registering Committee

5/21/2015
 Date