

Campaign Contribution Disclosure Report

Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1416 West Tower | Atlanta, GA 30334 | 404-463-1980 | www.ethics.ga.gov

1. Report Type (Select One)

- Original
Amendment

2. Filing is being made on behalf of (Select One):

Candidate or Public Official
Office Held or Sought: City Council, Fulton County, Milton, District 1, Post 2
Filer ID:
Organization or Person Other than Candidate's Campaign Committee
Committee Name:
Filer ID:

Use Earlier of Post Mark or Hand Delivered Date

OCT - 4 2023

CITY CLERK CITY OF MILTON

3. Identifying and Contact Information

(1) Carol E Cookerly (2) September 30, 2023
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) 13600 Providence Rd Milton, GA. 30009
Mailing Address City State Zip Code

(4) 404 216 3019 and/or carol@cookerly.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: Tony Rich Ronald Gilbert
Name of Committee Chairperson Name of Committee Treasurer

4. Period for which you are Reporting

You Must Check Only One Box

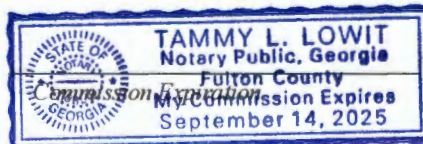
Table with 4 columns: My Non-Election Year, My Election Year, Run-Offs, Special Election. Includes checkboxes for various reporting periods and dates.

State of Georgia County of Fulton

I, Carol E. Cookerly 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 October 4, 2023

Signature of Notary Public (Handwritten signature)



Signature of Candidate (Handwritten signature)
a. Signature of Candidate
b. Organization/Chairperson/Treasurer

**ORIGINAL**

**State of Georgia  
Campaign Contribution Disclosure Report  
Summary Report**

**CONTRIBUTIONS RECEIVED**

1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	In-Kind Estimated Value	Cash Amount
2	A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns.	0	0
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	200	36,150
3a	All loans received this reporting period.		22,074.01
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.		
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	200	58,224.01
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	200	58,224.01

**EXPENDITURES MADE**

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	0	0
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		2,108.71
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)		2,108.71
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		2,108.71

**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)		56,115.30
----	--	--	-----------

\* 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.

Carol Cookerly

ORIGINAL

**ORIGINAL**

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

Election Cycle*: <u>General</u> Election Year: <u>2023</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	22,074.01
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)	22,074.01
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

**ORIGINAL**

**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 <b>Diane</b>  Last Name <b>Napier-Wilson</b>  Address <b>14538 Wood Road</b>  Address2  City <b>Alpharetta</b>  State <b>GA</b> Zip <b>3000</b>  Aff. Comm.	Date <b>9/19/23</b>  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation <b>Retired</b>  Employer <b>NA</b>	<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	Cash Amt.  <b>250</b>	Est. Value   Description
First Name or Business Name <b>Joseph</b>  Last Name <b>Lockwood</b>  Address <b>1871 Blalock Goldmine Rd</b>  Address2  City <b>Clayton</b>  State <b>GA</b> Zip <b>30525</b>  Aff. Comm.	Date <b>9/19/23</b>  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation <b>Contractor</b>  Employer <b>Self</b>	<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	Cash Amt.  <b>2500</b>	Est. Value   Description
First Name or Business Name <b>Friends of Jan Jones</b>  Last Name   Address <b>12850 Highway 9</b>  Address2  City <b>Alpharetta</b>  State <b>GA</b> Zip <b>30004</b>  Aff. Comm.	Date <b>9/19/23</b>  <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation <b>Public Servant</b>  Employer <b>Self</b>	<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	Cash Amt.  <b>1000</b>	Est. Value   Description

