

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

<p>1. Report Type (Select One)</p> <p><input checked="" type="checkbox"/> Original</p> <p><input type="checkbox"/> Amendment</p> <p>Amendment # _____</p>	<p>2. Filing is being made on behalf of (Select One):</p> <p>Candidate or Public Official Office Held or Sought: <u>Fulton County Commission</u> <small>(Include county, municipality, district, post or judicial circuit)</small></p> <p>Filer ID: <u>C2014000118</u> <small>(Filer ID that begins with the letter "C")</small></p> <p>Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Committee to Elect Brenda J. Muhammad</u></p> <p>Filer ID: <u>C2014000118</u> <small>(Filer ID that begins with the letter "NC")</small></p>	<p>Use Either of Post Mark or Hand Delivered Date</p> <p style="font-size: 24px; color: red;">RECEIVED Fulton County</p> <p style="font-size: 24px; color: red;">APR 07 2014</p> <p style="color: blue;">Director of Registrations And Elections</p> <p style="border: 1px solid black; padding: 2px;">04/04/2014</p>
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3. Identifying and Contact Information

(1) Brenda Joyce Muhammad (2) 04/04/2014
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) East Point Ga 30344
Mailing Address City State Zip Code

(4) (404) 914-1651 and/ or bjmuhammad@comcast.net
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: Pamela J. Smith | Brenda J. Muhammad
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 <small>(Report required only if you are in a Run-Off Election)</small>	Special Election
<input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> June 30, ____ (year)	<input type="checkbox"/> January 31, ____ (year) <input checked="" type="checkbox"/> March 31, <u>2014</u> (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)
<p>Supplemental Reporting</p> <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<p><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></p>		

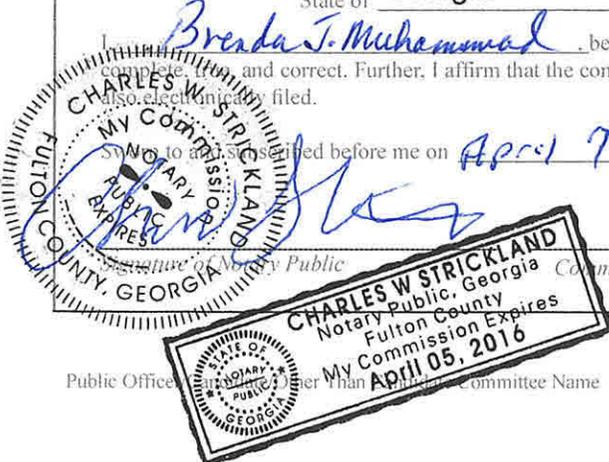
State of Georgia County of Fulton County

I, Brenda J. Muhammad, being duly sworn (affirm), depose and say that the information in this report form is 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.

Subscribed before me on April 7, 2014

[Signature]
Signature of Candidate

[Signature]
Signature of 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	0
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	2000.00	18301.00
3a	All loans received this reporting period.		2500.00
3b	Interest earned on campaign account this reporting period.	0	0
3c	Total amount of investments sold this reporting period.	0	0
3d	Total amount of cash dividends and interest paid out this reporting period.	0	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	1080.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	2000.00	21881.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	2000.00	21881.00

EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	0	0
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	0	8735.32
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	2173.77
11	Total expenditures reported this period. (Line 9 + 10)	0	10909.09
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	0	10909.09

INVESTMENTS

13	Total value of investments held at the beginning of this reporting period.	0	0
14	Total value of investments held at the end of this reporting period.	0	0

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)	2000.00	8471.91
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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*: <u>Primary</u> Election Year: <u>2014</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	2500.00
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)	2500.00
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 Yolanda Last Name Johnson Address 2301 Venetian Drive Address2 City East Point State Ga Zip 30344 Aff. Comm.	Date 02/21/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Self Employed Employer Attorney	<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 Description	
First Name Earnest Last Name Allen Address P.O. Box 1045 Address2 City Atlanta State Georgia Zip 30301 Aff. Comm.	Date 03/04/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Retired Employer Military		<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 Description
First Name RLP Corporation Last Name Address 221 Lake Forrest Lane NE Address2 City Atlanta State Georgia Zip 30342-3211 Aff. Comm.	Date 03/04/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Financial Advisor Employer			<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

