

Campaign Contribution Disclosure Report State Ethics Commission

200 Piedmont Avenue S.E. | Suite 1416 West Tower | Atlanta, GA 30334 | 404-463-1988 www.ethics.ga.gov

| | | |
|--|--|---|
| 1. Report Type (Select One) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment Amendment # _____ | 2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought <u>Mayor of Columbus, GA</u> <small>(Include county, municipality, district, post or judicial seat)</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: _____ | Use Earlier of Post Mark or Hand-Delivered Date <u>Slave</u> <div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div> |
|--|--|---|

3. Identifying and Contact Information

(1) Committee to Elect Joanne Loge (2) 2/2/2020
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) PO Box 722 Columbus GA 31902
Mailing Address City State Zip Code

(4) 706-478-7579 and/or logeforColumbus@gmail.com
Primary Contact Phone Number E-Mail

(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? ☒ Yes ☐ No

(6) If yes, is the committee registered with the Commission? ☒ Yes ☐ No

(7) If yes, complete the following: Joanne Loge | Stephanie McPherson
Name of Committee Chairperson Name of Committee Treasurer

4. Period for which you are Reporting

You Must Check Only One Box

| Supplemental Reporting | Filing Schedule | Run-Offs <small>(Report required only if you are in a Run-Off Election)</small> | Special Election |
|--|--|--|--|
| <input type="checkbox"/> January 31, _____ (year) <input type="checkbox"/> April 30, _____ (year) <input type="checkbox"/> July 31, _____ (year) <input type="checkbox"/> October 20, _____ (year) <small>*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34i</small> | <input checked="" type="checkbox"/> January 31, <u>2020</u> (year) <input type="checkbox"/> April 30, _____ (year) <input type="checkbox"/> July 31, _____ (year) <input type="checkbox"/> October 20, _____ (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 General Run-off, _____ (year) | <input type="checkbox"/> 15 days before Special Primary, _____ (year) <input type="checkbox"/> 15 days before Special General, _____ (year) <input type="checkbox"/> Dec. 31, _____ (year) |

State of Georgia County of Muscogee

I, Stephanie McPherson, 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 February 2, 2020

Stephanie McPherson
Signature of Notary Public

Sept. 19, 2029
Commission Expiration

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

Committee to Elect Joanne Loge

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. | | 60,699.99 |
| 3 | Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page. | | 21,550.00 |
| 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 |
| 5 | Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4) | | 21,550.00 |
| 6 | Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5) | | 88,249.99 |

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. | | 31,508.49 |
| 9 | Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page. | | 10,430.21 |
| 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 |
| 11 | Total expenditures reported this period. (Line 9 + 10) | | 10,430.21 |
| 12 | Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11) | | 42,004.70 |

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) | | 46,245.29 |
|----|--|--|-----------|

* 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.

Committee to Elect Joanne Cogle

Public Officer/Candidate/Other Than Candidate Committee Name

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State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

| Election Cycle*: <u>Primary 2026</u> Election Year: <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 |
| Election Cycle*: _____ Election Year: _____ | | <u>Amount</u> |
| 1 | Outstanding indebtedness at the beginning of this reporting period. | |
| 2 | Loans received this reporting period. | |
| 3 | Deferred payment of expenses this reporting period | |
| 4 | Payments made on loans this reporting period. | |
| 5 | Credits received on loans this reporting period | |
| 6 | Payments this reporting period on previously deferred expenses. | |
| 7 | Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6) | |
| Election Cycle*: _____ Election Year: _____ | | <u>Amount</u> |
| 1 | Outstanding indebtedness at the beginning of this reporting period. | |
| 2 | Loans received this reporting period. | |
| 3 | Deferred payment of expenses this reporting period | |
| 4 | Payments made on loans this reporting period. | |
| 5 | Credits received on loans this reporting period | |
| 6 | Payments this reporting period on previously deferred expenses. | |
| 7 | Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6) | |

* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)
 Public Officer/Candidate/Other Than Candidate Committee Name _____

State of Georgia

Campaign Contribution Disclosure Report

Itemized Contributions

Must list contributions received by a single contributor for which the aggregate total more than \$100.00.
 Note: Loans are no longer reported in "Itemized Contributions" section. See Loan Reporting section below.

