

CFC-CCDR

03/20

## 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](http://www.ethics.ga.gov)

<b>1. Report Type</b> (Select One)  <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment  Amendment # _____	<b>2. Filing is being made on behalf of (Select One):</b> <b>Candidate or Public Official</b> Office Held or Sought <u>City Council District One (1)</u> <small>(Include county, municipality, district, post or judicial seat)</small> Filer ID _____ <small>(Filer ID that begins with the letter "C")</small> <b>Organization or Person Other than Candidate's Campaign Committee</b> Committee Name: _____ Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>	Use Earlier of Post Mark or Hand-Delivered Date <u>flor</u> <u>01/05/20</u>
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## 3. Identifying and Contact Information

- (1) The Committee to elect Simi Barnes (2) December 30, 2025  
 Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date
- (3) PO BOX 6212 Columbus GA 31907  
 Mailing Address City State Zip Code
- (4) 706-587-6064 and/ or simibarnes011@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 MAXINE Lee
- (7) If yes, complete the following: Simeonelavette Triana M Barnes Clairmont Jerome Barnes, Jr.  
 Name of Committee Chairperson Name of Committee Treasurer

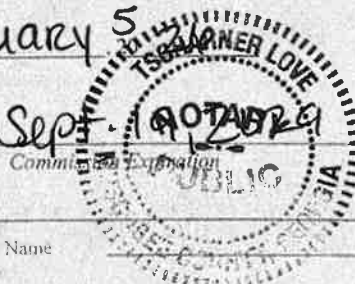
## 4. Period for which you are Reporting

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, 2025 (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)
<b>Supplemental Reporting</b> <input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (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>			

State of GeorgiaCounty of Muscogee

I, Simeonelavette Barnes, 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 5
Schanner Gore  
 Signature of Notary Public

[Signature]  
 Signature of Candidate  
 or Organization/Chairperson/Treasurer

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**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 officesought, 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.	0.00	0.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$1,000	\$6,750.00
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.	0.00	\$300.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$1,000	\$7,050
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$1,000	\$7,050

**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.	0.00	0.00
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$1,000	\$1,914.34
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	0.00	\$26.90
11	Total expenditures reported this period. (Line 9 + 10)	\$1,000	\$1,941.24
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$1,000	\$1,941.24

**INVESTMENTS**

13	Total value of investments held at the beginning of this reporting period.		0.00
14	Total value of investments held at the end of this reporting period.		0.00

**TOTAL NET BALANCE ON HAND**

15	Net balance on hand. (Line 6 - 12 + 14)	0.00	\$5,108.76
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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.

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**State of Georgia**  
**Campaign Contribution Disclosure Report**  
**Outstanding Indebtness**

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*: _____ 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

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# 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 <b>Simi</b>	Date <b>8/8/2025</b>	Occupation <b>Family Therapist</b>	<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	Cash Amt. <b>\$300</b>	Est. Value
Last Name <b>Barnes</b>					
Address <b>PO BOX 6212</b>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <b>Self-Employed</b>		<input type="checkbox"/> Run-Off Special Primary	Description
City <b>Columbus</b>	<input type="checkbox"/> In-Kind				
State <b>GA</b>	<input type="checkbox"/> Common Source				
Zip <b>31907</b>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name <b>Simi</b>	Date <b>7/25/2025</b>	Occupation <b>Family Therapist</b>	<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	Cash Amt. <b>\$100</b>	Est. Value
Last Name <b>Barnes</b>					
Address <b>PO BOX 6212</b>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <b>Self-Employed</b>		<input type="checkbox"/> Run-Off Special Primary	Description
City <b>columbus</b>	<input type="checkbox"/> In-Kind				
State <b>GA</b>	<input type="checkbox"/> Common Source				
Zip <b>31907</b>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name <b>Isaiah</b>	Date <b>8/13/2025</b>	Occupation <b>Retired</b>	<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	Cash Amt. <b>\$500</b>	Est. Value
Last Name <b>Hughley</b>					
Address <b>P. O. Box 6342</b>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <b>Retired</b>		<input type="checkbox"/> Run-Off Special Primary	Description
City <b>columbus</b>	<input type="checkbox"/> In-Kind				
State <b>GA</b>	<input type="checkbox"/> Common Source				
Zip <b>31917</b>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total \$ 900.00 \$