Itemized Contributions Page Total \$ 700.00 \$ 0

CFC-CCDR 1/14

First Name		Date	Occupation	<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.	Est. Value
Dakota		03/06/2014	Restaurant Business			200.00
Last Name Blue						
Address 505 Glenwood Avenue SE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta		<input type="checkbox"/> In-Kind				
State Georgia	Zip 30312	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name Paul		Date 03/06/2014	Occupation Business 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 Zucca						
Address 660 Delmar Avenue						
Address2		<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta		<input type="checkbox"/> In-Kind				
State Georgia	Zip 30312	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name Support Housing LLC		Date 03/06/2014	Occupation Business	<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						
Address 660 Woodland Avenue SE						
Address2		<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta		<input type="checkbox"/> In-Kind				
State Georgia	Zip 30316	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name Q. P.		Date 03/08/2014	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 Jones, Jr.						
Address 975 Tuckawanna Drive						
Address2		<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta		<input type="checkbox"/> In-Kind				
State Georgia	Zip 30311	<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

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 Jim Last Name Winestock Address P.O. Box 422567 Address2 City Atlanta State Georgia Zip 30342 Aff. Comm.	Date 03/14/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Retired Employer UPS	<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 Description
First Name Rosalind R. Last Name Newell Address 465 Mossey Drive Address2 City Lithonia State Georgia Zip 30038 Aff. Comm.	Date 03/14/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Attorney Employer Invest Atlanta	<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 Description
First Name Evelyn Last Name Brown Address 1349 Aniwaka Avenue Address2 City Atlanta State Georgia Zip 30311 Aff. Comm.	Date 03/15/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Retired Employer Atlanta Public School	<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 Description

Itemized Contributions Page Total \$ 900.00 \$ 0.00

CFC-CCDR 1/11

First Name	Date	Occupation		Cash Amt.	Est. Value
Robbin K.	03/18/2014	Attorney	<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	200.00	
Last Name Shipp					
Address n/a					
Address2 n/a	<input checked="" type="checkbox"/> Monetary	Employer			Description
City	<input type="checkbox"/> In-Kind	Self-Employed			
State	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name Ronald	Date 03/21/2014	Occupation Counselor	<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 Hamilton					
Address 845 Columbus Avenue; Apt. 18-G					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			Description
City New York	<input type="checkbox"/> In-Kind	Job Corp			
State New York	<input type="checkbox"/> Common Source				
Zip 10025-4541	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name Erroll B.	Date 03/24/2014	Occupation Supertindent	<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 Davis					
Address 2881 Peachtree Road NE					
Address2 Unit 2401	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta	<input type="checkbox"/> In-Kind	Atlanta Public Schools			
State Georgia	<input type="checkbox"/> Common Source				
Zip 30305	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
First Name Sharon	Date 03/25/2014	Occupation Attorney	<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 Gay					
Address 303 Peachtree Street					
Address2 Suite 5300	<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta	<input type="checkbox"/> In-Kind	Mckenna, Long & Aldridge			
State Georgia	<input type="checkbox"/> Common Source				
Zip 30308	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Itemized Contributions Page Total \$				1950.00	\$ 0.00

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

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

*** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

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 Willie Last Name Watkins Address 1003 Ralph David Abernathy Blvd Address2 City Atlanta State Georgia Zip 30310 Aff. Comm.	Date 03/25/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation CEO Funeral Home Employer Watkins Funeral Home	<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 Description	
First Name Marcel Last Name Reed Address 3645 Marketplace Blvd Address2 City Atlanta State Georgia Zip 30344 Aff. Comm.	Date 03/25/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Law Enforcement Employer City of Atlanta		<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 Description
First Name H.J. Russell Company Last Name Address 504 Fair Street Address2 City Atlanta State Georgia Zip 30313 Aff. Comm.	Date 03/25/2014 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Construction Company Employer Business			<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

