

# 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

<b>1. Report Type</b> (Select One) <input checked="" type="checkbox"/> <b>Original Report</b>  <input type="checkbox"/> <b>Amendment</b>  Amendment # _____	<b>2. Filing is being made on behalf of: (Select One)</b> <b>Candidate or Public Official</b>  Office Held or Sought <u>Atlanta City Council District 9</u> <small>(Include county, municipality, district, post, or judicial circuit)</small> Filer ID <u>C2017000129</u> <b>Report of Organization or Person Other than Candidate's Campaign Committee</b> Committee Name: _____ Filer ID _____	<b>Filing office use Only</b>   <b>Use Earlier of Post Mark or Hand Delivered Date</b>
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### 3. Identifying and Contact Information

- (1) Dustin Hillis (2) 11/30/2017  
*Full Name of Candidate or Other Than Candidate Campaign Committee* *Today's Date*
- (3) Atlanta GA 30318  
*Mailing Address* *City* *State* *Zip Code*
- (4) \_\_\_\_\_ and / or \_\_\_\_\_  
*Primary Contact Phone Number* *E-Mail*
- (5) If a Candidate or Public Official, is there campaign committee (one or more persons) to make campaign transactions, keep the financial records of the campaign, or file the reports? ☒ **Yes** ☐ **No**
- (6) If so, is the Committee registered with the State Ethics Commission? ☒ **Yes** ☐ **No**
- (7) If so, complete the following: Dustin Hillis Dustin Hillis  
*Name of Committee Chairperson* *Name of Committee Treasurer*

### 4. Period for which you are Reporting

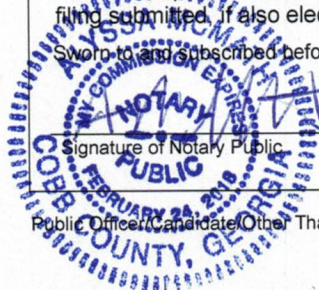
**You Must Check Only One Box**

My Non Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Elections <small>(Report required only if you are in a Special Election)</small>
<input type="checkbox"/> January 31, <u>2017</u> (year) <input type="checkbox"/> June 30, <u>2017</u> (year) <b>Supplemental Reporting</b> <input type="checkbox"/> June 30, <u>2017</u> (year) <input type="checkbox"/> Dec. 31, <u>2017</u> (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>	<input type="checkbox"/> January 31, <u>2017</u> (year) <input type="checkbox"/> March 31, <u>2017</u> (year) <input type="checkbox"/> June 30, <u>2017</u> (year) <input type="checkbox"/> September 30, <u>2017</u> (year) <input type="checkbox"/> October 25, <u>2017</u> (year) <input type="checkbox"/> Dec. 31, <u>2017</u> (year)	<input type="checkbox"/> 6 days before Primary Run-Off, <u>2017</u> (year) <input checked="" type="checkbox"/> 6 days before General Run-Off, <u>2017</u> (year) <input type="checkbox"/> 6 days before Special Primary Run-Off, <u>2017</u> (year) <input type="checkbox"/> 6 days before Special Run-Off, <u>2017</u> (year)	<input type="checkbox"/> 15 days before Special Primary, <u>2017</u> (year)  <input type="checkbox"/> 15 days before Special, <u>2017</u> (year)  <input type="checkbox"/> Dec. 31, <u>2017</u> (year)

### Verification by Oath or Affirmation

I, Dustin Hillis State of Georgia County of Fulton, 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 November 30th, 2017



Signature of Notary Public

Commission Expiration 2/24/18

a. Signature of Candidate

b. Organization/Chairperson/Treasurer

12/01/2017 10:39 PM

12/01/2017 10:39 PM

Public Official/Candidate/Other Than Candidate Committee Name

Dustin Hillis for Atlanta, INC

Page 1 of 23

# Campaign Contribution Disclosure Report

## Georgia Government Transparency and Campaign Finance Commission

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<b>1. Report Type</b> (Select One) <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Amendment Amendment # _____	<b>2. Filing is being made on behalf of: (Select One)</b> Candidate or Public Official Office Held or Sought <u>Atlanta City Council District 9</u> (Include county, municipality, district, post, or judicial circuit) Filer ID <u>C2017000129</u> Report of Organization or Person Other than Candidate's Campaign Committee Committee Name: _____ Filer ID _____	Filing office use Only  Use Earlier of Post Mark or Hand Delivered Date
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### 3. Identifying and Contact Information

