

Campaign Contribution Disclosure Report

Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1416 West Tower | Atlanta, GA 30334 | 404-463-1980 | www.ethics.ga.gov

1. Report Type (Select One)	2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought <u>Muscogee County District 7 City Council</u> (Include county, municipality, district, post or judicial seat)	Use Earlier of Post Mark or Hand-Delivered Date <i>flor</i>
<input checked="" type="checkbox"/> Original	Filer ID (Filer ID that begins with the letter "C")	
<input type="checkbox"/> Amendment	Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee To Elect Chris Kelley</u>	
Amendment # _____	Filer ID: (Filer ID that begins with the letter "NC")	<u>113120</u>

3. Identifying and Contact Information

(1) <u>Chris Kelley</u>	(2) <u>December 26, 2025</u>		
<i>Full Name of Candidate or Other Than Candidate Campaign Committee Name</i> <u>Today's Date</u>			
(3) <u>1111 33rd Street Apt A</u>	<u>Columbus</u>	<u>GA</u>	<u>31904</u>
<i>Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
(4) <u>706-326-8057</u>	and/ or <u>electchriskelley@gmail.com</u>		
<i>Primary Contact Phone Number</i>	<i>E-Mail</i>		
(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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(6) If yes, is the committee registered with the Commission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(7) If yes, complete the following: <u>Shameika Averett</u> <i>Name of Committee Chairperson</i>		<u>Christina Barnes</u> <i>Name of Committee Treasurer</i>	

4. Period for which you are Reporting

You Must Check Only One Box

My Non-Election Year	My Election Year	Run-Offs (Report required only if you are in a Run-Off Election)	Special Election
<input type="checkbox"/> June 30, _____ (year) <input checked="" type="checkbox"/> December 31, <u>2025</u> (year)	<input type="checkbox"/> January 31, _____ (year) <input type="checkbox"/> April 30, _____ (year) <input type="checkbox"/> June 30, _____ (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)
Supplemental Reporting			
<input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)			

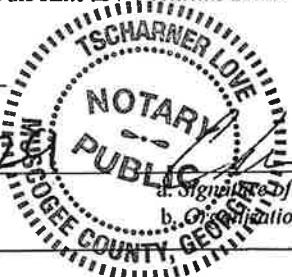
*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34.

State of GEORGIACounty of MUSCOGEE

I, CHRISTOPHER WILLIAM KELLEY, 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 January 3, 2024Ischarner Rose

Signature of Notary Public

Sept. 19, 2024
Commission Expiration

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

CFC-CCDR 10/19

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.		10,436.00
3a	All loans received this reporting period.		0
3b	Interest earned on campaign account this reporting period.		
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.		
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		10,436.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		10,436.00
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
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		4,926.72
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)		4,926.72
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		4,926.72
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)		5,509.28

* 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.

Chris Kelley

Public Officer/Candidate/Other Than Candidate Committee Name

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State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

<u>Election Cycle*:</u> <u>GENERAL</u>		<u>Election Year:</u> <u>2026</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
<u>Election Cycle*:</u> _____		<u>Election Year:</u> _____	<u>Amount</u>
1 Outstanding indebtedness at the beginning of this reporting period.			0
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)			
<u>Election Cycle*:</u> _____		<u>Election Year:</u> _____	<u>Amount</u>
1 Outstanding indebtedness at the beginning of this reporting period.			0
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 or Business Name Chris	Date 7/03/25	Occupation		Cash Amt. 100	Est. Value 100.00		
Last Name Kelley			<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				
Address 1111 33rd Street Apt A		Employer	<input type="checkbox"/> Run-Off Special Primary		Description starting bank deposit		
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan						
City Columbus							
State GA	Zip 31904						
Aff. Comm.							
First Name or Business Name Christina	Date 08/04/25	Occupation Secretary		Cash Amt. 2.00	Est. Value 2.00		
Last Name Barnes			<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				
Address 2480 Wise Street		Employer COLGACARE	<input type="checkbox"/> Run-Off Special Primary		Description Test Zelle \$1 Test Paypal \$1		
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan						
City Columbus							
State GA	Zip 31903						
Aff. Comm.							
First Name or Business Name Chris	Date 8/14/25	Occupation		Cash Amt. 25.00	Est. Value 25.00		
Last Name Kelley			<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				
Address 1111 33d Street		Employer			Description Zelle		
Address2 APTA	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan						
City Columbus							
State GA	Zip 31904						
Aff. Comm.							