Itemized Contributions Page Total \$ 1200.00 \$ 0.00

CFC-CCDR 1/14

First Name	Date	Occupation		Cash Amt.	Est. Value
Samuel	03/18/2014	Business 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	500.00	
Last Name Gude, III					
Address 315 Regency Crest Court					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind				
State Georgia	Zip 30311				
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				
Ardis R.	03/30/2014	Professional	<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	2500.00	
Last Name Perry					
Address 541 Centennial Lane					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind				
State Georgia	Zip 30313				
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				
Egbert	03/31/2014	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	2500.00	
Last Name Perry					
Address 541 Centennial Lane					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Integral Inc.			
City Atlanta	<input type="checkbox"/> In-Kind				
State Georgia	Zip 30313				
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				
Vicki L.	03/31/2014	Executive	<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	1000.00	
Last Name Wilbon					
Address 543 Centennial Lane					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Integral Inc.			
City Atlanta	<input type="checkbox"/> In-Kind				
State Georgia	Zip 30313				
Aff. Comm.	<input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total				\$ 6500.00	\$ 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

CFC-CCDR 1/14

First Name	Date	Occupation		Cash Amt.	Est. Value
Napoleon	03/31/2014	Self-Employed	<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	100.00	
Last Name					
Address					
n/a					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
n/a	<input type="checkbox"/> In-Kind	Self-Employed			
City	<input type="checkbox"/> Common Source				
State	<input type="checkbox"/> Credit Received on Loan				
Zip					
Aff. Comm.					
C.T.	03/31/2014	Councilman	<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	500.00	
Last Name					
Address					
561 Payton Road SW					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind	City of Atlanta			
Atlanta	<input type="checkbox"/> Common Source				
State	<input type="checkbox"/> Credit Received on Loan				
Georgia					
Zip					
30311					
Aff. Comm.					
Greenberg, Traurig Law	03/31/2014	Attorneys	<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	350.00	
Last Name					
Address					
8400 NW 36th Street					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
Suite 400	<input type="checkbox"/> In-Kind	Law Firm			
City	<input type="checkbox"/> Common Source				
Miami	<input type="checkbox"/> Credit Received on Loan				
State					
Florida					
Zip					
331166					
Aff. Comm.					
Rodney	03/31/2014	Banker	<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	150.00	
Last Name					
Address					
5202 Forest View Trail					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind	PNC			
Mabelton	<input type="checkbox"/> Common Source				
State	<input type="checkbox"/> Credit Received on Loan				
Georgia					
Zip					
30126					
Aff. Comm.					

Itemized Contributions Page Total \$ 1100.00 \$ 0.00

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)
 ** Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)
 *** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

CFC-CDDR 1/14

First Name	Date	Occupation		Cash Amt.	Est. Value	
Alvin	03/31/2014	Self-Employed	<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	1000.00		
Last Name Powell						
Address n/a						
Address2 n/a	<input checked="" type="checkbox"/> Monetary	Employer				Description
City	<input type="checkbox"/> In-Kind	Self-Employed				
State	<input type="checkbox"/> Common Source					
Zip	<input type="checkbox"/> Credit Received on Loan					
Aff. Comm.						
First Name Glenda	Date 03/30/2014	Occupation Consultant	<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	250.00		
Last Name Minkin						
Address 36 Delta Place						
Address2	<input checked="" type="checkbox"/> Monetary	Employer				Description
City Atlanta	<input type="checkbox"/> In-Kind	Self-Employed				
State Georgia	<input type="checkbox"/> Common Source					
Zip 30307	<input type="checkbox"/> Credit Received on Loan					
Aff. Comm.						
First Name Angela	Date 03/31/2014	Occupation Data Consultant	<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	101.00		
Last Name Brown						
Address 917 Oglethorpe Avenue						
Address2	<input checked="" type="checkbox"/> Monetary	Employer				Description
City Atlanta	<input type="checkbox"/> In-Kind	Self-Employed				
State Georgia	<input type="checkbox"/> Common Source					
Zip 30310	<input type="checkbox"/> Credit Received on Loan					
Aff. Comm.						
First Name Valerie E.	Date 03/31/2014	Occupation Housing Executive	<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	1000.00		
Last Name Edwards						
Address 558 Centennial Lane NW						
Address2	<input checked="" type="checkbox"/> Monetary	Employer				Description
City Atlanta	<input type="checkbox"/> In-Kind	City of Atlanta				
State Georgia	<input type="checkbox"/> Common Source					
Zip 3030313	<input type="checkbox"/> Credit Received on Loan					
Aff. Comm.						