(1) Dustin Hillis (2) 11/30/2017  
*Full Name of Candidate or Other Than Candidate Campaign Committee* *Today's Date*

(3) Atlanta GA 30318  
*Mailing Address* *City* *State* *Zip Code*

(4) \_\_\_\_\_ and / or \_\_\_\_\_  
*Primary Contact Phone Number* *E-Mail*

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

(6) If so, is the Committee registered with the State Ethics Commission? ☒ Yes ☐ No

(7) If so, complete the following: Dustin Hillis Dustin Hillis  
*Name of Committee Chairperson* *Name of Committee Treasurer*

### 4. Period for which you are Reporting

You Must Check Only One Box

My Non Election Year	My Election Year	Run-Offs (Report required only if you are in a Run-Off Election)	Special Elections (Report required only if you are in a Special Election)
<input type="checkbox"/> January 31, <u>2017</u> (year) <input type="checkbox"/> June 30, <u>2017</u> (year) <b>Supplemental Reporting</b> <input type="checkbox"/> June 30, <u>2017</u> (year) <input type="checkbox"/> Dec. 31, <u>2017</u> (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>	<input type="checkbox"/> January 31, <u>2017</u> (year) <input type="checkbox"/> March 31, <u>2017</u> (year) <input type="checkbox"/> June 30, <u>2017</u> (year) <input type="checkbox"/> September 30, <u>2017</u> (year) <input type="checkbox"/> October 25, <u>2017</u> (year) <input type="checkbox"/> Dec. 31, <u>2017</u> (year)	<input type="checkbox"/> 6 days before Primary Run-Off, <u>2017</u> (year) <input checked="" type="checkbox"/> 6 days before General Run-Off, <u>2017</u> (year) <input type="checkbox"/> 6 days before Special Primary Run-Off, <u>2017</u> (year) <input type="checkbox"/> 6 days before Special Run-Off, <u>2017</u> (year)	<input type="checkbox"/> 15 days before Special Primary, <u>2017</u> (year) <input type="checkbox"/> 15 days before Special, <u>2017</u> (year) <input type="checkbox"/> Dec. 31, <u>2017</u> (year)

### Verification by Oath or Affirmation

State of \_\_\_\_\_

County of \_\_\_\_\_

I, \_\_\_\_\_, being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on \_\_\_\_\_, 20\_\_\_\_

Signature of Notary Public

Commission Expiration

a. Signature of Candidate

b. Organization/Chairperson/Treasurer

# State of Georgia Campaign Contribution Disclosure Report Summary Report

## CONTRIBUTIONS RECEIVED

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.	\$4,223.03	\$53,578.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$16,555.00
3a	All loans received this reporting period.		\$0.00
3b	Interest earned on campaign account this reporting period.		\$0.00
3c	Total amount of investments sold this reporting period.		\$0.00
3d	Total amount of cash dividends and interest paid out this reporting period.		
4	Total amount of all separate contributions of less than \$100.00 received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.	\$0.00	\$441.00
5	Total contributions reported this period (Line 3 + 3a + 3b + 3c + 3d + 4).	\$0.00	\$16,996.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$4,223.03	\$70,574.00

## EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures report:	In-Kind Estimated Value	Cash Amount
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	\$0.00	\$36,376.08
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$18,450.04
10	Total amount of all separate expenditures of less than \$100.00 that were made in this reporting period and not listed on the "Itemized Expenditures" page.	\$0.00	\$0.00
11	Total expenditures reported this period. (Line 9 + 10)	\$0.00	\$18,450.04
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$54,826.12