Itemized Contributions Page Total \$ 127.00 \$ 127.00

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First Name or Business Name Alfie's African Treasures		Date 08/05/2025	Occupation Gift Store	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 100	Est. Value 100.00		
Last Name								
Address 2901 University Ave		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description Zelle		
Address2 Suite 42								
City Columbus		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 500	Est. Value 500		
State GA	Zip 31907							
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 Burgos Consulting Grp			Description Check		
Address 7440 McKee Road								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation CEO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 25	Est. Value 25		
City Upatoi								
State GA	Zip 31829	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Burgos Consulting Grp			Description Paypal		
Aff. Comm.								
First Name or Business Name Sherman		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 100	Est. Value 100		
Last Name Milton								
Address 14632 21st Street		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description Check		
Address2								
City Dade City		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 25	Est. Value 25		
State FL	Zip 33523							
Aff. Comm. smilton3rd@gmail.com		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description Paypal		
First Name or Business Name Wanda								
Last Name Rutledge		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 100	Est. Value 100		
Address 4525 Ridgefield Drive								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description Check		
City Columbus								
State GA	Zip 31907	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation			Description Check		
Aff. Comm.								

Itemized Contributions Page Total \$ 725.00 \$ 852.00

* 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

Chris Kelley

Public Officer/Candidate/Other Than Candidate Committee Name

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CFC-CCDR 10/19

First Name or Business Name Danny	Date 08/19/25	Occupation	Cash Amt. 500	Est. Value 500.00
Last Name Arencribia				
Address 9125 Garrett Lake Drive				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description Check
City Midland	<input type="checkbox"/> In-Kind			
State GA	Zip 31820	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Gail & Pedro	Date 09/01/25	Occupation CEO	Cash Amt. 500	Est. Value 500.00
Last Name Burgos				
Address 7440 McKee Road				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description Check
City Upatoi	<input type="checkbox"/> In-Kind	Burgos		
State GA	Zip 31829	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Carol	Date 9/09/25	Occupation	Cash Amt. 50	Est. Value 50
Last Name Davis				
Address PO Box 3001				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description Check
City Columbus	<input type="checkbox"/> In-Kind			
State GA	Zip 31903	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Crystal & Mark	Date 9/09/25	Occupation	Cash Amt. 100	Est. Value 100
Last Name Lawrence				
Address 15 Richardson Ct				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description Check
City Fortson	<input type="checkbox"/> In-Kind			
State GA	Zip 31808	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
Itemized Contributions Page Total \$ 1,150.00				\$ 2,002.00

* 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)

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Chris Kelley

Public Officer/Candidate/Other Than Candidate Committee Name

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First Name or Business Name WSN Assoc. LLC	Date 9/15/25	Occupation	Cash Amt. 250	Est. Value 250
Last Name				
Address PO BOX 1920				
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description check
City Fortson				
State GA	Zip 31808			
Aff. Comm.				
First Name or Business Name Tyseanna	Date 09/18/25	Occupation	Cash Amt. 10	Est. Value 10
Last Name				
Address tyseanna.walton1012@yahoo.com				
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description Zelle
City Columbus				
State GA	Zip 31903			
Aff. Comm.				
First Name or Business Name Stanley	Date 09/30/25	Occupation	Cash Amt. 250	Est. Value 250
Last Name				
Address				
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description Zelle
City				
State	Zip			
Aff. Comm.				
First Name or Business Name Terry	Date 09/30/25	Occupation	Cash Amt. 100	Est. Value 100.00
Last Name				
Address				
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description Zelle
City				
State	Zip			
Aff. Comm.				
Itemized Contributions Page Total \$ 610.00				\$ 2,612.00

* 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)

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First Name or Business Name Role Model Academy	Date 10/05/25	Occupation	Cash Amt. 60	Est. Value 60.00
Last Name				
Address 2511 Double Churches Road				
Address2 Box 243	<input checked="" type="checkbox"/> Monetary	Employer		
City Fortson	<input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
State GA	Zip 31808			
Aff. Comm.				
First Name or Business Name Tyseanna	Date 10/05/25	Occupation	Cash Amt. 30	Est. Value 30.00
Last Name				
Address tyseanna.walton1012@yahoo.com				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State	Zip			
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Kevin	Date 10/06/25	Occupation	Cash Amt. 50	Est. Value 50.00
Last Name				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State	Zip			
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Anonymous	Date 10/6/25	Occupation	Cash Amt. 500	Est. Value 500.00
Last Name				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State	Zip			
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
Itemized Contributions Page Total \$ 640.00				\$ 3,252.00