Itemized Contributions Page Total \$ 2351.00 \$ 0.00

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)
 ** Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)
 *** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

CFC-CCDR 1/14

First Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
Steven	03/31/2014	Attorney	<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	250.00	
Last Name Labovitz					
Address 5655 Glen Errol Road					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind	McKenna Long & Aldridge			
State Georgia	<input type="checkbox"/> Common Source				
Zip 30327	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Carla	02/2014	Elected Official	<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		\$310.00
Last Name Smith					
Address n/a					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind				
State	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Urban Surburban	03/31/2014	Real Estate	<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		\$1690.00
Last Name					
Address 2705 Church Street					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City East Point	<input type="checkbox"/> In-Kind				
State Georgia	<input type="checkbox"/> Common Source				
Zip 30344	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Brenda J.	03/31/2014	Candidate	<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	2500.00	
Last Name Muhammad					
Address 1405 Woodland Avenue					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City Atlanta	<input type="checkbox"/> In-Kind	Director of Non-Profit Organization			
State Georgia	<input type="checkbox"/> Common Source				
Zip 30316	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Itemized Contributions Page Total \$				2750.00	\$ 2000.00

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)
 ** Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)
 *** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

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.) Brenda	1. 02/2014	First Name Brenda	1. Candidate
Lender Last Name Muhammad	2. \$2500.00	Last Name Muhammad	2. Candidate
Address 1405 Woodland Avenue	3. <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	Address 1405 Woodland Avenue	3. <input type="checkbox"/> Public Officer <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City Atlanta		City Atlanta	
State Georgia Zip 30316		State Georgia Zip 30316	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State Zip		State Zip	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total \$ <u>2500.00</u>	

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

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

*** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

CFC-CCDR1/14

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 City of East Point Last Name	Date 002/14/2014	Occupation n/a Employer n/a	Campaign Services	260.00
Address 1526 E. Forrest Avenue Address2 City East Point State Georgia Zip 30344	<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 Simon Signs System Last Name	Date 03/06/2014	Occupation Employer	Campaign Services	280.00
Address 3034 Lakewood Avenue SW Address2 City Atlanta State Georgia Zip 30310-5003	<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 Angela Last Name Brown	Date 03/08/2014	Occupation Consultant Employer Self-Employed	Campaign Services	250.00
Address 917 Oglethorpe Avenue Address2 City Atlanta State Georgia Zip 30310	<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 \$ **790.00**

* 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-CCDR111

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 Anthony Last Name Benton Address 2770 Colonial Drive Address2 City College Park State Georgia Zip 30337	Date 03/21/2014 <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 Consultant Employer Self Employed	Campaign Services	400.00
First Name Imani Services Last Name Address 917 Oglethorpe Avenue Address2 City Atlanta State Georgia Zip 30310	Date 03/24/2014 <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 Data Consultants Employer 	Campaign Services	250.00
First Name Steel Restaurant Last Name Address 950 West Peachtree Street Address2 City Atlanta State Georgia Zip 30308	Date 03/25/2014 <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 	Fundraiser	294.72

Page Total \$ **944.72**

* 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 1/14

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Imani Services Last Name Address 917 Oglethorpe Avenue Address2 City Atlanta State Georgia Zip 30310	Date 03/15/2014	Occupation Consultant Employer Imani Services	Campaign Services	185.00
First Name City of East Point Last Name Address 1526 E. Forrest Avenue Address2 City East Point State Georgia Zip 30344	Date 03/17/2014	Occupation n/a Employer n/a	Campaign Services	115.00
First Name Anthony Last Name Benton Address 2770 Colonial Drive Address2 City College Park State Georgia Zip 30337	Date 03/19/2014	Occupation Consultant Employer Self-Employed	Campaign Services	400.00
First Name Phred Last Name Huber Address n/a Address2 City State Zip	Date 03/20/2014	Occupation Campaign Manager Employer Committee to Elect Brenda Muhammad	Campaign Services	400.00

- Expenditure
- In-Kind
- Loan Repayment
- Refund
- Reimbursement
- Credit Card
- 3rd Party
- Deferred Payment
- Payment on Deferred Expense
- Investment