Itemized Contributions Page Total \$3750 \$

ORIGINAL

CFC-CCDR 10/19

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Jeffery	9/23/23	Retired	<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	100	
Last Name Dufresne					
Address 1380 Summit Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			
City Milton	<input type="checkbox"/> In-Kind				
State GA	Zip 30004	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
Tony	9/24/23	Retired	<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	3300	
Last Name Rich					
Address PO Box 1071					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			
City Alpharetta	<input type="checkbox"/> In-Kind				
State GA	Zip 30009	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
Sara	9/24/23	Retired	<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	3300	
Last Name Rich					
Address PO Box 1071					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			
City Alpharetta	<input type="checkbox"/> In-Kind				
State GA	Zip 30009	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
Kyle	9/22/23	Retired	<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	3300	
Last Name Hester					
Address 13620 Hopewell RD					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			
City Alpharetta	<input type="checkbox"/> In-Kind				
State GA	Zip 30004	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
Itemized Contributions Page Total				10,000	\$

\* 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

Carol Cookerly

CFC-CCDR 10/19

First Name or Business Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
Cynthia	9/22/23	Retired	<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	3300	
Last Name Hester					
Address 13620 Hopewell Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			Description
City Alpharetta	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30004	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
S. K.	9/26/23	Retired	<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	3300	
Last Name Cobak					
Address 2335 Flint Creek Dr					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			Description
City Cumming	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30041	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Robert	9/26/23	Retired	<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	3300	
Last Name Cobak					
Address 2335 Flint Creek Dr					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			Description
City Cumming	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30041	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
William	9/27/23	Retired	<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	100	
Last Name Garrett, Jr					
Address 13450 Hopewell Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			Description
City Alpharetta	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30004	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
<b>Itemized Contributions Page Total</b>				10,000	\$ _____

\* 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

Carol Cookerly

CFC-CCDR 10/19

First Name or Business Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
Charlie	9/22/23	Real Estate Development	<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	2000	
Last Name Roberts					
Address 13645 Freemanville RD					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Roberts Properties			Description
City Alpharetta	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30004	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Sarah	9/22/23	Real Estate Development	<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	1000	
Last Name Roberts					
Address 13645 Freemanville Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Roberts Properties			Description
City Alpharetta	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30004	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
William	9/23/23	Executive Director	<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	250	
Last Name Willits					
Address 200 Holcomb Hill Lane					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NPM			Description
City Milton	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30004	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Theresa	9/23/23	Physician	<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	2000	
Last Name Jarmuz					
Address 1970 Bethany Way					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Self			Description
City Milton	<input type="checkbox"/> In-Kind				
State GA	<input type="checkbox"/> Common Source				
Zip 30004	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Itemized Contributions Page Total				5,250	\$ _____

\* 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

Carol Cookerly



**ORIGINAL**

CFC-CCDR 10/19

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Daniel	9/23/23	Retired	<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	250	
Last Name Vernon					
Address 710 Cooper Sandy Cr					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			
City Milton	<input type="checkbox"/> In-Kind				
State GA	Zip 30009	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name Larry	Date 9/23/23	Occupation Retired	<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	500	
Last Name Covington					
Address 16470 Freemanville Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer NA			
City Milton	<input type="checkbox"/> In-Kind				
State GA	Zip 30004	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name David	Date 9/25/23	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	250	
Last Name Chatham					
Address 5780 Windward Parkway					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Chatham Neighborhoods			
City Alpharetta	<input type="checkbox"/> In-Kind				
State GA	Zip 30005	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name Sarah	Date 9/25/23	Occupation Self Employed	<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	1000	
Last Name Haslock-Johnson					
Address 2090 Bethany Way					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Self Employed			
City Milton	<input type="checkbox"/> In-Kind				
State GA	Zip 30004	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
<b>Itemized Contributions Page Total</b>				<b>2,000</b>	
				\$	\$