| Full Name of Contributor Mailing Address (Affiliation of Committee if any) | Contributor | | Election Cycle** | Cash Amount | In-Kind Contributions |
|--|--|------------------------------|---|-----------------------------|--------------------------|
| | Received Date Contribution Type* | Occupation & Employer | | | Estimated Value |
| | | | | | Description |
| First Name or Business Name Elizabeth | Date 1/6/2026 | Occupation retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 1000.00 | Est. Value |
| Last Name Ogee | | | | | |
| Address 6940 Hilltop Ct | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary | Employer retired | | | Description |
| City Columbus | <input type="checkbox"/> In-Kind | | | | |
| State GA | <input type="checkbox"/> Common Source | | | | |
| Zip 31904 | <input type="checkbox"/> Credit Received on Loan | | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name Billy | Date 1/6/2026 | Occupation retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 100.00 | Est. Value |
| Last Name Cunningham | | | | | |
| Address 6600 Waterford Rd | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary | Employer retired | | | Description |
| City Columbus | <input type="checkbox"/> In-Kind | | | | |
| State GA | <input type="checkbox"/> Common Source | | | | |
| Zip 31904 | <input type="checkbox"/> Credit Received on Loan | | | | |
| Aff. Comm. | | | | | |
| First Name or Business Name Charles | Date 1/6/2026 | Occupation retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 1000.00 | Est. Value |
| Last Name Johnson | | | | | |
| Address 7179 Standing Boy Rd | | | | | |
| Address2 | <input checked="" type="checkbox"/> Monetary | Employer retired | | | Description |
| City Columbus | <input type="checkbox"/> In-Kind | | | | |
| State GA | <input type="checkbox"/> Common Source | | | | |
| Zip 31904 | <input type="checkbox"/> Credit Received on Loan | | | | |
| Aff. Comm. | | | | | |

Itemized Contributions Page Total \$ **2100.00** \$ **0**

| | | | | | | |
|---|--|----------------------------------|----------------------------|---|--|---------------------|
| First Name or Business Name John | | Date 1/14/2026 | Occupation Owner | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 250.00 | Est. Value |
| Last Name Teeples | | Employer Self employed | | | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | |
| Address 1547 16th Ave | | | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | |
| Address2 | | City Columbus | | State GA | | Zip 31901 |
| Aff. Comm. | | City Columbus | | State GA | | Zip 31906 |
| Aff. Comm. | | City Columbus | | State GA | | Zip 31904 |
| First Name or Business Name John | | Date 1/14/2026 | Occupation Owner | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 500.00 | Est. Value |
| Last Name Thayer, Sr | | Employer Self employed | | | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | |
| Address 1812 Carter Ave | | | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | |
| Address2 | | City Columbus | | State GA | | Zip 31906 |
| Aff. Comm. | | City Columbus | | State GA | | Zip 31904 |
| Aff. Comm. | | City Columbus | | State GA | | Zip 31904 |
| First Name or Business Name Garrard | | Date 1/14/2026 | Occupation Owner | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 500.00 | Est. Value |
| Last Name Gunby | | Employer Self employed | | | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | |
| Address 6001 River Rd, Ste 100 | | | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | |
| Address2 | | City Columbus | | State GA | | Zip 31904 |
| Aff. Comm. | | City Columbus | | State GA | | Zip 31904 |
| Aff. Comm. | | City Columbus | | State GA | | Zip 31904 |
| First Name or Business Name Committee to Elect Byron | | Date 1/14/2026 | Occupation n/a | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 2000.00 | Est. Value |
| Last Name Hickey | | Employer n/a | | | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | |
| Address 532 Honolulu Dr | | | | <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | |
| Address2 | | City Columbus | | State GA | | Zip 31904 |
| Aff. Comm. | | City Columbus | | State GA | | Zip 31904 |
| Aff. Comm. | | City Columbus | | State GA | | Zip 31904 |
| Itemized Contributions Page Total \$ 3250.00 \$ 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

| | | | | | | |
|---|--------------|--|---------------------------------------|---|-----------------------------|-------------|
| First Name or Business Name Marty | | Date 1/9/2026 | Occupation Retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 1000.00 | Est. Value |
| Last Name Flournoy | | | | | | |
| Address 2520 Wynnton Rd | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | | Description |
| City Columbus | | <input type="checkbox"/> In-Kind | Retired | | | |
| State GA | Zip 31906 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Alfred | | Date 1/7/2026 | Occupation Board Member | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 100.00 | Est. Value |
| Last Name Hayes, Jr | | | | | | |
| Address 5805 Warwick Pl | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | | Description |
| City Columbus | | <input type="checkbox"/> In-Kind | Southern States Bank | | | |
| State GA | Zip 31904 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Jennifer | | Date 1/9/2026 | Occupation Broker | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 200.00 | Est. Value |
| Last Name Flournoy | | | | | | |
| Address 128 E MLK Jr Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | | Description |
| City Hinesville | | <input type="checkbox"/> In-Kind | Flournoy Wynnton Villaage, LLC | | | |
| State GA | Zip 31313 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Mark | | Date 1/12/2026 | Occupation Manager | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 100.00 | Est. Value |
| Last Name Weitzel | | | | | | |
| Address 2941 Roswell Ln | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | | Description |
| City Columbus | | <input type="checkbox"/> In-Kind | VA | | | |
| State GA | Zip 31906 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Itemized Contributions Page Total \$ 1400.00 \$ 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

