

CFC-CCDR 1/14

Campaign Contribution Disclosure Report Georgia Government Transparency and Campaign Finance Commission 200 Piedmont Avenue S.E. Suite 1402 West Tower Atlanta, GA 30334 404-463-1980 www.ethics.ga.gov			
1. Report Type (Select One) <input 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>Fulton County Board of Commissioners</u> Dist 5 <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID: <u>CZ014000118</u> <small>(Filer ID that begins with the letter "C")</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee To Elect Brndar Muhammad</u> Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>		Use Earlier of Post RECEIVED Delivered Date <u>Fulton County</u> <u>A.G.</u> <u>JUL 20 2014</u> Director of Registrations And Elections
3. Identifying and Contact Information (1) <u>Brenda Joyce Muhammad</u> (2) _____ <small>Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date</small> (3) <u>2705 Church Street East Point Ga, 30344</u> <small>Mailing Address City State Zip Code</small> (4) <u>404 914-1651</u> and/or <u>bjmuhammad@comcast.net</u> <small>Primary Contact Phone Number E-Mail</small> (5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? <input type="checkbox"/> Yes <input type="checkbox"/> No (6) If yes, is the committee registered with the Commission? <input type="checkbox"/> Yes <input type="checkbox"/> No (7) If yes, complete the following: <u>Pamela J. Smith</u> <u>Brenda J. Muhammad</u> <small>Name of Committee Chairperson Name of Committee Treasurer</small>			
4. Period for which you are Reporting You Must Check Only One Box			
My Non Election Year <input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> June 30, ____ (year) Supplemental Reporting <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year) <small>*Persons leaving office with excess funds until such funds are expended as provided in the Act *Unsuccessful candidates with excess funds, or who receive contributions to retire debt incurred, until such funds are expended, or such unpaid debts are satisfied (December 31 filing only)</small>	My Election Year <input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> March 31, ____ (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)	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small> <input checked="" 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)	Special Election <input type="checkbox"/> 15 days before Special Primary, ____ (year) <input type="checkbox"/> 15 days before Special, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)
State of _____ County of _____			
I, _____ 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 _____, 20____			
_____ Signature of Notary Public	_____ Commission Expiration	 a. Signature of Candidate b. Organization Chairperson/Treasurer	

State of Georgia Campaign Contribution Disclosure Report Summary Report

CONTRIBUTIONS RECEIVED

		<u>In-Kind Estimated Value</u>	<u>Cash Amount</u>
1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:		
2	A. If this is the <u>first time to file a disclosure report for the current office sought</u> , <u>ENTER 0</u> in both columns (one time only); or B. If this is the first report of this Reporting Cycle*, <u>ENTER 0</u> in the in-kind column and list any <u>net balance</u> on hand brought forward from the previous reporting cycle in the cash amount column (Line 13 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the <u>second or subsequent filing of this Reporting Cycle</u> , list totals from <u>Line 6 of previous report</u> in both the in-kind and cash amount columns.	2,000.00	49,288.40
3	Total amount of all itemized contributions received in this reporting period which are listed on the "Itemized Contributions" page.		2,952.00
3a	All loans received this reporting period.		\$5,000
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 <u>less than \$101.00</u> received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.		50.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		8002.00
6	Total contributions to date. <i>Total to be carried forward to next report of this reporting cycle*</i> . (Line 2 + 5)		57,288.40

EXPENDITURES MADE

		<u>In-Kind Estimated Value</u>	<u>Cash Amount</u>
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 Reporting Cycle*, <u>ENTER 0</u> . B. Second or subsequent filing <u>ENTER Line 12 of previous report</u> .	0.00	49,835.67
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		1833.56
10	Total amount of all separate expenditures of <u>less than \$101.00</u> that were made in this reporting period and not listed on the "Itemized Expenditures" page.		748.66
11	Total expenditures reported this period. (Line 9 + 10)		2582.22
12	Total expenditures to date. <i>Total to be carried forward to next report of this reporting cycle*</i> . (Line 8 + 11)		46417.89