Public Officer/Candidate/Other Than Candidate Committee Name

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First Name or Business Name <b>Simi</b>		Date <b>10/20/2025</b>	Occupation <b>family therapist</b>	<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. <b>\$300</b>	Est. Value
Last Name <b>Barnes</b>						
Address <b>PO BOX 6212</b>						
Address2		<input checked="" type="checkbox"/> Monetary	Employer <b>Self Employed</b>			Description
City <b>columbus</b>		<input type="checkbox"/> In-Kind				
State <b>GA</b>		<input type="checkbox"/> Common Source				
Zip <b>31907</b>		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name <b>Anthony</b>		Date <b>8/13/2025</b>	Occupation <b>attorney</b>	<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. <b>\$1000</b>	Est. Value
Last Name <b>Johnson</b>						
Address <b>1034 Amber Dr</b>						
Address2		<input checked="" type="checkbox"/> Monetary	Employer <b>office of ALJ</b>			Description
City <b>columbus</b>		<input type="checkbox"/> In-Kind				
State <b>GA</b>		<input type="checkbox"/> Common Source				
Zip <b>31907</b>		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name <b>carolyn</b>		Date <b>8/8/2025</b>	Occupation <b>insurance agent</b>	<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. <b>\$250</b>	Est. Value
Last Name <b>Hughley</b>						
Address <b>P. O. Box 6342</b>						
Address2		<input checked="" type="checkbox"/> Monetary	Employer <b>self employed</b>			Description
City <b>columbus</b>		<input type="checkbox"/> In-Kind				
State <b>GA</b>		<input type="checkbox"/> Common Source				
Zip <b>31917</b>		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
First Name or Business Name <b>freedom Bonding</b>		Date <b>11/13/2025</b>	Occupation <b>bail bondsman</b>	<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. <b>\$350</b>	Est. Value
Last Name						
Address <b>po box 1616</b>						
Address2		<input checked="" type="checkbox"/> Monetary	Employer <b>freedom bonding</b>			Description
City <b>columbus</b>		<input type="checkbox"/> In-Kind				
State <b>GA</b>		<input type="checkbox"/> Common Source				
Zip <b>31901</b>		<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.						
Itemized Contributions Page Total \$ <b>\$1,900</b>						

\* 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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# 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 <b>Amos</b>	Date <b>11/17/2025</b>	Occupation <b>automotive work</b>	<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. <b>\$400</b>	Est. Value
Last Name <b>Powell</b>					
Address <b>4363 Victory Dr</b>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <b>amos paint and body shop</b>			Description
City <b>columbus</b>	<input type="checkbox"/> In-Kind				
State <b>GA</b>	<input type="checkbox"/> Common Source				
Zip <b>31903</b>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name <b>Johnny</b>	Date <b>11/19/2025</b>	Occupation <b>retired</b>	<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. <b>\$2,000</b>	Est. Value
Last Name <b>Fulton Freeman</b>					
Address <b>8097 Pleasant Ridge Drive</b>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <b>Retired</b>			Description
City <b>columbus</b>	<input type="checkbox"/> In-Kind				
State <b>GA</b>	<input type="checkbox"/> Common Source				
Zip <b>31820</b>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name or Business Name <b>Benning Travelers</b>	Date <b>11/20/2025</b>	Occupation <b>hotlilier</b>	<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. <b>\$250</b>	Est. Value
Last Name					
Address <b>3601 Victory Dr</b>					
Address2	<input checked="" type="checkbox"/> Monetary	Employer <b>Benning Travelers</b>			Description
City <b>columbus</b>	<input type="checkbox"/> In-Kind				
State <b>GA</b>	<input type="checkbox"/> Common Source				
Zip <b>31903</b>	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total \$ 2,650