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

** Election Cycle (Primary, General, Specinl, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)

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First Name or Business Name Anonymous		Date 10/6/25	Occupation	Cash Amt. 500	Est. Value 500.00	
Last Name						
Address						
Address2		<input checked="" type="checkbox"/> Monetary	Employer		Description Zelle	
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name B A		Date 10/6/25	Occupation	Cash Amt. 50	Est. Value 50	
Last Name Hart						
Address PO Box 212						
Address2		<input checked="" type="checkbox"/> Monetary	Employer		Description Check	
City Columbus		<input type="checkbox"/> In-Kind				
State	Zip GA 31901	<input type="checkbox"/> Common Source				
		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name Juanita		Date 10/6/25	Occupation	Cash Amt. 30	Est. Value 30	
Last Name Upshaw Taylor						
Address 2364 Paddy Ave						
Address2		<input checked="" type="checkbox"/> Monetary	Employer		Description Check	
City Columbus		<input type="checkbox"/> In-Kind				
State	Zip GA 31903	<input type="checkbox"/> Common Source				
		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name Sherletha		Date 10/6/25	Occupation	Cash Amt. 200	Est. Value 200	
Last Name Thomas Cutts						
Address 3 Penhurts Court						
Address2		<input checked="" type="checkbox"/> Monetary	Employer		Description Check	
City Columbus		<input type="checkbox"/> In-Kind				
State	Zip GA 31907	<input type="checkbox"/> Common Source				
		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
				780.00	\$ 4,032.00	
Itemized Contributions Page Total \$ 4,032.00						

* 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

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First Name or Business Name Crystal & Mark	Date 10/06/25	Occupation	Cash Amt. 100	Est. Value 100
Last Name Lawrence				
Address 15 Richardson Ct				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description Check
City Fortson	<input type="checkbox"/> In-Kind			
State GA	Zip 31808	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name David & Tammy	Date 10/06/25	Occupation	Cash Amt. 150	Est. Value 150
Last Name Stallion				
Address 5365 Westwood Drive				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description Check
City Columbus	<input type="checkbox"/> In-Kind			
State GA	Zip 31907	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Peaceful Rivers Res.	Date 10/06/25	Occupation	Cash Amt. 1000	Est. Value 1000
Last Name				
Address 738 Rudgate Road				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description Check
City Columbus	<input type="checkbox"/> In-Kind			
State GA	Zip 31904	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Anonymous	Date 10/06/25	Occupation	Cash Amt. 49	Est. Value 49
Last Name				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Description Cash
City	<input type="checkbox"/> In-Kind			
State	Zip	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
Itemized Contributions Page Total				1,299.00 \$ 5,331.00

* 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)

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Public Officer/Candidate/Other Than Candidate Committee Name

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First Name or Business Name Shaland		Date 10/10/25	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 25	Est. Value 25.00
Address						
Address2	<input checked="" type="checkbox"/> Monetary	Employer				Description Zelle
City	<input type="checkbox"/> In-Kind					
State Zip	<input type="checkbox"/> Common Source					
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan					
First Name or Business Name John		Date 10/24/25	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 1500	Est. Value 1,500.00
Last Name Pezold	Address 600 Brookstone Centre Pkwy					
Address2	<input checked="" type="checkbox"/> Monetary	Employer				Description Check
City Columbus	<input type="checkbox"/> In-Kind					
State Zip	<input type="checkbox"/> Common Source					
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan					
First Name or Business Name Tracey		Date 10/24/25	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 1000	Est. Value 1,000.00
Last Name Sayers	Address					
Address2	<input checked="" type="checkbox"/> Monetary	Employer				Description Check
City	<input type="checkbox"/> In-Kind					
State Zip	<input type="checkbox"/> Common Source					
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan					
First Name or Business Name		Date	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.	Est. Value
Last Name	Address					
Address2	<input type="checkbox"/> Monetary	Employer				Description
City	<input type="checkbox"/> In-Kind					
State Zip	<input type="checkbox"/> Common Source					
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan					

* 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

If any such person(s) shall have a necessary relationship to the training of an employee.

