

CFC-CCDR 1/14

4/14

Campaign Contribution Disclosure Report
Georgia Government Transparency and Campaign Finance Commission
 200 Piedmont Avenue S.E. | Suite 1402 West Tower | Atlanta, GA 30334 | 404-463-1980 | www.ethics.ga.gov

1. Report Type (Select One) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment Amendment # _____	2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought: <u>Fulton Co Comm Dist. 1</u> <small>(Include county, municipality, district, post or judicial circuit)</small> Filer ID: <u>C201000183</u> <small>(Filer ID that begins with the letter "C")</small>	RECEIVED Use Envelope or Post Mark or Hand Delivered Date APR 07 2014 Director of Registrations Director of Registrations And Elections
	Organization or Person Other than Candidate's Campaign Committee Committee Name: <u>Hausmann for Fulton Co Comm District 1</u> Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>	

3. Identifying and Contact Information

(1) Liz Hausmann (2) 4-1-14
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 9015 Niblick Dr Johns Creek GA 30022
Mailing Address City State Zip Code

(4) 770-318-9722 and/ or _____
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 EMIT

(7) If yes, complete the following: Katie Reeves | Beth Hausmann
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)
Supplemental Reporting <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<small>*Persons leaving office with excess funds until such funds are expended as provided in the Act *Unsuccessful candidates with excess funds, or who receive contributions to retire debt incurred, until such funds are expended, or such unpaid debts are satisfied (December 31 filing only)</small>		

State of Georgia County of Fulton

I, Elizabeth Hausmann 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 4/7, 2014

[Signature] 11/7/15 [Signature]
Signature of Notary Public Commission Expiration a. Signature of Candidate

TRES B. KREVER
 Notary Public, Cherokee County, Georgia
 My Commission Expires Jan 7, 2015
 b. Organization/Chairperson/Treasurer

RECEIVED
APR 09 2014
10:19 AM

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State of Georgia Campaign Contribution Disclosure Report Summary Report			
CONTRIBUTIONS RECEIVED			
1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	In-Kind Estimated Value	Cash Amount
2	A. If this is the first time to file a disclosure report for the current 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.		12,642.10
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		10,200
3a	All loans received this reporting period.		0
3b	Interest earned on campaign account this reporting period.		0
3c	Total amount of investments sold this reporting period.		0
3d	Total amount of cash dividends and interest paid out this reporting period.		0
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.		0
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		10,200
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		22,842.10
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.		5739.40
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		2402.12
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		440.00
11	Total expenditures reported this period. (Line 9 + 10)		2842.12
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		8581.52
INVESTMENTS			
13	Total value of investments held at the beginning of this reporting period.		0
14	Total value of investments held at the end of this reporting period.		0
TOTAL NET BALANCE ON HAND			
15	Net balance on hand. (Line 6 - 12 + 14)		14,260.58

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

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

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

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

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State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions		
	Received Date Contribution Type*	Occupation & Employer			Estimated Value		
					Description		
First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value		
Last Name	<div style="font-size: 2em; font-family: cursive;">See attached Spreadsheet</div>		<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							
Address2						<input 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.							
First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value		
Last Name	<div style="font-size: 2em; font-family: cursive;">See attached Spreadsheet</div>		<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							
Address2						<input 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.							
First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value		
Last Name	<div style="font-size: 2em; font-family: cursive;">See attached Spreadsheet</div>		<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							
Address2						<input 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.							