| | | | | | | |
|---|---------------------|--|--------------------------------------|---|-----------------------------|-------------|
| First Name or Business Name Shika | | Date 1/20/2026 | Occupation Physician | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 500.00 | Est. Value |
| Last Name Shah | | | | | | |
| Address 6200 Bradley Park Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Self employed | <input type="checkbox"/> Run-Off Special | | Description |
| City Columbus | | <input type="checkbox"/> In-Kind | | <input type="checkbox"/> Run-Off Special Primary | | |
| State GA | Zip 31904 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name W. Brady | | Date 1/19/2026 | Occupation Broker | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 1000.00 | Est. Value |
| Last Name Benton | | | | | | |
| Address 7498 Rolling Bend Rd | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Country Financial | <input type="checkbox"/> Run-Off Special Primary | | Description |
| 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 David | | Date | Occupation Builder | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 2000.00 | Est. Value |
| Last Name Erickson | | | | | | |
| Address 4 Bradley Park Ct | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Self employed | <input type="checkbox"/> Run-Off Special Primary | | Description |
| 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 Warren | | Date 1/20/2026 | Occupation Retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 200.00 | Est. Value |
| Last Name Steele | | | | | | |
| Address 7650 Rivercrest Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Retired | <input type="checkbox"/> Run-Off Special Primary | | Description |
| 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 | | | | |
| Itemized Contributions Page Total \$ 3700.00 \$ 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

| | | | | | | |
|--|---------------------|--|-------------------------------------|---|----------------------------|-------------|
| First Name or Business Name John | | Date 1/23/2026 | Occupation Retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 200.00 | Est. Value |
| Last Name Patterson | | | | | | |
| Address 1906 Leonard St, Unit 6 | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Retired | | | Description |
| City Columbus | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 31906 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| First Name or Business Name Donna | | Date 1/24/2026 | Occupation CEo | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 100.00 | Est. Value |
| Last Name Morgan | | | | | | |
| Address 6614 Widgeon Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Columbus Hospice | | | Description |
| City Columbus | | <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 John | | Date 1/27/2026 | Occupation Owner | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 250.00 | Est. Value |
| Last Name Stacey | | | | | | |
| Address PO Box 1920 | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Self employed | | | Description |
| City Portson | | <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 Thomas | | Date 1/28/2026 | Occupation Retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 300.00 | Est. Value |
| Last Name Perkins | | | | | | |
| Address 891 Peachtree Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Retired | | | Description |
| City Columbus | | <input type="checkbox"/> In-Kind | | | | |
| State GA | Zip 31906 | <input type="checkbox"/> Common Source | | | | |
| Aff. Comm. | | <input type="checkbox"/> Credit Received on Loan | | | | |
| Itemized Contributions Page Total \$ 850.00 \$ 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

| | | | | | | |
|---|---------------------|--|---|---|--|-------------|
| First Name or Business Name Sara | | Date 1/16/2026 | Occupation Teacher | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 2500.00 | Est. Value |
| Last Name Bradley | | Employer CSU | | | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Description |
| Address 6152 Green Island Dr #14 | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | Description | |
| City Columbus | | | | | | |
| State GA | Zip 31904 | Aff. Comm. | | Description | | |
| Aff. Comm. | | | | | | |
| First Name or Business Name Beth | | Date 1/27/2026 | Occupation Owner | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 2500.00 | Est. Value |
| Last Name Sayers | | Employer Self employed | | | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Description |
| Address 871 Graystone Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | Description | |
| City Columbus | | | | | | |
| State GA | Zip 31904 | Aff. Comm. | | Description | | |
| Aff. Comm. | | | | | | |
| First Name or Business Name Amy | | Date 1/29/2026 | Occupation homemaker | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 3300.00 | Est. Value |
| Last Name Spencer | | Employer homemaker | | | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Description |
| Address 1919 Garrard St Lot 7 | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | Description | |
| City Columbus | | | | | | |
| State GA | Zip 31906 | Aff. Comm. | | Description | | |
| Aff. Comm. | | | | | | |
| First Name or Business Name Robert | | Date 1/28/20 | Occupation Owner | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 1000.00 | Est. Value |
| Last Name Dixon, Jr | | Employer Self employed | | | <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary | Description |
| Address 6551 #1 Green Island Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan | | Description | |
| City Columbus | | | | | | |
| State GA | Zip 31904 | Aff. Comm. | | Description | | |
| Aff. Comm. | | | | | | |
| Itemized Contributions Page Total \$ 9300.00 \$ 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