Public Officer/Candidate/Other Than Candidate Committee Name

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First Name or Business Name <b>Simi</b>		Date <b>12/22/2025</b>	Occupation <b>family therapy</b>	<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. <b>\$600</b>	Est. Value
Last Name <b>Barnes</b>						
Address <b>po box 6212</b>						
Address2		<input checked="" type="checkbox"/> Monetary	Employer <b>self employed</b>			Description
City <b>columbus</b>		<input type="checkbox"/> In-Kind				
State <b>GA</b>	Zip <b>31907</b>	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name <b>Democratic Party of Georgia</b>		Date <b>10/27/2025</b>	Occupation <b>Democratic Party of Georgia</b>	<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. <b>\$1,000</b>	Est. Value
Last Name						
Address <b>501 Pullam St SW,</b>						
Address2 <b>STE 400</b>		<input type="checkbox"/> Monetary	Employer			Description <b>VoteBuilder</b>
City <b>Atlanta</b>		<input checked="" type="checkbox"/> In-Kind				
State <b>GA</b>	Zip <b>30312</b>	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name <b>Fredrick</b>		Date <b>10/29/2025</b>	Occupation <b>software engineer</b>	<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. <b>\$250</b>	Est. Value
Last Name <b>Johnson</b>						
Address <b>1609 Warm Springs Rd</b>						
Address2		<input checked="" type="checkbox"/> Monetary	Employer <b>WC Bradley</b>			Description
City <b>columbus</b>		<input type="checkbox"/> In-Kind				
State <b>GA</b>	Zip <b>31904</b>	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name <b>carolyn</b>		Date <b>11/1/2025</b>	Occupation <b>insurance agent</b>	<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. <b>\$250</b>	Est. Value
Last Name <b>huguley</b>						
Address <b>P. O. Box 6342</b>						
Address2		<input checked="" type="checkbox"/> Monetary	Employer <b>self employed</b>			Description
City <b>columbus</b>		<input type="checkbox"/> In-Kind				
State <b>Ga</b>	Zip <b>31917</b>	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total					<b>\$ 1,100</b>	<b>\$ 1,000</b>

\* 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	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
clairmont	12/10/2025	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 barnes					
Address 5935 atteentee rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer retired			Description
City springfield	<input type="checkbox"/> In-Kind				
State VA	<input type="checkbox"/> Common Source				
Zip 22150	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
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	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
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	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
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	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
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	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Itemized Contributions Page Total \$ 200					

\* 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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### 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	Address		3. <input type="checkbox"/> Public Officer
Address2		<input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Address2		<input type="checkbox"/> Candidate
City		<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special	City		<input type="checkbox"/> Other Than Candidate Committee Name
State	Zip	<input type="checkbox"/> Run-Off Special Primary	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	Address		3. <input type="checkbox"/> Public Officer
Address2		<input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Address2		<input type="checkbox"/> Candidate
City		<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special	City Lexington		<input type="checkbox"/> Other Than Candidate Committee Name
State	Zip	<input type="checkbox"/> Run-Off Special Primary	State	Zip	
Reference: OCGA § 21-5-34(b)(1) <span style="float: right;">Loan Page Total \$ _____</span>					

\* 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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## 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
<div style="display: flex; justify-content: space-between;"> <div> <b>First Name</b> VISTA Print </div> <div> <b>Date</b> 9/9/2025 </div> </div> <div> <b>Last Name</b>  </div>	<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	<b>Occupation</b> custom printing company	1- custom design for standard business cards	\$10
<b>Address</b> 95 Hayden Avenue		<b>Employer</b> 		
<b>Address2</b> 				
<b>City</b> Lexington				
<div style="display: flex; justify-content: space-between;"> <div> <b>State</b> MA </div> <div> <b>Zip</b> 02421 </div> </div>				
<div style="display: flex; justify-content: space-between;"> <div> <b>First Name</b> VISTA Print </div> <div> <b>Date</b> 9/22/2025 </div> </div> <div> <b>Last Name</b>  </div>	<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	<b>Occupation</b> custom printing company	100 standard business cards	\$34.86
<b>Address</b> 95 Hayden Avenue		<b>Employer</b> 		
<b>Address2</b> 				
<b>City</b> Lexington				
<div style="display: flex; justify-content: space-between;"> <div> <b>State</b> MA </div> <div> <b>Zip</b> 02421 </div> </div>				
<div style="display: flex; justify-content: space-between;"> <div> <b>First Name</b> VISTA Print </div> <div> <b>Date</b> 10/1/2025 </div> </div> <div> <b>Last Name</b>  </div>	<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	<b>Occupation</b> custom printing company	professional logo Design	\$97.00
<b>Address</b> 95 Hayden Avenue		<b>Employer</b> 		
<b>Address2</b> 				
<b>City</b> Lexington				
<div style="display: flex; justify-content: space-between;"> <div> <b>State</b> MA </div> <div> <b>Zip</b> 02421 </div> </div>				

