

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

<p><b>1. Report Type</b> (Select One)</p> <p><input checked="" type="checkbox"/> Original</p> <p><input type="checkbox"/> Amendment</p> <p>Amendment # _____</p>	<p><b>2. Filing is being made on behalf of (Select One):</b></p> <p><b>Candidate or Public Official</b></p> <p>Office Held or Sought: <u>FULTON COUNTY COMMISSION DIST 2</u>  <small>(Include county, municipality, district, post or judicial circuit)</small></p> <p>Filer ID: <u>C20130051</u>  <small>(Filer ID that begins with the letter "C")</small></p> <p><b>Organization or Person Other than Candidate's Campaign Committee</b></p> <p>Committee Name: _____</p> <p>Filer ID: _____  <small>(Filer ID that begins with the letter "OC")</small></p>	<p>Use Envelope or Post                  Mark or Hand Delivered                  Fulton County</p> <p><b>APR 04 2014</b></p> <p><b>A.G.</b></p> <p>Director of Registrations                  And Elections</p>
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**3. Identifying and Contact Information**

(1) FRINDS TO ELECT BOB ELLIS (2) 3-31-14  
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) P.O. BOX 1365 ROSWELL GA 30074  
Mailing Address City State Zip Code

(4) 404-268-5763 and/ or BOBELLISFORFULTON@GMAIL.COM  
Primary Contact Phone Number E-Mail

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

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

(7) If yes, complete the following:  
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><b>Supplemental Reporting</b></p> <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<small>*Persons leaving office with excess funds and each fund are expended as provided in the Act                      *Innocent 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>		

State of GEORGIA County of DEKALB

I, MICHAEL T. HASSINGER, 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 3-31, 2014

Michael T. Hassinger 6-10-14 RLG/CEM  
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**

1	<input type="checkbox"/> I have no contributions to report. <input type="checkbox"/> I have the following contributions, including Common Source, to report:	In-Kind Estimated Value	Cash Amount
2	A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns.		60,290 <sup>-</sup>
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		8,625 <sup>-</sup>
3a	All loans received this reporting period.		—
3b	Interest earned on campaign account this reporting period.		—
3c	Total amount of investments sold this reporting period.		—
3d	Total amount of cash dividends and interest paid out this reporting period.		—
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.		591 <sup>-</sup>
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		9,216 <sup>-</sup>
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		69,506 <sup>-</sup>

**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.		16,624.74
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		14,757.69
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		—
11	Total expenditures reported this period. (Line 9 + 10)		14,757.69
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		31,382.43

**INVESTMENTS**

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

**TOTAL NET BALANCE ON HAND**

15	Net balance on hand. (Line 6 - 12 + 14)		38,123.57
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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.	—
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)	0
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	

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

## State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name <b>RONNIE</b> Last Name <b>IZONDELL</b> Address <b>13390 PROVIDENCE LK DR</b> Address2  City <b>MILTON</b> State <b>GA</b> Zip <b>30004</b> Aff. Comm.	Date <b>03/14/14</b> <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation  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	<b>200</b>	Est. Value
First Name <b>GLENN</b> Last Name <b>WILLIAMS</b> Address <b>1090 BROOKSGLENN DR</b> Address2  City <b>ROSWELL</b> State <b>GA</b> Zip <b>30075</b> Aff. Comm.	Date <b>03-16-14</b> <input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation  Employer <b>UBPLANNING</b>	<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	<b>250</b>	Est. Value
First Name <b>STEVEN</b> Last Name <b>COOK</b> Address <b>72 COLE STR</b> Address2  City <b>MARIETTA</b> State <b>GA</b> Zip <b>30060</b> Aff. Comm.	Date <b>1/23/14</b> <input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation  Employer	<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	<b>250</b>	Est. Value