## 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 - Line 12 + Line 14)		\$15,747.88
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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 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 / Business Name Steve  Last Name Brock  Address 1110 Northchase Pkwy SE  Address2 Ste 150  City Marietta  State GA      Zip 30067-6410  Aff. Comm.	Date 11/15/2017  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Realestate  Employer Brock Built Homes	<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 2017	Cash Amt. \$1,400.00	Est. Value \$0.00  Description
First Name / Business Name Kelly  Last Name Bowles  Address 259 Olympic Pl  Address2 Unit 27  City Decatur  State GA      Zip 30030-3637  Aff. Comm.	Date 10/28/2017  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Registered Nurse  Employer Piedmont Hospital; Emory Healthcare	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary 2017	Cash Amt. \$25.00	Est. Value \$0.00  Description
First Name / Business Name Georgia Hotel & Lodging Association  Last Name   Address 6600 Sugarloaf Pkwy  Address2 Ste 400  City Duluth  State GA      Zip 30097-4345  Aff. Comm.	Date 11/16/2017  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <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 2017	Cash Amt. \$250.00	Est. Value \$0.00  Description

**Itemized Contribution Page Total**

\$1,675.00

\$0.00

# 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 / Business Name Ronell	Date 11/10/2017	Occupation Consultant	<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  2017	Cash Amt. \$25.00	Est. Value \$0.00
Last Name Pugh					
Address 2067 Callaway Ct NW					
Address2					
City Atlanta					
State GA					Zip 30318-1080
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Pugh Marketing Group LLC			Description
First Name / Business Name Kelly	Date 11/20/2017	Occupation realtor	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Galloway					
Address 2232 Forrest Pl NW					
Address2					
City Atlanta					
State GA					Zip 30318-1173
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Atlanta Communities			Description
First Name / Business Name Thor	Date 11/09/2017	Occupation Realtor	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00
Last Name Nissen					
Address 3484 Danvers Walk SE					
Address2					
City Smyrna					
State GA					Zip 30080-1624
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed			Description

**Itemized Contribution Page Total**

\$176.00

\$0.00

## 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.  
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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 / Business Name Adam	Date 11/20/2017	Occupation Developer	<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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00			
Last Name Brock								
Address 1735 Grand Oaks Dr								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Self			Description	
City Woodstock								
State GA								Zip 30188-4863
Aff. Comm.								
First Name / Business Name James	Date 11/20/2017	Occupation Engineer	<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  2017	Cash Amt. \$200.00	Est. Value \$0.00			
Last Name Martin								
Address 764 Verner St NW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Georgia Tech			Description	
City Atlanta								
State GA								Zip 30318-7638
Aff. Comm.								
First Name / Business Name Justin	Date 11/20/2017	Occupation 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  2017	Cash Amt. \$150.00	Est. Value \$0.00			
Last Name Lanier								
Address 1990 Main St NW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Self Employed			Description	
City Atlanta								
State GA								Zip 30318-1851
Aff. Comm.								

**Itemized Contribution Page Total**

\$1,350.00

\$0.00

# 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.  
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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 / Business Name Thomas	Date 11/16/2017	Occupation Consultant	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00
Last Name Fischer					
Address 2700 Ridgemore Rd NW					
Address2					
City Atlanta					
State GA					Zip 30318-1446
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self-Employed			
First Name / Business Name Dwight	Date 11/01/2017	Occupation real estate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$1,000.00	Est. Value \$0.00
Last Name Bell					
Address 1230 Peachtree St NE					
Address2 Ste 225					
City Atlanta					
State GA					Zip 30309-3522
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Cannon Equities			
First Name / Business Name Atlanta Professional Firefighters	Date 11/16/2017	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  2017	Cash Amt. \$400.00	Est. Value \$0.00
Last Name					
Address 161 Mangum St SW					
Address2					
City Atlanta					
State GA					Zip 30313-1336
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			