Public Officer/Candidate/Other Than Candidate Committee Name

Chris Kelley

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CFC-CCDR 10/19

First Name or Business Name Vanessa	Date 11/02/25	Occupation	Cash Amt. 30	Est. Value 30.00
Last Name Roberts				
Address vjandoz@mchsi.com				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Royal	Date 11/15/25	Occupation	Cash Amt. 100	Est. Value 100.00
Last Name Anderson				
Address 4716 St. Francis Ave				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Columbus	<input type="checkbox"/> In-Kind			
State GA Zip 31904	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Crystal & Mark	Date 11/15/25	Occupation	Cash Amt. 100	Est. Value 100.00
Last Name Lawrence				
Address 15 Richardson Ct				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Fortson	<input type="checkbox"/> In-Kind			
State GA Zip 31808	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Vincent	Date 11/15/25	Occupation	Cash Amt. 100	Est. Value 100.00
Last Name Miller				
Address 7716 Coppice Drive				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Midland	<input type="checkbox"/> In-Kind			
State GA Zip 31820	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
Itemized Contributions Page Total \$ 330.00				\$ 8,186.00

* 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

Chris Kelley

Public Officer/Candidate/Other Than Candidate Committee Name

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CFC-CCDR 10/19

First Name or Business Name Helen	Date 11/15/25	Occupation	Cash Amt. 200	Est. Value 200
Last Name Turner				
Address 122 Joseph Ct				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Fortson	<input type="checkbox"/> In-Kind			
State GA	Zip 31808	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Curtis	Date 11/15/25	Occupation	Cash Amt. 200	Est. Value 200
Last Name Crocker				
Address 8230 Midland Trl				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Columbus	<input type="checkbox"/> In-Kind			
State GA	Zip 31909	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Felecia	Date 11/15/25	Occupation	Cash Amt. 50	Est. Value 50
Last Name Cienfuegos				
Address 5823 Wiltshire Drive				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Columbus	<input type="checkbox"/> In-Kind			
State GA	Zip 31909	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Carol Ann	Date 11/15/25	Occupation	Cash Amt. 50	Est. Value 50
Last Name Davis				
Address PO Box 3001				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Columbus	<input type="checkbox"/> In-Kind			
State GA	Zip 31903	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
Itemized Contributions Page Total \$ 500				\$ 8,686.00

* 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

Chris Kelley

Public Officer/Candidate/Other Than Candidate Committee Name

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CFC-CCDR 10/19

First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Tonya	11/15/25		50	50
Last Name Dobbins				Description
Address 115 Leather Fern Way				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Frederick	<input type="checkbox"/> In-Kind			
State MD	Zip 21702	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Juanita	Date 11/15/25	Occupation	Cash Amt.	Est. Value
Last Name Upshaw-Taylor			50	50.00
Address 2364 Paddy Ave				Description
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Check
City Columbus	<input type="checkbox"/> In-Kind			
State GA	Zip 31903	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Reginald & Valerie	Date 11/15/25	Occupation	Cash Amt.	Est. Value
Last Name Thompson			250	250.00
Address 8031 Barton Drive				Description
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Check
City Midland	<input type="checkbox"/> In-Kind			
State GA	Zip 31820	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Ann	Date 11/15/25	Occupation	Cash Amt.	Est. Value
Last Name Caggins			300	300.00
Address 107 Otter Court				Description
Address2	<input checked="" type="checkbox"/> Monetary	Employer		Check
City Midland	<input type="checkbox"/> In-Kind			
State GA	Zip 31820	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
Itemized Contributions Page Total \$ 650				9,336.00

* 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

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First Name or Business Name Tromix Inc	Date 11/15/25	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 500	Est. Value 500.00
Last Name Holiday Inn Express					
Address 3901 Victory Drive					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Columbus	<input type="checkbox"/> In-Kind				
State GA	Zip 31903	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
Aff. Comm.					
First Name or Business Name Marie	Date 11/15/25	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 50	Est. Value 50.00
Last Name Brooks					
Address 1848 Pine Valley Court					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Columbus	<input type="checkbox"/> In-Kind				
State GA	Zip 31907	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
Aff. Comm.					
First Name or Business Name Suhail	Date 11/15/25	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 50	Est. Value 50
Last Name Khouri					
Address suhail400@gmail.com					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
Aff. Comm.					
First Name or Business Name Alfie's African Treasures	Date 11/17/25	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 50	Est. Value 50
Last Name					
Address 2901 University Ave					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Columbus	<input type="checkbox"/> In-Kind				
State GA	Zip 31907	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
Aff. Comm. christina barnes					
Itemized Contributions Page Total				650	\$ 9,986.00