\* 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

Carol Cookerly

ORIGINAL

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
David	9/25/23	Executive	<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	3300	
Last Name Dudley					
Address 2794 Kimmeridge Dr					
Address2	<input checked="" type="checkbox"/> Monetary	Employer TSC Inc.			
City East Point	<input type="checkbox"/> In-Kind				
State GA	Zip 30344	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name Greg	Date 9/26/23	Occupation Medical Sales	<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	500	
Last Name Broms					
Address 13475 Providence Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Southern Orthopedics			
City Milton	<input type="checkbox"/> In-Kind				
State GA	Zip 30009	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name Barbara	Date 9/27/23	Occupation Corporate Recruiter	<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	100	
Last Name Slate					
Address 13545 Providence Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer UDT			
City Milton	<input type="checkbox"/> In-Kind				
State GA	Zip 30009	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
First Name or Business Name Jim and Lisa	Date 9/27/23	Occupation Residential Remodeling Contractor	<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	250	
Last Name Loughridge					
Address 13665 Providence Rd					
Address2	<input checked="" type="checkbox"/> Monetary	Employer Loughridge Construction			
City Milton	<input type="checkbox"/> In-Kind				
State GA	Zip 30009	<input type="checkbox"/> Common Source			
Aff. Comm.	<input type="checkbox"/> Credit Received on Loan				Description
Itemized Contributions Page Total				4,150	\$

\* 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

Carol Cookerly

# ORIGINAL

First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
Ronald and Marykay Last Name: Gilbert Address: 970 Treyburn Run	9/29/23	Retired	<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	1000	
Address2	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer: NA			Description
City: Alpharetta State: GA Zip: 30004 Aff. Comm.					
Ronald Last Name: Wallace Address: 13090 Freemanville Rd	9/19/23	Retired	<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		200
Address2	<input type="checkbox"/> Monetary <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer: NA			Description: Refreshments
City: Alpharetta State: GA Zip: 30004 Aff. Comm.					
First Name or Business Name	Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name					
Address					
Address2	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
City					
State	Zip				
Aff. Comm.					
First Name or Business Name	Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name					
Address					
Address2	<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
City					
State	Zip				
Aff. Comm.					
				1,000	200
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

Carol Cookerly

Ccc



### Loan Reporting

Name of Lender & Mailing Address	1. Date of Loan 2. Amount of Loan 3. Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1. Occupation & 2. Place of Employment 3. Fiduciary Relationship***
Lender Name (First Name, Business, Inst.) <b>Carol</b>	1. <b>9/6/23</b>	First Name <b>Cookerly for Milton</b>	1. <b>Public Relations</b>
Lender Last Name <b>Cookerly</b>	2. <b>350</b>	Last Name	2. <b>CookerlyPR</b>
Address <b>13600 Providence Rd</b>	3. <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	Address <b>13600 Providence Rd</b>	3. <input checked="" type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City <b>Milton</b>		City <b>Milton</b>	
State GA		State GA	
Zip 30009	Zip 30009		
Lender Name (First Name, Business, Inst.) <b>Carol</b>	1. <b>9/7/23</b>	First Name <b>Cookerly for Milton</b>	1. <b>Public Relations</b>
Lender Last Name <b>Cookerly</b>	2. <b>100</b>	Last Name	2. <b>CookerlyPR</b>
Address <b>13600 Providence Rd</b>	3. <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	Address <b>13600 Providence Rd</b>	3. <input checked="" type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City <b>Milton</b>		City <b>Milton</b>	
State GA		State GA	
Zip 30009	Zip 30009		
Reference: OCGA § 21-5-34(b)(1)			Loan Page Total \$ <u>450</u>