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
15	Net balance on hand. (Line 6 - 12 + 14)		10,870.51

* O.C.G.A. 21-5-34(b)(1)(D)(ii) A reporting cycle shall commence on January 1 of the year in which an election is to be held for the public office to which a candidate seeks election and shall conclude:

(I) At the expiration of the term of office if such candidate is elected and does not seek reelection or election to some other office;

(II) On December 31 of the year in which such election was held if such candidate is unsuccessful; or

(III) If such candidate is successful and seeks reelection or seeks election to some other office the current reporting cycle shall end when the reporting cycle for reelection or for some other office begins.

Public Officer/Candidate/Non-Candidate Committee Name _____

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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.	9628.90
2	Loans received this reporting period.	5,000.00
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)	14628.90
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

July Contributions 10/11

A. V. Powell	Address Requested	500
Horacena Tate	Address Requested	500
Mrs. Whatley	Address Requested	1000
Evenlyn Brown	1349 Aniwaka Avenue SW, Atlanta, GA 30311	200
Janine Brown	1155 Hardee Street NW, Atlanta, GA 30307	101
Pamela J. Smith	120 Hammond Drive NE, Sandy Springs, GA 30328	300
McClullough's Creative Children Center	612 Clifton Road., SE, Atlanta, GA 30316	101
Paul Zucca	660 Delmar Avenue, Atlanta, GA 30312	250
		2952.00

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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	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 <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Primary	Description
City								
State Zip								
Aff. Comm.								
First 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 <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Primary	Description
City								
State Zip								
Aff. Comm.								
First 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 <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	Primary	Description
City								
State Zip								
Aff. Comm.								

Itemized Contributions Page Total \$ _____ \$ _____

Public Officer/Candidate/Other Than Candidate Committee Name _____

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First 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		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			
Address						
Address2						
City						
State	Zip					
Aff. Comm.						
First 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		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			
Address						
Address2						
City						
State	Zip					
Aff. Comm.						
First 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		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			
Address						
Address2						
City						
State	Zip					
Aff. Comm.						
First 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		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			
Address						
Address2						
City						
State	Zip					
Aff. Comm.						
Itemized Contributions 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

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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 & Place of Employment 2. Place of Employment 3. Fiduciary Relationship***
Lender Name (First Name, Business, Inst.) <i>Brade Muhammad</i>	1. <i>6/14/14</i>	First Name <i>Committee To Elect Prevez Muhammad</i>	1. <i>Congress</i>
Lender Last Name <i>Muhammad</i>	2. <i>5,000</i>	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.	
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

Expenses 100+

NGP Van	1101 15th Street, NW, Washington, DC 20005	250
Electric Eatery	242 Boulevard SE, Atlanta, GA 30312	150
Lillian Gons	243 Bowen Ave. SE, Atlanta Ga 30316	136.56
Marshall Rancifer	Address Requested	120
Imani Services	917 DeKalb Ave. 30310	177
Lillian Gons	243 Bowen Ave. SE, Atl, Ga 30316	1000
		1833.56

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name		<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation		
Last Name			Employer		
Address					
Address2					
City					
State	Zip				
First Name		Date	Occupation		
Last Name		Employer			
Address					
Address2					
City					
State	Zip				
First Name		Date	Occupation		
Last Name		Employer			
Address					
Address2					
City					
State	Zip				
First Name		Date	Occupation		
Last Name		Employer			
Address					
Address2					
City					
State	Zip				

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

Public Officer/Candidate/Other Than Candidate Committee Name _____ Page ____ of ____

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

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/Non-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 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	Difference in value \$
	Interest Paid Out \$
	Cash Dividends \$

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss

2. Investment Name	Account #
Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	Difference in value \$
	Interest Paid Out \$
	Cash Dividends \$

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss

<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.

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