Itemized Contributions Page Total \$ _____ \$ _____

Public Officer/Candidate/Other Than Candidate Committee Name

Hausmann for Falta Co Comm

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Crawford	Elizabeth	Crawford, Elizabeth	\$250	5090 Riverview Road	Atlanta	GA	30327	Homemaker
Harless	Bill	Harless, William	\$250	8410 N. Pine Haven Pt.	Crystal River	FL	34428	Engineer
Harris	Dorothy	D. Clark Harris, Inc.	\$500	225 Banks Road	Fayetteville	GA	30214	Consultant
Hausmann	Jurgen	Hausmann, Jurgen	\$100	9280 Chandler Bluff	Alpharetta	GA	30022	Businessman
Hodge	Penn	Hodge Investment Partners, L	\$1,000	10560 Montclair Way	Duluth	GA	30097	Businessman
Jardine	Glenn	Heery International, Inc.	\$1,000	999 Peachtree Street	Atlanta	GA	30309	Construction Mgr.
Mullis	Sen. Jeff	Mullis, Senator Jeff	\$500	212 English Avenue	Chickamau	GA	30707	Senator
Musso	Dr. Carlo	CorrectHealth LLC	\$1,000	3384 Pearl Suite 700	Atlanta	GA	30326	Consultant
Pond	Al	Pond & Company	\$250	3500 Parkv Suite 600	Norcross	GA	30092	Engineer
Pratt	Dave	CASH	\$100		Atlanta	GA		Govt. Affairs So. Strategy
Quattroch	Bob	Quattrochi, Bob	\$1,000	5960 Whitestone Ln.	Suwanee	GA	30024	Pres./Northside Hospital
Riley	Bill	Riley McLendon, LLC	\$1,000	315 Washington Avenue	Marietta	GA	30080	Attorney
Smith	Julie	Smith, Julie	\$250	6463 Charriot St., NE	Atlanta	GA	30328	Verizon Govt. Affairs
Smith	Ray	Ray S. Smith, III, LLC	\$150	Five Conco Suite 2600	Atlanta	GA	30328	Attorney
Wingate	Mark	Paygate Consulting, LLC	\$100	635 Portico Pt.	Alpharetta	GA	30022	Businessman
Green	Ron	Cauley Creek	\$1,000	1145 Heard's Ferry Rd. NW	Atlanta	GA	30328	Businessman
Viola		Viola Support Services	\$1,500	125 S. 84th St., Suite 175	Milwaukee	WI	53214	Water services
Labovitz	Steven	McKenna, Long	\$250	5655 Glenn Errol Road	Atlanta	GA	30327	Attorney

TOTAL

\$10,200

Hausmann for Fulton Co Comm
Dec. 4, 17 11

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State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total more than \$100.00.

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>Fulton GOP</i> Last Name <i>5920</i> Address <i>Roswell Rd</i> Address2 <i>Sandy Springs</i> City <i>Ga</i> State <i>Ga</i> Zip <i>30328</i>	Date <i>2-8-14</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	Occupation Employer	<i>Dues</i>	<i>192⁰⁰</i>
First Name <i>Fulton GOP</i> Last Name Address <i>5920 Roswell Rd</i> Address2 City <i>Sandy Springs</i> State <i>Ga</i> Zip <i>30328</i>	Date <i>3-4-14</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	Occupation Employer	<i>Qualifying Fee</i>	<i>\$1050.⁰⁰</i>
First Name <i>Hardmark</i> Last Name <i>Communications</i> Address <i>11300 Atlantis Pl</i> Address2 <i>Ste F</i> City <i>Alpharetta</i> State <i>GA</i> Zip <i>30022</i>	Date <i>3-19-14</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	Occupation Employer <i>Consultant</i>	<i>Website</i>	<i>185⁰⁰</i>

Page Total \$ *1,427⁰⁰*

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

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>Fados</i>	Last Name	Date <i>2/25/14</i>	Occupation <i>Restaurant</i>	Expenditure Purpose <i>Compassion Event</i>	Amount Paid <i>675.12</i>
Address <i>273 Buckhead Ave</i>					
Address2	City <i>Atlanta</i>	<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		
State <i>GA</i>					
First Name <i>Johns Creek</i>	Last Name <i>Chamber of Commerce</i>	Date <i>3/21/14</i>	Occupation	Expenditure Purpose <i>Sponsorship</i>	Amount Paid <i>200.00</i>
Address <i>10475 Medlock Bridge</i>					
Address2	City <i>Johns Creek</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	Employer		
State <i>GA</i>					
First Name	Last Name	Date	Occupation		
Address					
Address2	City	<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		
State					
First Name	Last Name	Date	Occupation		
Address					
Address2	City	<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		
State					

* 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 \$ *975.12*

Public Officer/Candidate/Other Than Candidate Committee Name *Hausmann for Fulton Co Comm* Page *7* of *7*

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State of Georgia Campaign Contribution Disclosure Report Investments Statement

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

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

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

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

<u>Total value of investments at beginning of reporting period \$</u>	Page Total Cash Dividends: \$ _____
<u>Total value of investments at end of reporting period \$</u>	Page Total Interest Paid Out: \$ _____
<u>Total difference in value \$</u>	Page Total Profit: \$ _____
	Page Total Loss: \$ _____