Committee to Elect Joanne Cogle

| | | | | | | |
|--|---------------------|--|---|---|----------------------------|-------------|
| First Name or Business Name Jack | | Date 1/13/2026 | Occupation President | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 250.00 | Est. Value |
| Last Name Warden | | | | | | |
| Address 7760 Lynch Rd | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Goodwill Southern Rivers | <input type="checkbox"/> Run-Off Special Primary <input type="checkbox"/> Run-Off Special Primary | | Description |
| 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 John | | Date 1/14/2026 | Occupation Retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 100.00 | Est. Value |
| Last Name House | | | | | | |
| Address 1920 Lancaster Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer Retired | <input type="checkbox"/> Run-Off Special Primary <input type="checkbox"/> Run-Off Special Primary | | Description |
| 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 Timothy | | Date 1/14/2026 | Occupation Retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 500.00 | Est. Value |
| Last Name Wynn | | | | | | |
| Address 7829 Cleo Dr | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer retired | <input type="checkbox"/> Run-Off Special Primary <input type="checkbox"/> Run-Off Special Primary | | Description |
| 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 Gloria | | Date 1/14/2026 | Occupation retired | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special Primary | Cash Amt. 100.00 | Est. Value |
| Last Name Johnson | | | | | | |
| Address 1125 Mobley Walk C | | | | | | |
| Address2 | | <input checked="" type="checkbox"/> Monetary | Employer retired | <input type="checkbox"/> Run-Off Special Primary <input type="checkbox"/> Run-Off Special Primary | | Description |
| 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 | | | | |
| Itemized Contributions Page Total \$ 950.00 \$ 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

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. | Address | | 3. |
| Address2 | | <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 | Address2 | | <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name |
| 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. | Address | | 3. |
| Address2 | | <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 | Address2 | | <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name |
| City | | | City | | |
| State | Zip | | State | Zip | |
| | | | | | |

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

* 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 Magnolia Consultants Last Name Address 3612 Edgewood Rd Address2 City Columbus State GA Zip 31906 | Date 11/6/20 <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 Consultants Employer Magnolia Consultants | media | 3700.00 |
| First Name Columbus Best Donuts Last Name Address 1807 Wynnston Rd Address2 City Columbus State GA Zip 31906 | Date 11/9/20 <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 | Event | 104.05 |
| First Name Peach Partners, LLC Last Name Address 1425 Autumnridge Dr. Address2 City Columbus State GA Zip 31904 | Date 11/12/20 <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 | signs | 10315.22 |

Page Total \$ **10,189.27**

* 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 Express Printing Last Name | Date 11/25/20 | Occupation Employer | marketing | 119.90 |
| Address 1231 Gateway Rd Address2 City Columbus State GA Zip 31909 | <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 | | | |
| First Name Express Printing Last Name | Date | Occupation Employer | marketing | 34.23 |
| Address 1231 Gateway Rd Address2 City Columbus State GA Zip 31909 | <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 | | | |
| First Name W11 Last Name | Date 11/31/20 | Occupation Employer | interchange fees | 92.81 |
| Address 500 Terry A Francois Blvd Address2 Bld City San Francisco State CA Zip 94158 | <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 | | | |

Page Total \$ **246.94**

* 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

| | | | | | |
|--|--|--------------------------------------|---|---|-------------|
| 1. Investment Name | | | | Account # | |
| Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ <div style="display: flex; justify-content: space-between;"> City _____ State _____ Zip _____ </div> | | | | Value at beginning of reporting period \$ | |
| | | | | Value at end of reporting period \$ | |
| | | | | Difference in value \$ | |
| | | | | Interest Paid Out \$ | |
| | | | | Cash Dividends \$ | |
| Investment Transactions | | | | | |
| <u>Date</u> | <u>Person(s) Involved in Transaction</u> | <u>Value of investment purchased</u> | <u>Value of investment sold</u> | <u>Profit</u> | <u>Loss</u> |
| | | | | | |
| 2. Investment Name | | | | Account # | |
| Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ <div style="display: flex; justify-content: space-between;"> City _____ State _____ Zip _____ </div> | | | | Value at beginning of reporting period \$ | |
| | | | | Value at end of reporting period \$ | |
| | | | | Difference in value \$ | |
| | | | | Interest Paid Out \$ | |
| | | | | Cash Dividends \$ | |
| Investment Transactions | | | | | |
| <u>Date</u> | <u>Person(s) Involved in Transaction</u> | <u>Value of investment purchased</u> | <u>Value of investment sold</u> | <u>Profit</u> | <u>Loss</u> |
| | | | | | |
| <u>Total value of investments at beginning of reporting period \$</u> <u>Total value of investments at end of reporting period \$</u> <u>Total difference in value \$</u> | | | Page Total Cash Dividends: \$ _____ Page Total Interest Paid Out: \$ _____ Page Total Profit: \$ _____ Page Total Loss: \$ _____ | | |