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment) Public Officer/Candidate/Other Than Candidate Committee Name Page Total \$ 1100.00

CFC-CCDR1/14

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 Carl Last Name Lee Address n/a Address2 City State Zip	Date 03/14/2014 <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 Self-Employed Employer 	Campaign Services	1000.00
First Name Carl Last Name Lee Address n/a Address2 City State Zip	Date 03/28/2014 <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 Self-Employed Employer 	Campaign Services	1500.00
First Name Patrick Last Name Arnold Address n/a Address2 City State Zip	Date 03/29/2014 <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 Computer Technician Employer Self-Employed	Campaign Services	125.00

Page Total \$ **2625.00**

* 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 1/14

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid	
First Name Danielle	Date 03/27/2014	Occupation Campaign Phone Banker	Campaign Services	125.00	
Last Name Jones					
Address 2705 Church Street					<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 East Point					
State Georgia Zip 30344					
Employer					
First Name Muriel	Date 03/27/2014	Occupation Campaign Phone Banker	Campaign Services	125.00	
Last Name Jones					
Address 2705 Church Street					<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 East Point					
State Georgia Zip 30344					
Employer					
First Name April	Date 03/28/2014	Occupation Campaign Coordinator	Campaign Services	400.00	
Last Name Billingslea					
Address 805 Cascade Knolls Drive					<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 Atlanta					
State Georgia Zip 30331					
Employer					
First Name Imani Services	Date 03/28/2014	Occupation Data Consultants	Campaign Services	900.00	
Last Name					
Address 917 Oglethorpe Avenue					<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 Atlanta					
State Georgia Zip 30310					
Employer					

* 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 \$ 900.00**

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name The Home Depot		Date 03/28/2014	Occupation n/a	Campaign Services	163.60
Last Name					
Address n/a					
Address2					
City					
State	Zip				
First Name Bank of America		Date 03/14/2014	Occupation n/a	Campaign Services	520.00
Last Name					
Address n/a					
Address2					
City					
State	Zip				
First Name Metro PCS		Date 03/31/2014	Occupation n/a	Campaign Services	105.00
Last Name					
Address n/a					
Address2					
City					
State	Zip				
First Name PayPal/Atlanta Printing		Date 03/27/2014	Occupation n/a	Campaign Services	500.00
Last Name					
Address n/a					
Address2					
City					
State	Zip				

- Expenditure
- In-Kind
- Loan Repayment
- Refund
- Reimbursement
- Credit Card
- 3rd Party
- Deferred Payment
- Payment on Deferred Expense
- Investment

- Expenditure
- In-Kind
- Loan Repayment
- Refund
- Reimbursement
- Credit Card
- 3rd Party
- Deferred Payment
- Payment on Deferred Expense
- Investment

- Expenditure
- In-Kind
- Loan Repayment
- Refund
- Reimbursement
- Credit Card
- 3rd Party
- Deferred Payment
- Payment on Deferred Expense
- Investment

- Expenditure
- In-Kind
- Loan Repayment
- Refund
- Reimbursement
- Credit Card
- 3rd Party
- Deferred Payment
- Payment on Deferred Expense
- Investment

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd-Party, Deferred Payment on Deferred Expense, Investment) Public Officer/Candidate/Other Than Candidate Committee Name **Brenda J. Muhammad** Page Total \$ 1288.60

CFC-CCDR 1/11

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Campaign Tshirts		Date 03/17/2014	Occupation Employer		567.00
Last Name					
Address 2705 Church Street		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Employer		
Address2					
City East Point					
State Georgia	Zip 30344				
Last Name					
First Name Bank of America		Date 03/14/2014	Occupation Telephone Bankers		520.00
Last Name					
Address n/a		<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Employer		
Address2					
City Atlanta					
State Georgia	Zip 30344				
Last Name					
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 <input type="checkbox"/> Investment	Occupation Employer		
Address2					
City					
State Georgia	Zip 30331				
Last Name					
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 <input type="checkbox"/> Investment	Occupation Employer		
Address2					
City					
State	Zip				
Last Name					

* 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 \$ 1087.00**

Public Officer/Candidate/Other Than Candidate Committee Name

Brenda J. Muhammad

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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> <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: \$ _____
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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.

[Empty area for Addendum Statement]