**Itemized Contribution Page Total**

\$1,501.00

\$0.00

# State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

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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 / Business Name Louisa	Date 11/15/2017	Occupation Homemaker	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00
Last Name Zufi					
Address 2575 Ridgewood Rd NW					
Address2					
City Atlanta					
State GA					Zip 30318-1317
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer homemaker			Description
First Name / Business Name Bruce	Date 11/13/2017	Occupation Retired	<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  2017	Cash Amt. \$50.00	Est. Value \$0.00
Last Name Clevenger					
Address 2517 Forrest Ave NW					
Address2					
City Atlanta					
State GA					Zip 30318-1114
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired			Description
First Name / Business Name Noel	Date 11/15/2017	Occupation Real Estate	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Khalil					
Address 2375 Hyde Park Ct NW					
Address2 Ste 300					
City Atlanta					
State GA					Zip 30318-2388
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Columbia Residential			Description

**Itemized Contribution Page Total**

\$651.00

\$0.00



## State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

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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 / Business Name Jonnene	Date 11/20/2017	Occupation 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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Nagel					
Address 2032 Hatteras Way NW					
Address2					
City Atlanta					
State GA					Zip 30318-1082
Aff. Comm.	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed			
First Name / Business Name Galloway Law Group	Date 11/09/2017	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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name					
Address 3500 Lenox Rd NE					
Address2 Ste 760					
City Atlanta					
State GA					Zip 30326-4235
Aff. Comm.	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			
First Name / Business Name Atlanta Realtors PAC	Date 11/26/2017	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  2017	Cash Amt. \$750.00	Est. Value \$0.00
Last Name					
Address 5784 Lake Forrest Dr					
Address2					
City Atlanta					
State GA					Zip 30328-6203
Aff. Comm.	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			

**Itemized Contribution Page Total**

\$1,350.00

\$0.00

# 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.  
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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 / Business Name John	Date 11/13/2017	Occupation  President	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00			
Last Name Noel								
Address 2125 Bolton Rd NW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Energy & Enviroment			Description	
City Atlanta								
State GA								Zip 30318-1107
Aff. Comm.								
First Name / Business Name IBPO	Date 11/16/2017	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  2017	Cash Amt. \$1,000.00	Est. Value \$0.00			
Last Name								
Address 581 Joseph E Boone Blvd NW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer			Description	
City Atlanta								
State GA								Zip 30314-3839
Aff. Comm.								
First Name / Business Name Matthew	Date 11/16/2017	Occupation  Sales Manager	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00			
Last Name Bond								
Address 2038 Hatteras Way NW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Relypsa			Description	
City Atlanta								
State GA								Zip 30318-1082
Aff. Comm.								

**Itemized Contribution Page Total**

\$1,750.00

\$0.00

# 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 / Business Name Robert	Date 11/20/2017	Occupation Information Requested	<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  2017	Cash Amt. \$100.00	Est. Value \$0.00
Last Name Young					
Address					
Address2					
City		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Information Requested	Description
State      Zip					
Aff. Comm.					
First Name / Business Name Keith	Date 11/15/2017	Occupation Realtor	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Sharp					
Address 3650 Habersham Rd NW					
Address2				<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Keller Williams Buckhead
City Atlanta					
State      Zip GA      30305-1177					
Aff. Comm.					
First Name / Business Name Jessa	Date 11/13/2017	Occupation tree service	<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  2017	Cash Amt. \$500.00	Est. Value \$0.00
Last Name Boutte					
Address 2144 Bolton Rd NW					
Address2				<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Boutte Tree
City Atlanta					
State      Zip GA      30318-1161					
Aff. Comm.					

**Itemized Contribution Page Total**

\$1,100.00

\$0.00

# 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 / Business Name Georgia Hotel & Lodging Association	Date 11/04/2017	Occupation	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name					
Address 6600 Sugarloaf Pkwy					
Address2 Ste 400	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
City Duluth					
State GA				Zip 30097-4345	
Aff. Comm.					
First Name / Business Name James	Date 11/09/2017	Occupation  Retired	<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  2017	Cash Amt. \$25.00	Est. Value \$0.00
Last Name Askren II					
Address 1475 Hanover West Dr NW					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired			Description
City Atlanta					
State GA				Zip 30327-1117	
Aff. Comm.					
First Name / Business Name Keri	Date 11/09/2017	Occupation  homemaker	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00
Last Name Arroll					
Address 1811 Moores Mill Rd NW					
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer my family			Description
City Atlanta					
State GA				Zip 30318-1307	
Aff. Comm.					