Page Total \$ 141.86

\* 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

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List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <b>VISTA Print</b> Last Name  Address <b>95 Hayden Avenue</b> Address2  City <b>Lexington</b> State MA Zip 02421	Date <b>10/20/2025</b> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <b>custom printing company</b> Employer  	<b>2 custom car magnets</b>	<b>\$113.34</b>
First Name <b>VISTA Print</b> Last Name  Address <b>95 Hayden Avenue</b> Address2  City <b>Lexington</b> State MA Zip 02421	Date <b>9/19/2025</b> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <b>custom printing company</b> Employer  	<b>500 door hangars</b>	<b>\$203.81</b>
First Name <b>VISTA Print</b> Last Name  Address <b>95 Hayden Avenue</b> Address2  City <b>Lexington</b> State MA Zip 02421	Date <b>11/15/2025</b> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <b>custom printing company</b> Employer  	<b>500 door hangars</b>	<b>\$203.81</b>
First Name <b>VISTA Print</b> Last Name  Address <b>95 Hayden Avenue</b> Address2  City <b>Lexington</b> State MA Zip 02421	Date <b>8/29/2025</b> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <b>custom printing company</b> Employer  	<b>500 door hangars</b>	<b>\$203.81</b>

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)Public Officer/Candidate/Other Than Candidate Committee Name Page Total \$ 724.77

Public Officer/Candidate/Other Than Candidate Committee Name

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List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <b>Patricia</b> Last Name <b>Grant</b> Address <b>F.A.I.T.H.</b> Address2 <b>3422 Marriott</b> City <b>columbus</b> State GA Zip 31907	Date <b>8/25/2025</b> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <b>Advertisement in F.A.I.T.H. (feeding accepting Inspiring the Hurting)</b> Employer	<b>Advertisement in F.A.I.T.H.</b>	<b>\$300</b>
First Name <b>Harry</b> Last Name <b>Underwood</b> Address <b>8082 Veterans Pkwy</b> Address2 <b>Apt 4702</b> City <b>columbus</b> State GA Zip 31909	Date <b>8/19/2025</b> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <b>website services</b> Employer	<b>website begin development</b>	<b>\$300</b>
First Name <b>Harry</b> Last Name <b>Underwood</b> Address <b>8082 Veterans Pkwy</b> Address2 <b>Apt 4702</b> City <b>columbus</b> State GA Zip 31909	Date <b>11/24/2025</b> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <b>website services</b> Employer	<b>website completion</b>	<b>\$300</b>
First Name <b>As he leads</b> Last Name  Address <b>1965 S. Lumpkin Rd</b> Address2  City <b>Columbus</b> State GA Zip 31903	Date <b>10/31/2025</b> <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation <b>advertisement</b> Employer	<b>campaign Shirts for Tri-city Veterans Day parade</b>	<b>\$147.71</b>

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment) Public Officer/Candidate/Other Than Candidate Committee Name Page Total \$ 1,047.71

Public Officer/Candidate/Other Than Candidate Committee Name

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## 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
<div style="display: flex; justify-content: space-between;"> <div> <b>First Name</b> Democratic Party of Georgia </div> <div> <b>Date</b> 10/27/2025 </div> </div> <div> <b>Last Name</b>  </div> <div> <b>Address</b> 501 Puliam St Sw </div> <div> <b>Address2</b> Ste 400 </div> <div> <b>City</b> Atlanta </div> <div style="display: flex; justify-content: space-between;"> <div> <b>State</b> GA </div> <div> <b>Zip</b> 30312 </div> </div>	<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	<b>Occupation</b> Democratic Party of GA	<b>Votebuilder</b> -(in-kind donation)	<div style="text-align: center; border-bottom: 1px solid black;">\$1,000</div>
<div style="display: flex; justify-content: space-between;"> <div> <b>First Name</b>  </div> <div> <b>Date</b>  </div> </div> <div> <b>Last Name</b>  </div> <div> <b>Address</b>  </div> <div> <b>Address2</b>  </div> <div> <b>City</b>  </div> <div style="display: flex; justify-content: space-between;"> <div> <b>State</b>  </div> <div> <b>Zip</b>  </div> </div>	<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	<b>Occupation</b> 		
<div style="display: flex; justify-content: space-between;"> <div> <b>First Name</b>  </div> <div> <b>Date</b>  </div> </div> <div> <b>Last Name</b>  </div> <div> <b>Address</b>  </div> <div> <b>Address2</b>  </div> <div> <b>City</b>  </div> <div style="display: flex; justify-content: space-between;"> <div> <b>State</b>  </div> <div> <b>Zip</b>  </div> </div>	<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	<b>Occupation</b> 		

Page Total \$ **\$1,000.**

\* 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

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## 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;"> <span>City _____</span> <span>State _____</span> <span>Zip _____</span> </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;"> <span>City _____</span> <span>State _____</span> <span>Zip _____</span> </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>			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: \$ _____		



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**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.

