

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, Columbus, Council Post 5</u> (Include county, municipality, district, post or judicial seat)	Use Earlier of Post Mark or Hand-Delivered Date <i>Stove</i>
<input checked="" type="checkbox"/> Original	Filer ID _____ (Filer ID that begins with the letter "C")	
<input type="checkbox"/> Amendment Amendment # _____	Organization or Person Other than Candidate's Campaign Committee Committee Name: _____	
	Filer ID: _____ (Filer ID that begins with the letter "NC")	01/19/24

3. Identifying and Contact Information

(1) <u>Robert Wadkins</u>	(2) _____	Today's Date	
Full Name of Candidate or Other Than Candidate Campaign Committee Name			
(3) <u>2132 Wells Dr.</u>	<u>Columbus</u>	<u>GA</u>	<u>31906</u>
Mailing Address	City	State	Zip Code
(4) <u>706-570-3819</u>	and/ or	<u>E-Mail</u>	
Primary Contact Phone Number			

(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: Amy Bryan Jennifer Dunlap
Name of Committee Chairperson Name of Committee Treasurer

4. Period for which you are Reporting

You Must Check Only One Box

My Non-Election Year	My Election Year	Run-Offs (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, _____ (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, 2025 (year)
Supplemental Reporting			
<input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)			

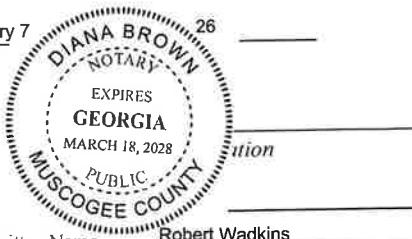
*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-341

State of GeorgiaCounty of Muscogee

I, Robert Wadkins, 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 7

Diana Brown
Signature of Notary Public



Robert Wadkins

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

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
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		3600
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.		200
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		3800
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		3800

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.		1,873.04
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)		1,873.04
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		1,873.04

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)		1926.96
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* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

Election Cycle*:		Election Year:	Amount
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:	Amount
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:	Amount
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	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name or Business Name Robert		Date 10/16/2025	Occupation Lawyer	Cash Amt. 1000	Est. Value
Last Name Wadkins					
Address 2132 Wells Dr.		Employer Self	<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		Description
Address2 City Columbus					
State GA	Zip 31906	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
Aff. Comm.					
First Name or Business Name A Second Chance Criminal Record Relief		Date 10/31/2025	Occupation	Cash Amt. 1000	Est. Value
Last Name					
Address 1332 Wynnton Rd.		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			Description
Address2 City Columbus					
State GA	Zip 31906	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
Aff. Comm.					
First Name or Business Name Daniel		Date 10/31/2025	Occupation Retired	Cash Amt. 200	Est. Value
Last Name Parker					
Address 3131 Cathryn Dr.		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			Description
Address2 City Columbus					
State GA	Zip 31906	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan			
Aff. Comm.					

Itemized Contributions Page Total \$ 2200 \$

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First Name or Business Name	Date	Occupation	Cash Amt.	Est. Value
Nolan	11/15/2025	Financial Services	<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	200
Last Name Pendleton				Description
Address 33 Grizzly 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 Christopher	Date 11/7/2025	Occupation Real Estate Development	<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	100
Last Name Woodruff				Description
Address 1230 Broadway				
Address2	<input checked="" type="checkbox"/> Monetary	Employer		
City Columbus	<input type="checkbox"/> In-Kind	Self		
State GA	Zip 31901	<input type="checkbox"/> Common Source		
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan		
First Name or Business Name Richard	Date 11/5/2025	Occupation Retired	<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	200
Last Name Parker				Description
Address 2020 Iris Dr.				
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		
1400				\$
Itemized Contributions Page Total \$ 1400				

* 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

Robert Wadkins

Public Officer/Candidate/Other Than Candidate Committee Name

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Loan Reporting			
Name of Lender & Mailing Address	1. Date of Loan 2. Amount of Loan 3. Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1. Occupation & 2. Place of Employment 3. Fiduciary Relationship***
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State Zip		State Zip	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State Zip		State Zip	
Reference: OCGA § 21-5-34(b)(1)			Loan Page Total \$ _____

* 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 Yard Sign Plus	Date 10/23/2025	Occupation	Yard Signs	550.30
Last Name		Employer		
Address 10511 Kipp Way St.	<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			
Address2				
City Houston				
State TX	Zip 77099			
First Name Sticker Mule	Date 10/24/2025	Occupation	Stickers	223.45
Last Name		Employer		
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			
Address2				
City				
State	Zip			
First Name Imprints and Promotions	Date 11/1/2025	Occupation	Slapbands	671.49
Last Name		Employer		
Address 133 Pintail Dr. S	<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			
Address2				
City Cataula				
State GA	Zip 31804			

1448.24

Page Total \$ _____

* 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 Kern	Date 12/9/2025	Occupation Executive Director	Campaign Website and Digital Advertising	424.80
Last Name Wadkins				
Address 2132 Wells Dr.	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense	Employer CSO		
Address2	<input type="checkbox"/> Investment			
City Columbus				
State GA	Zip 31906			
First Name	Date	Occupation		
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			
Address2	<input type="checkbox"/> Investment	Employer		
City				
State	Zip			
First Name	Date	Occupation		
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			
Address2	<input type="checkbox"/> Investment	Employer		
City				
State	Zip			
First Name	Date	Occupation		
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			
Address2	<input type="checkbox"/> Investment	Employer		
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 \$ 424.80

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

1. Investment Name		Account #		
Institution/Person Holding Account		Value at beginning of reporting period \$		
Mailing Address		Value at end of reporting period \$		
Address2		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>
2. Investment Name		Account #		
Institution/Person Holding Account		Value at beginning of reporting period \$		
Mailing Address		Value at end of reporting period \$		
Address2		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>Total value of investments at beginning of reporting period \$</u>		Page Total Cash Dividends: \$ _____		
<u>Total value of investments at end of reporting period \$</u>		Page Total Interest Paid Out: \$ _____		
<u>Total difference in value \$</u>		Page Total Profit: \$ _____		
		Page Total Loss: \$ _____		

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.