Itemized Contributions Page Total \$ **700** \$

First Name	Date	Occupation	Primary <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
First Name: DONALD Last Name: WALLACE Address: 13090 FREEMANVILLE Address2: <input checked="" type="checkbox"/> Monetary City: ALPHARETTA State: GA Zip: 30004 Aff. Comm.	3-11-14	PET		1000	
First Name: SCOTT Last Name: ALEXANDER Address: 1055 MARTIN RIDGE Address2: <input type="checkbox"/> Monetary City: ROSWELL State: GA Zip: 30076 Aff. Comm.	3-13-14	ENGINEER		100	
First Name: C. W. Last Name: MILTON Address: 11105 STRAUP RD Address2: <input type="checkbox"/> Monetary City: ROSWELL State: GA Zip: 30075 Aff. Comm.	3.13.14	INSURANCE		250	
First Name: JACK/CONNIE Last Name: STOW Address: 420 SADDLE CREEK CIR Address2: <input type="checkbox"/> Monetary City: ROSWELL State: GA Zip: 30076 Aff. Comm.	3-13-14			100	

Itemized Contributions Page Total \$ 1450 \$

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

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

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

First Name <b>ADLE/BILL</b>	Date <b>3-13-14</b>	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. <b>100</b>	Est. Value
Last Name <b>HAMILTON</b>					
Address <b>9525 RIVER LAKE</b>	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address2 City <b>ROSWELL</b> State <b>GA</b> Zip <b>30075</b> Aff. Comm.					
First Name <b>BRIAN</b>	Date <b>3/13/14</b>	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. <b>500</b>	Est. Value
Last Name <b>MARTIN</b>					
Address <b>5020 HEATHERWOOD CT</b>	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address2 City <b>ROSWELL</b> State <b>GA</b> Zip <b>30075</b> Aff. Comm.					
First Name <b>JAMES/KAREN</b>	Date <b>3-6-14</b>	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. <b>500</b>	Est. Value
Last Name <b>ZAUDERER</b>					
Address <b>BOX 724378</b>	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address2 City <b>ATLANTA</b> State <b>GA</b> Zip <b>31139</b> Aff. Comm.					
First Name <b>STEVE/AMANDA</b>	Date <b>3-6-14</b>	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. <b>100</b>	Est. Value
Last Name <b>QUINTANA</b>					
Address <b>12595 ITASKA WALK</b>	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address2 City <b>MILTON</b> State <b>GA</b> Zip <b>30004</b> Aff. Comm.					

Itemized Contributions Page Total \$ **1200** \$

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

First Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
First Name: <u>PEYTON/MEGAN JAMISON</u> Last Name: <u>JAMISON</u> Address: <u>13790 BIRMINGHAM W</u> Address2: City: <u>MILTON</u> State: <u>GA</u> Zip: <u>30004</u> Aff. Comm.	<u>3-6-14</u>		<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	<u>250</u>	
First Name: <u>ROBERT</u> Last Name: <u>WISE JR</u> Address: <u>215 BACK TREE CT</u> Address2: City: <u>ROSWELL</u> State: <u>GA</u> Zip: <u>30076</u> Aff. Comm.	<u>3-6-14</u>	<u>RET</u>	<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	<u>200</u>	
First Name: <u>HODGE IP</u> Last Name: Address: <u>10560 MONTCLAIR</u> Address2: City: <u>DULUTH</u> State: <u>GA</u> Zip: <u>30097</u> Aff. Comm.	<u>3-1-14</u>		<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	<u>1000</u>	
First Name: <u>ORKIN ASSOC.</u> Last Name: Address: <u>12600 DEERFIELD</u> Address2: <u>SUITE 150</u> City: <u>MILTON</u> State: <u>GA</u> Zip: <u>30004</u> Aff. Comm.	<u>3-3-14</u>		<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	<u>500</u>	