**Itemized Contribution Page Total**

\$376.00

\$0.00

# 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 / Business Name Keri	Date 11/18/2017	Occupation homemaker	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00
Last Name Arroll					
Address 1811 Moores Mill Rd NW					
Address2					
City Atlanta					
State GA					Zip 30318-1307
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer my family			
First Name / Business Name Adrianne	Date 11/28/2017	Occupation Executive Assistant	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00
Last Name BARKELL					
Address 2213 Parkview Ln NW					
Address2					
City Atlanta					
State GA					Zip 30318-1234
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Peachtree Tents & Events			
First Name / Business Name Jennifer	Date 11/11/2017	Occupation Real estate	<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  2017	Cash Amt. \$250.00	Est. Value \$0.00
Last Name Henley					
Address 2710 Ridgemore Rd NW					
Address2					
City Atlanta					
State GA					Zip 30318-1446
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Beacham and company			

**Itemized Contribution Page Total**

\$452.00

\$0.00

# 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 / Business Name Metro Green Recycling Two, LLC	Date 11/16/2017	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  2017	Cash Amt. \$1,400.00	Est. Value \$0.00		
Last Name							
Address 4351 Pleasantdale Rd							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer			
City Atlanta							
State GA							Zip 30340-3524
Aff. Comm.							
First Name / Business Name Brandon	Date 11/07/2017	Occupation  Real Estate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary  2017	Cash Amt. \$500.00	Est. Value \$0.00		
Last Name Ashkouti							
Address 4790 Harris Trl							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Eden Rock			
City Atlanta							
State GA							Zip 30327-4410
Aff. Comm.							
First Name / Business Name Jennifer	Date 11/16/2017	Occupation  Court Reporter	<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  2017	Cash Amt. \$300.00	Est. Value \$0.00		
Last Name Ourada							
Address 121 Rose Ridge Dr							
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Self-Employed			
City Canton							
State GA							Zip 30115-2705
Aff. Comm.							

**Itemized Contribution Page Total**

\$2,200.00

\$0.00

## 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 / Business Name Summerview Nursery	Date 11/25/2017	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  2017	Cash Amt. \$500.00	Est. Value \$0.00			
Last Name								
Address 183 Summer View Ln								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer			Description	
City McMinnville								
State TN								Zip 37110-6908
Aff. Comm.								
First Name / Business Name John	Date 11/29/2017	Occupation  Business Owner	<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  2017	Cash Amt. \$1,400.00	Est. Value \$0.00			
Last Name Hunsucker								
Address 1801 Peachtree St NE								
Address2 Ste 225		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Property Tax Consulting LLC		Description		
City Atlanta								
State GA							Zip 30309-1884	
Aff. Comm.								
First Name / Business Name William	Date 11/20/2017	Occupation  Doctor	<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  2017	Cash Amt. \$20.00	Est. Value \$0.00			
Last Name Cooper								
Address 1631 Laurel Ave NW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Self		Description		
City Atlanta								
State GA							Zip 30318-3615	
Aff. Comm.								

**Itemized Contribution Page Total**

\$1,920.00

\$0.00

# 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 / Business Name Stop N Shop Food Market	Date 11/13/2017	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  2017	Cash Amt. \$250.00	Est. Value \$0.00			
Last Name								
Address 785 Lee St SW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer			Description	
City Atlanta								
State GA								Zip 30310-2762
Aff. Comm.								
First Name / Business Name Carol	Date 11/17/2017	Occupation  Retired	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00			
Last Name Baird								
Address 2752 Ridgemore Rd NW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Retired			Description	
City Atlanta								
State GA								Zip 30318-1446
Aff. Comm.								
First Name / Business Name Trevor	Date 11/23/2017	Occupation  Area Manager - Southeast	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00			
Last Name Boylan								
Address 1748 Ellen St NW								
Address2		<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Employer Expedia Inc			Description	
City Atlanta								
State GA								Zip 30318-2712
Aff. Comm.								