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

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

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

*CC*

**ORIGINAL**

**Loan Reporting**

Name of Lender & Mailing Address	1. Date of Loan 2. Amount of Loan 3. Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1. Occupation & 2. Place of Employment 3. Fiduciary Relationship***
Lender Name (First Name, Business, Inst.) <b>Carol</b>	1. <b>9/8/23</b>	First Name <b>Cookerly for Milton</b>	1. <b>Public Relations</b>
Lender Last Name <b>Cookerly</b>	2. <b>250</b>	Last Name	2. <b>CookerlyPR</b>
Address <b>13600 Providence Rd</b>	3. <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	Address <b>13600 Providence Rd</b>	3. <input checked="" type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City <b>Milton</b>		City <b>Milton</b>	
State <b>GA</b>	Zip <b>30009</b>	State <b>GA</b>	Zip <b>30009</b>
Lender Name (First Name, Business, Inst.) <b>Carol</b>	1. <b>8/28/23</b>	First Name <b>Cookerly for Milton</b>	1. <b>Public Relations</b>
Lender Last Name <b>Cookerly</b>	2. <b>396.41</b>	Last Name	2. <b>CookerlyPR</b>
Address <b>13600 Providence Rd</b>	3. <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	Address <b>13600 Providence Rd</b>	3. <input checked="" type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City <b>Milton</b>		City <b>Milton</b>	
State <b>GA</b>	Zip <b>30009</b>	State <b>GA</b>	Zip <b>30009</b>
Reference: OCGA § 21-5-34(b)(1)			Loan Page Total \$ <u>646.41</u>

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

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

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

**ORIGINAL**

**Loan Reporting**

Name of Lender & Mailing Address	1. Date of Loan 2. Amount of Loan 3. Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1. Occupation & 2. Place of Employment 3. Fiduciary Relationship***
Lender Name (First Name, Business, Inst.) <b>Carol</b>	1. <b>9/27/23</b>	First Name <b>Cookerly for Milton</b>	1. <b>Public Relations</b>
Lender Last Name <b>Cookerly</b>	2. <b>477.60</b>	Last Name	2. <b>CookerlyPR</b>
Address <b>13600 Providence Rd</b>	3. <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	Address <b>13600 Providence Rd</b>	3. <input checked="" type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City <b>Milton</b>		City <b>Milton</b>	
State GA		State GA	
Zip 30009	Zip 30009		
Lender Name (First Name, Business, Inst.) <b>Carol</b>	1. <b>9/21/23</b>	First Name <b>Cookerly for Milton</b>	1. <b>Public Relations</b>
Lender Last Name <b>Cookerly</b>	2. <b>500</b>	Last Name	2. <b>CookerlyPR</b>
Address <b>13600 Providence Rd</b>	3. <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	Address <b>13600 Providence Rd</b>	3. <input checked="" type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City <b>Milton</b>		City <b>Milton</b>	
State GA		State GA	
Zip 30009	Zip 30009		
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total \$ <u>977.60</u>	

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

*Cee*

**ORIGINAL**

**Loan Reporting**

Name of Lender & Mailing Address	1. Date of Loan 2. Amount of Loan 3. Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1. Occupation & 2. Place of Employment 3. Fiduciary Relationship***
Lender Name (First Name, Business, Inst.) <b>Carol</b>	1. <b>9/25/23</b>	First Name <b>Cookerly for Milton</b>	1. <b>Public Relations</b>
Lender Last Name <b>Cookerly</b>	2. <b>20,000</b>	Last Name	2. <b>CookerlyPR</b>
Address <b>13600 Providence Rd</b>	3. <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Address <b>13600 Providence Rd</b>	3. <input checked="" type="checkbox"/> Public Officer
Address2	<input type="checkbox"/> Special	Address2	<input type="checkbox"/> Candidate
City <b>Milton</b>	<input type="checkbox"/> Special Primary	City <b>Milton</b>	<input type="checkbox"/> Other Than Candidate Committee Name
State GA	<input type="checkbox"/> Run-Off Primary	State GA	
Zip 30009	<input type="checkbox"/> Run-Off General	Zip 30009	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General	Address	3. <input type="checkbox"/> Public Officer
Address2	<input type="checkbox"/> Special	Address2	<input type="checkbox"/> Candidate
City	<input type="checkbox"/> Special Primary	City	<input type="checkbox"/> Other Than Candidate Committee Name
State	<input type="checkbox"/> Run-Off Primary	State	
Zip	<input type="checkbox"/> Run-Off General	Zip	
	<input type="checkbox"/> Run-Off Special		
	<input type="checkbox"/> Run-Off Special Primary		
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total \$ <u>20,000</u>	