Itemized Contributions Page Total \$ 1950 \$

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

First Name <b>NATIVE AMEZI. ADU.</b>		Date <b>2-5-14</b>	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. <b>250</b>	Est. Value
Last Name		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description	
Address <b>801 N. BROOKSHADE PLW</b>			City <b>ALPHARETTA</b>	State <b>GA</b>		Zip <b>30004</b>
Address2		City <b>ALPHARETTA</b>	State <b>GA</b>	Zip <b>30004</b>	Aff. Comm.	
First Name <b>RUSSELL</b>		Date <b>2-16-14</b>	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. <b>125</b>	Est. Value
Last Name <b>BLOCKER</b>		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description	
Address <b>2180 WHITTINGHAM CT</b>			City <b>ROSWELL</b>	State <b>GA</b>		Zip <b>30075</b>
Address2		City <b>ROSWELL</b>	State <b>GA</b>	Zip <b>30075</b>	Aff. Comm.	
First Name <b>TIM/ANDREA</b>		Date <b>2-7-14</b>	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. <b>500</b>	Est. Value
Last Name <b>YOUNGSTEIN</b>		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description	
Address <b>415 TIMBER CREST LN</b>			City <b>ROSWELL</b>	State <b>GA</b>		Zip <b>30075</b>
Address2		City <b>ROSWELL</b>	State <b>GA</b>	Zip <b>30075</b>	Aff. Comm.	
First Name <b>MARK</b>		Date <b>2-2-14</b>	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. <b>200</b>	Est. Value
Last Name <b>ROBINSON</b>		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer		Description	
Address <b>12880 BUCKSPRINT LN</b>			City <b>ROSWELL</b>	State <b>GA</b>		Zip <b>30075</b>
Address2		City <b>ROSWELL</b>	State <b>GA</b>	Zip <b>30075</b>	Aff. Comm.	

Itemized Contributions Page Total \$ **1075** \$

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

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

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

First Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
First Name: ROBERT/JULIE Last Name: FERRIS Address: 11175 WILDERUN CT Address2: City: ROSWELL State: GA Zip: 30075 Aff. Comm.	2-6-14		<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	300	
First Name: SCOTT/KELLY MCKEWEY Last Name: MCKEWEY Address: 1305 CAS HIBBS WAY Address2: City: ROSWELL State: GA Zip: 30075 Aff. Comm.	2.6.14		<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	
First Name: CHRIS Last Name: COCCA Address: 1910 COLTON CREEK TR Address2: City: JOHN CREEK State: CA Zip: 30065 Aff. Comm.	2-15-14		<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	
First Name: ERIK Last Name: KESSINGER Address: 326 LUM CROWE RD Address2: City: ROSWELL State: GA Zip: 30075 Aff. Comm.	2-26-14	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	100	

Itemized Contributions Page Total \$ 750 \$

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

First Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
GERALD SCOTT	3-1-14	UP	<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	
Address: 5024 GUNNERS RUN		Employer: FIRST COMMUNITY DEVD.		Description:	
Address2: [blank]		Monetary: <input checked="" type="checkbox"/> In-Kind: <input type="checkbox"/> Common Source: <input type="checkbox"/> Credit Received on Loan: <input type="checkbox"/>			
City: ROSWELL					
State: GA Zip: 30075					
Aff. Comm.:					
CHRIS COLLA	3-12-14		<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	
Address: 190 COLTON CREST CIR		Employer:		Description:	
Address2:		Monetary: <input type="checkbox"/> In-Kind: <input type="checkbox"/> Common Source: <input type="checkbox"/> Credit Received on Loan: <input type="checkbox"/>			
City: JOHNS CROOK					
State: GA Zip: 30005					
Aff. Comm.:					
MIKE/JULIE TURNER	3-12-14	UP	<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	
Address: 1090 OAK HAVEN DR		Employer: HOME SERVICE		Description:	
Address2:		Monetary: <input checked="" type="checkbox"/> In-Kind: <input type="checkbox"/> Common Source: <input type="checkbox"/> Credit Received on Loan: <input type="checkbox"/>			
City: ROSWELL					
State: GA Zip: 30075					
Aff. Comm.:					
WILLIAM BECKENMYER	3-18-14		<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	
Address: 9560 RIVER LAKE		Employer:		Description:	
Address2:		Monetary: <input checked="" type="checkbox"/> In-Kind: <input type="checkbox"/> Common Source: <input type="checkbox"/> Credit Received on Loan: <input type="checkbox"/>			
City: ROSWELL					
State: GA Zip: 30075					
Aff. Comm.:					