**Itemized Contribution Page Total**

\$452.00

\$0.00



# 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 / Business Name Charlotte	Date 11/23/2017	Occupation Retired	<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  2017	Cash Amt. \$101.00	Est. Value \$0.00
Last Name Isaacs					
Address 283 Mason Grissom Rd					
Address2					
City Rock Island					
State TN					Zip 38581-3810
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Retired			
First Name / Business Name Jonnene	Date 11/09/2017	Occupation 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  2017	Cash Amt. \$101.00	Est. Value \$0.00
Last Name Nagel					
Address 2032 Hatteras Way NW					
Address2					
City Atlanta					
State GA					Zip 30318-1082
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer Self Employed			
First Name / Business Name Scofflaw	Date 11/26/2017	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  2017	Cash Amt. \$1,400.00	Est. Value \$0.00
Last Name					
Address 2751 Margaret Mitchell Dr NW					
Address2					
City Atlanta					
State GA					Zip 30327-1840
Aff. Comm.					
	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			

**Itemized Contribution Page Total**

\$1,602.00

\$0.00

# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Cameron	Date 11/20/2017	Occupation Information Requested	voter outreach management	\$125.00
Last Name McGraw	<input checked="" type="checkbox"/> Expenditure	Employer Information Requested		
Address	<input type="checkbox"/> In-kind			
Address2	<input type="checkbox"/> Loan Repayment			
City	<input type="checkbox"/> Refund			
State      Zip	<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 Democratic Party of Georgia	Date 11/06/2017	Occupation	robo call expense	\$14.26
Last Name	<input checked="" type="checkbox"/> Expenditure	Employer		
Address	<input type="checkbox"/> In-kind			
Address2	<input type="checkbox"/> Loan Repayment			
City	<input type="checkbox"/> Refund			
State      Zip	<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 Democratic Party of Georgia	Date 10/30/2017	Occupation	robo call expense	\$89.27
Last Name	<input checked="" type="checkbox"/> Expenditure	Employer		
Address	<input type="checkbox"/> In-kind			
Address2	<input type="checkbox"/> Loan Repayment			
City	<input type="checkbox"/> Refund			
State      Zip	<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 \$228.53

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Dustin Hillis for Atlanta, INC

Page 17 of 23

# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Cross Creek Cafe	Date 11/20/2017	Occupation	campaign catering expense	\$125.00
Last Name	<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		
Address				
Address2				
City				
State				
First Name Nich	Date 11/07/2017	Occupation Information Requested	voter outreach	\$120.00
Last Name Camplone	<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 Information Requested		
Address				
Address2				
City				
State				
First Name Democratic Party of Georgia	Date 11/02/2017	Occupation	robo call expense	\$46.55
Last Name	<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		
Address				
Address2				
City				
State				

Page Total \$291.55

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Dustin Hillis for Atlanta, INC

Page 18 of 23

# State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

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

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Chick-Fil-A		Date 11/07/2017	Occupation	food for volunteers	\$108.30
Last Name		<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		
Address					
Address2					
City					
State	Zip				
First Name Media Inc		Date 11/22/2017	Occupation	campaign mail expense	\$6,266.98
Last Name		<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		
Address 404 Brightling Way					
Address2					
City Holly Springs					
State NC	Zip 27540-3313				
First Name Leila		Date 11/07/2017	Occupation Information Requested	voter outreach	\$120.00
Last Name Camplone		<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 Information Requested		
Address					
Address2					
City					
State	Zip				

Page Total \$6,495.28

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Dustin Hillis for Atlanta, INC