* 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

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Public Officer/Candidate/Other Than Candidate Committee Name

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CFC-CCDR 10/19

First Name or Business Name Stanley	Date 11/17/25	Occupation	Cash Amt. 100	Est. Value 100
Last Name Wright				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Fredrick	Date 11/17/25	Occupation	Cash Amt. 100	Est. Value 100
Last Name Hill				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Stanley	Date 11/17/25	Occupation	Cash Amt. 15	Est. Value 15
Last Name Wright				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Barbara	Date 11/17/25	Occupation	Cash Amt. 15	Est. Value 15
Last Name Gauthier				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
Itemized Contributions Page Total				230 \$ 10,216.00

* 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

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First Name or Business Name Anonymous	Date 12/1/25	Occupation	Cash Amt.	Est. Value 95
Last Name				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name Angela	Date 12/10/25	Occupation	Cash Amt.	Est. Value 125
Last Name Kimbrough				
Address				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Last Name				
Address				
Address2	<input type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Last Name				
Address				
Address2	<input type="checkbox"/> Monetary	Employer		
City	<input type="checkbox"/> In-Kind			
State Zip	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan			
220.00				\$ 10,436
Itemized Contributions Page Total \$ 10,436				

* 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

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.) N/A	1. N/A	First Name N/A	1. N/A
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 \$ <u>N/A</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

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 DELUXE CHECK	Date 7/15/25	Occupation	paper checks	
Last Name				25.12
Address	<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				
State	Zip			
First Name Brittany	Date 08/20/25	Occupation	Logos	
Last Name Ashcole				52.50
Address	<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				
State	Zip			
First Name Brittany	Date 08/21/25	Occupation	Logos	
Last Name Ashcole				104.99
Address	<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				
State	Zip			

182.61Page Total \$ **182.61**

* 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

CFC-CCDR 10/19

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Wristband.com	Date 9/10/25	Occupation	Wristbands	
Last Name				162.24
Address 16107 Kensington Dr Ste 172	<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	Employer		
Address2				
City Sugar Land	<input type="checkbox"/> Investment			
State TX	Zip 77479			
First Name Justmyne Designs	Date 9/22/25	Occupation	Campaign T-Shirts	
Last Name				392.40
Address 1965 S Lumpkin Rd	<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	Employer		
Address2				
City Columbus	<input type="checkbox"/> Investment			
State GA	Zip 31903			
First Name Balloons & Sweets Events Planning	Date 9/22/25	Occupation	Decorations for Fundraiser: Linen, balloons, centerpieces and seat covers	
Last Name Tiffany Doolittle				159.00
Address 75 Lee Rd 746	<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	Employer		
Address2				
City Salem	<input type="checkbox"/> Investment			
State AL	Zip 36874			
First Name Balloons & Sweets Events Planning	Date 10/02/25	Occupation	Decorations for Fundraiser: Linen, balloons, centerpieces and seat covers	
Last Name Tiffany Doolittle				209.28
Address 75 Lee Rd 746	<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	Employer		
Address2				
City Salem	<input type="checkbox"/> Investment			
State AL	Zip 36874			

* 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 Chris Kelley Page Total \$ 992.92

CFC-CCDR 10/19

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Office Depot	Date 10/3/25	Occupation	Printing Flyers	
Last Name				40.32
Address 5300 Sidney Simons Blvd	<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	Employer		
Address2	<input type="checkbox"/> Investment			
City Columbus				
State GA	Zip 31904			
First Name Balloons & Sweets Events Planning	Date 10/03/25	Occupation	Decorations for Fundraiser: Linen, balloons, centerpieces and seat covers	
Last Name Tiffany Doolittle				159.00
Address 75 Lee Rd 746	<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	Employer		
Address2	<input type="checkbox"/> Investment			
City Salem				
State AL	Zip 36874			
First Name DLG Print & Design	Date 10/3/25	Occupation	Banner	
Last Name				225.00
Address 715 9th Avenue Ste H	<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	Employer		
Address2	<input type="checkbox"/> Investment			
City Columbus				
State GA	Zip 31901			
First Name DLG Print & Design	Date 10/06/25	Occupation	rectractable banner	
Last Name				200
Address 715 9th Avenue Ste H	<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	Employer		
Address2	<input type="checkbox"/> Investment			
City Columbus				
State GA	Zip 31901			