Itemized Contributions Page Total \$ 750 \$

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

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

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

First Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
First Name: ROCK Last Name: KENNEY Address: 450 NORTHWOOD COURT Address2: City: MILTON State: GA Zip: 30004 Aff. Comm.:	3-21-14	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	250	
			Description		
First Name: BUILDERS PAC Last Name: Address: 3015 COMP CREEK PL WY Address2: City: ATLANTA State: GA Zip: 30344 Aff. Comm.:	3-27-14		<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	
			Description		
First Name: KIM Last Name: GAUGETZ Address: 422 CALTON HILL Address2: City: MILTON State: GA Zip: 30004 Aff. Comm.:	3-13-14		<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		750
			Description		
			EVENT SUPPLIES & HOSTING		
First Name: SCOTT Last Name: McKELVIEY Address: 1305 CASHIERS WAY Address2: City: ROSWELL State: GA Zip: 30075 Aff. Comm.:			<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		500
			Description		
			EVENT SUPPLIES & HOSTING		

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

## 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 <i>MUSICHE STRATEGIC GROUP</i> Last Name	Date <i>2-14-14</i>	Occupation  Employer	<i>GENERAL CONSULTING</i>	<i>2100</i>
Address <i>2521 GRAMERCY PK CIR</i> Address2  City <i>DULUTH</i> State <i>GA</i> Zip <i>30097</i>	<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 <i>ANEDOT</i> Last Name	Date	Occupation  Employer	<i>TRANSACTION FEE</i>	<i>50.85</i>
Address <i>THIRD STREET</i> Address2 <i>SUITE 213</i> City <i>BATON ROUGE</i> State <i>LA</i> Zip <i>70701</i>	<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 <i>PEACHTREE PUBLIC RELATIONS</i> Last Name	Date	Occupation  Employer	<i>CONTENT, SOCIAL MEDIA, PRESS</i>	<i>250</i>
Address <i>3370 FORBES KNOLL DRIVE</i> Address2  City <i>DULUTH</i> State <i>GA</i> Zip <i>30097</i>	<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 \$ 2400.85

\* 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

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name INSIGHT STRATEGIC GROUP Last Name		Date 2-14-14	Occupation  Employer	CONSULTING	3351.14
Address 2521 GRAMERCY PARK CIR Address2  City DULUTH State GA Zip 30097					
<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 HI-TECH SIGNS Last Name		Date 2-19-14	Occupation  Employer	YARD SIGNS	1,600.50
Address 1019 NORTH FIFTH AVE. Address2  City Rome State GA Zip 30165					
<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 INSIGHT STRAT. GROUP Last Name		Date 2-17-14	Occupation  Employer	GENERAL CONSULTING	2500
Address 2521 GRAMERCY PK. CIRCUS Address2  City DULUTH State GA Zip 30097					
<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 FULTON COUNTY REPUBLICAN Last Name PARTY		Date 2-28-14	Occupation  Employer	QUALIFYING FEE	1056
Address PARKSIDE SHOPPING CENTER Address2 5920 ROSWELL ROAD/STE A-206 City SANDY SPRINGS State GA Zip 30328					
<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					

\* 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 \$ 8510.64

First Name <b>PEACHTREE PUB. RELATIONS</b>	Date <b>2-27-14</b>	Occupation	CONTENT, SOCIAL MEDIA PRESS	250 <sup>00</sup>
Last Name		Employer		
Address <b>3398 FOREST KNOLL DRIVE</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	Employer		
Address2				
City <b>DULUTH</b>				
State <b>GA</b>	Zip <b>30091</b>			
First Name <b>INSIGHT STRATEGIC GROUP</b>	Date <b>3-13-14</b>	Occupation	CONSULTING	3596 <sup>20</sup>
Last Name		Employer		
Address <b>2521 GRAMERCY PARK CIR.</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	Employer		
Address2				
City <b>DULUTH</b>				
State <b>GA</b>	Zip <b>30097</b>			
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	Employer		
Address2				
City				
State	Zip			
First Name	Date	Occupation		
Last Name				
Address	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
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 \$ **3046.20**

Public Officer/Candidate/Other Than Candidate Committee Name

**ROBERT C. ELUS JR.**

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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					
<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 _____ 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					
<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: \$ _____