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

*CFC*

**ORIGINAL**

**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 <b>State of Georgia</b> <hr/> Last Name <b>Secretary of State</b> <hr/> Address <b>313 West Tower</b> <hr/> Address2 <b>2 Martin Luther King Jr Drive</b> <hr/> City <b>Atlanta</b> <hr/> State <b>GA</b>	Date <b>9/6/23</b> <hr/> <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 <b>NA</b> <hr/> Employer <b>NA</b>	<b>Corporate Formation</b>	<b>350</b>
First Name <b>State of Georgia</b> <hr/> Last Name <b>Secretary of State</b> <hr/> Address <b>313 West Tower</b> <hr/> Address2 <b>2 Martin Luther King Jr Drive</b> <hr/> City <b>Atlanta</b> <hr/> State <b>GA</b>	Date <b>9/7/23</b> <hr/> <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 <b>NA</b> <hr/> Employer <b>NA</b>	<b>Corporate Formation</b>	<b>100</b>
First Name <b>State of Georgia</b> <hr/> Last Name <b>Secretary of State</b> <hr/> Address <b>313 West Tower</b> <hr/> Address2 <b>2 Martin Luther King Jr Drive</b> <hr/> City <b>Atlanta</b> <hr/> State <b>GA</b>	Date <b>9/8/23</b> <hr/> <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 <b>NA</b> <hr/> Employer <b>NA</b>	<b>Corporate Formation</b>	<b>250</b>

700

Page Total \$ \_\_\_\_\_

\* 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

Carol Cookerly

*C2C*



**ORIGINAL**

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid		
First Name <b>Alphagraphics</b>		Date <b>8/28/23</b>	Occupation <b>Printer</b>	Yard Signs	396.41		
Last Name							
Address <b>3424 Peachtree Road NE</b>							
Address2 <b>C-130</b>							
City <b>Atlanta</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 <b>NA</b>				
State GA	Zip 30326						
First Name <b>Advanced Merch</b>				Date <b>9/27/23</b>	Occupation <b>Merchandise Manufacturer</b>	T-Shirt Printing	477.60
Last Name							
Address <b>5815 Steeplechase Lane</b>							
Address2 <b>Suite 100</b>							
City <b>Cumming</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 <b>NA</b>				
State GA	Zip 30040						
First Name <b>Anedot</b>				Date <b>9/24/23</b>	Occupation	Credit Card Processing	241.80
Last Name							
Address <b>1920 McKinley Ave</b>							
Address2 <b>7th Floor</b>							
City <b>Dallas</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				
State TX	Zip 75201						
First Name <b>Anedot</b>				Date <b>9/26/23</b>	Occupation	Credit Card Processing	182.90
Last Name							
Address <b>1920 McKinley Ave</b>							
Address2 <b>7th Floor</b>							
City <b>Dallas</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				
State TX	Zip 75201						

\* 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 \$ 1,298.71**

*CEL*

# ORIGINAL

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <b>Anedot</b>		Date <b>9/28/23</b>	Occupation	Credit Card Processing	34.90
Last Name					
Address <b>1920 McKinley Ave</b>					
Address2 <b>7th Floor</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		
City <b>Dallas</b>					
State <b>TX</b>	Zip <b>75201</b>				
Address <b>214 N Tryon St</b>					
Address2		<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		
City <b>Charlotte</b>					
State <b>NC</b>	Zip <b>28202</b>				
Address <b>214 N Tryon St</b>					
Address2		<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		
City					
State	Zip				
Address					
Address2		<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		
City					
State	Zip				
Address					
Address2		<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		
City					
State	Zip				
Address					

\* 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 \$ 110**

*C2C*

**ORIGINAL**

CFC-CCDR 10/19

**State of Georgia  
Campaign Contribution Disclosure Report  
Investments Statement**

1. Investment Name <b>NONE</b>		Account # <b>NONE</b>
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 <b>NONE</b>		Account # <b>NONE</b>
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: \$ _____

Carol Cookerly

*c2c*

**ORIGINAL**

**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.

NONE

Carol Cookerly

C2C