* 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 \$ 624.32

CFC-CCDR 10/19

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Rolemodel Academy	Date 10/20/25	Occupation	Sponsorship	
Last Name				25.00
Address PO Box 243	<input 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		
Address2				
City Fortson				
State GA	Zip 31808			
First Name Rolemodel Academy	Date 10/20/25	Occupation	Sponsorship	
Last Name				25.00
Address PO Box 243	<input 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		
Address2				
City Fortson				
State GA	Zip 31808			
First Name Ryan	Date 10/27/25	Occupation	Flyers	
Last Name Hardman				40.00
Address Hardmanstyle Media	<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		
Address2				
City Columbus				
State GA	Zip			
First Name Unfurl LLC	Date 10/27/25	Occupation	Sponsorship	
Last Name				237.3
Address 5443 Armour Rd	<input 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		5
Address2 609				
City Columbus				
State GA	Zip 31909			

* 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 Chris Kelley Page Total \$ 327.35

CFC-CCDR 10/19

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Walmart	Last Name	Date 10/27/25	Occupation	Candy for fall festival	
Address		<input 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	Employer		23.47
Address2					
City					
State	Zip	<input type="checkbox"/> Investment			
First Name Justmyne Designs	Last Name	Date 10/27/25	Occupation	Campaign T-Shirts	
Address 1965 S Lumpkin Rd		<input 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	Employer		100.71
Address2					
City Columbus					
State	Zip 31903	<input type="checkbox"/> Investment			
First Name Columbus Jazz Society	Last Name	Date 10/30/25	Occupation	Sponsorship	
Address		<input 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	Employer		450.00
Address2					
City					
State	Zip	<input type="checkbox"/> Investment			
First Name Walmart	Last Name	Date 10/30/25	Occupation	Giftcards for Fall Festival - Oakland Park	
Address		<input 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	Employer		50.90
Address2					
City					
State	Zip	<input type="checkbox"/> Investment			

* 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 \$ 625.08

CFC-CCDR 10/19

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name DGL Print & Design	Date 11/14/25	Occupation	Banner & auto Magnet	
Last Name				348.80
Address	<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	Employer		
Address2				
City				
State Zip	<input type="checkbox"/> Investment			
First Name Chris	Date 11/18/23	Occupation	Reimbursement for PO box	
Last Name Kelley				123.00
Address 1111 33rd Street	<input checked="" 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	Employer		
Address2 Apt A				
City Columbus				
State Zip GA 31904	<input type="checkbox"/> Investment			
First Name Jack & Jill of America Inc	Date 11/18/25	Occupation	Sponsorship	
Last Name				189.29
Address PO Box 6908	<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	Employer		
Address2				
City Columbus				
State Zip GA 31917	<input type="checkbox"/> Investment			
First Name Band/ Video	Date 11/17/25	Occupation	Band & DJ for Fundraiser & Videographer	
Last Name				575.00
Address	<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	Employer		
Address2				
City				
State Zip	<input type="checkbox"/> Investment			

* 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 \$ 1,236.09

CFC-CCDR 10/19

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Walmart	Date 11/24/25	Occupation	Giftcard- Thanksgiving giveaway - Spencer High	
Last Name				152.9 2
Address	<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	Employer		
Address2				
City				
State Zip	<input type="checkbox"/> Investment			
First Name My Black Has a Purpose	Date 12/08/25	Occupation	Christmas Program Sponsor	
Last Name				250.0 0
Address	<input 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		
Address2				
City				
State Zip				
First Name Junior League of Columbus	Date 12/11/25	Occupation	Halloween Gift bags	
Last Name				100
Address 1240 Wynnton Rd	<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		
Address2				
City Columbus				
State GA Zip 31906				
First Name Omega Psi Phi - Gala	Date 12/17/25	Occupation	New Years Eve Gala - Sponsor	
Last Name				418.0 8
Address	<input 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		
Address2				
City				
State Zip				

* 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 \$ 921.00

CFC-CCDR 10/19

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name PAYPAL		Date 12/26/25/	Occupation Employer	Paypal Fees	
Last Name					
Address		<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		
Address2					
City					
State	Zip				
First Name		Date	Occupation Employer		
Last Name					
Address		<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		
Address2					
City					
State	Zip				
First Name		Date	Occupation Employer		
Last Name					
Address		<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		
Address2					
City					
State	Zip				
First Name		Date	Occupation Employer		
Last Name					
Address		<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		
Address2					
City					
State	Zip				

* 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 Chris Kelley Page Total \$ 17.35

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

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