Page 19 of 23

# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Media Inc	Date 11/02/2017	Occupation	campaign mail expense	\$4,070.12
Last Name	<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		
Address 404 Brightling Way				
Address2				
City Holly Springs				
State NC				
First Name Justin	Date 11/07/2017	Occupation Information Requested	voter canvassing	\$120.00
Last Name Reeder	<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 Information Requested		
Address				
Address2				
City				
State				
First Name Foxhole Strategies	Date 11/22/2017	Occupation	fundraising consultant	\$1,000.00
Last Name	<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		
Address				
Address2				
City				
State				

Page Total \$5,190.12

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Dustin Hillis for Atlanta, INC

Page 20 of 23

# State of Georgia

## Campaign Contribution Disclosure Report

### Itemized Expenditures

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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
<div style="border: 1px solid black; padding: 2px;">First Name Media Inc</div> <div style="border: 1px solid black; padding: 2px;">Last Name</div> <div style="border: 1px solid black; padding: 2px;">Address 404 Brightling Way</div> <div style="border: 1px solid black; padding: 2px;">Address2</div> <div style="border: 1px solid black; padding: 2px;">City Holly Springs</div> <div style="display: flex; border: 1px solid black; padding: 2px;"> <div style="border-right: 1px solid black; padding: 2px; flex: 1;">State NC</div> <div style="padding: 2px; flex: 1;">Zip 27540-3313</div> </div>	<div style="border: 1px solid black; padding: 2px;">Date 11/02/2017</div> <div style="border: 1px solid black; padding: 2px;"> <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         </div>	<div style="border: 1px solid black; padding: 2px;">Occupation</div> <div style="border: 1px solid black; padding: 2px;">Employer</div>	mailing expense	\$5,747.78
<div style="border: 1px solid black; padding: 2px;">First Name Xavier</div> <div style="border: 1px solid black; padding: 2px;">Last Name Anderson</div> <div style="border: 1px solid black; padding: 2px;">Address</div> <div style="border: 1px solid black; padding: 2px;">Address2</div> <div style="border: 1px solid black; padding: 2px;">City</div> <div style="display: flex; border: 1px solid black; padding: 2px;"> <div style="border-right: 1px solid black; padding: 2px; flex: 1;">State</div> <div style="padding: 2px; flex: 1;">Zip</div> </div>	<div style="border: 1px solid black; padding: 2px;">Date 11/20/2017</div> <div style="border: 1px solid black; padding: 2px;"> <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         </div>	<div style="border: 1px solid black; padding: 2px;">Occupation Information Requested</div> <div style="border: 1px solid black; padding: 2px;">Employer Information Requested</div>	voter canvassing	\$125.00
<div style="border: 1px solid black; padding: 2px;">First Name B's Cracklin' Barbecue</div> <div style="border: 1px solid black; padding: 2px;">Last Name</div> <div style="border: 1px solid black; padding: 2px;">Address 2061 Main St NW</div> <div style="border: 1px solid black; padding: 2px;">Address2</div> <div style="border: 1px solid black; padding: 2px;">City Atlanta</div> <div style="display: flex; border: 1px solid black; padding: 2px;"> <div style="border-right: 1px solid black; padding: 2px; flex: 1;">State GA</div> <div style="padding: 2px; flex: 1;">Zip 30318-1852</div> </div>	<div style="border: 1px solid black; padding: 2px;">Date 10/27/2017</div> <div style="border: 1px solid black; padding: 2px;"> <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         </div>	<div style="border: 1px solid black; padding: 2px;">Occupation</div> <div style="border: 1px solid black; padding: 2px;">Employer</div>	catering expense	\$324.00

Page Total \$6,196.78

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Dustin Hillis for Atlanta, INC

Page 21 of 23

State of Georgia  
**Campaign Contribution Disclosure Report**  
**Itemized Expenditures**

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

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Sage Payment Solutions		Date 11/02/2017	Occupation	merchant fees	\$47.78
Last Name		<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		
Address 120120 Sunset Hills Rd					
Address2 Suite 500					
City Reston					
State VA	Zip 20190				

Page Total \$47.78

\* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment, Payment on Deferred Expense, Investment)

Public Officer/Candidate/Other Than Candidate Committee Name Dustin Hillis for Atlanta, INC

Page 22 of 23

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.