

CFC-CCDR 1/14

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Campaign Contribution Disclosure Report

Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1402 West Tower | Atlanta, GA 30334 | 404-463-1980 | www.ethics.ga.gov

<p>1. Report Type (Select One)</p> <p><input checked="" type="checkbox"/> Original</p> <p><input type="checkbox"/> Amendment</p> <p>Amendment # _____</p>	<p>2. Filing is being made on behalf of (Select One):</p> <p>Candidate or Public Official</p> <p>Office Held or Sought <u>Michael Erwin School Board District # 3 DeKalb County</u> <small>(Include county, municipality, district, post or judicial circuit)</small></p> <p>Filer ID _____ <small>(Filer ID that begins with the letter "C")</small></p> <p>Organization or Person Other than Candidate's Campaign Committee</p> <p>Committee Name: _____</p> <p>Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small></p>	<p>Use Earlier of Post Mark or Hand Delivered Date</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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3. Identifying and Contact Information

(1) Michael Erwin (2) 07-06-14
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 1463 Deerwood Dr. Atlanta Ga 30030
Mailing Address City State Zip Code

(4) (678) 682-5646 and/ or michael.erwin6@gmail.com
Primary Contact Phone Number E-Mail

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

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

(7) If yes, complete the following: _____
Name of Committee Chairperson Name of Committee Treasurer

RECEIVED
DEKALB COUNTY
VOTER REGISTRATION
AND ELECTIONS
2014 JUL -7
11:10 AM

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
<input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> June 30, ____ (year)	<input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> March 31, ____ (year) <input checked="" type="checkbox"/> June 30, 2014 (year) <input type="checkbox"/> September 30, ____ (year) <input type="checkbox"/> October 25, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)	<input checked="" type="checkbox"/> 6 days before Primary Run-Off 2014 (year) <input type="checkbox"/> 6 days before General Run-Off ____ (year) <input type="checkbox"/> 6 days before Special Primary Run-Off ____ (year) <input type="checkbox"/> 6 days before Special Run-Off ____ (year)	<input type="checkbox"/> 15 days before Special Primary, ____ (year) <input type="checkbox"/> 15 days before Special, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)
<p>Supplemental Reporting</p> <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)			

*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)

State of Georgia County of DeKalb

I, Michael A. Erwin, 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 July 2, 2014

Margaret C. Francis
Signature of Notary Public

Michael A. Erwin
a. Signature of Candidate
b. Organization/Chairperson/Treasurer

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

CONTRIBUTIONS RECEIVED

1	<input type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	In-Kind Estimated Value	Cash Amount
2	A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns.	0	500.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	0	4150.00
3a	All loans received this reporting period.	0	5700.00
3b	Interest earned on campaign account this reporting period.	0	0
3c	Total amount of investments sold this reporting period.	0	0
3d	Total amount of cash dividends and interest paid out this reporting period.	0	0
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.	0	1149.99
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	0	10999.99
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	0	11499.00

EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.	0	0
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	1093.00	10091.65
10	Total amount of all separate expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page	0	296.15
11	Total expenditures reported this period. (Line 9 + 10)	0	10387.00
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	1093.00	10387.80

INVESTMENTS

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

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)		1112.99
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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.

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

Election Cycle*: <u>Primary Runoff</u> Election Year: <u>2014</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	5700.00
3	Deferred payment of expenses this reporting period	0
4	Payments made on loans this reporting period.	0
5	Credits received on loans this reporting period	0
6	Payments this reporting period on previously deferred expenses.	0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	5700.00
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	0
3	Deferred payment of expenses this reporting period	0
4	Payments made on loans this reporting period.	0
5	Credits received on loans this reporting period	0
6	Payments this reporting period on previously deferred expenses.	0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	0
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	0
3	Deferred payment of expenses this reporting period	0
4	Payments made on loans this reporting period.	0
5	Credits received on loans this reporting period	0
6	Payments this reporting period on previously deferred expenses.	0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	0

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

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State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

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

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name Georgia Federation Of Teachers/Solidarity Fund Last Name Address 4 Executive Park East Suite 120 Address2 City Atlanta State Ga Zip 30329 Aff. Comm.	Date 6/17/14 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input checked="" type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. \$500.00	Est. Value Description
First Name Georgia Association of Realtors/Political Action Committee Last Name Address 3200 Presidential Dr. Address2 City Atlanta State Ga Zip 30340 Aff. Comm.	Date 6/23/14 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input checked="" type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 250.00	Est. Value Description
First Name Committee to Elect Lee May Last Name Address P.O. Box 2216 Address2 City Lithonia State Ga Zip 30058 Aff. Comm.	Date <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Employer	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt. 500.00	Est. Value Description

Itemized Contributions Page Total \$ 1250⁰⁰ \$

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First Name		Date	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Georgia Association of Realtors/Political Action Committee		5/9/14				250.00
Last Name						
Address						
3200 Presidential Dr.						
Address2		<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta		<input type="checkbox"/> In-Kind				
State Ga	Zip 30340	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name		Date	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Silverman Construction Program Management, Inc.		4/21/14	Construction			500.00
Last Name						
Address						
1075 Zonolite Rd. NE STE 5						
Address2		<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta		<input type="checkbox"/> In-Kind				
State Ga	Zip 30306	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name		Date	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Georgia Federation of Teachers/Solidarity Fund		4/25/14				1000.00
Last Name						
Address						
4 Executive Park East, Suite 120						
Address2		<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta		<input type="checkbox"/> In-Kind				
State Georgia	Zip 30329	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name		Date	Occupation	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Chip			Realtor			500.00
Last Name						
Address						
115 Perimeter Center Place						
Address2		<input checked="" type="checkbox"/> Monetary	Employer			Description
City Atlanta		<input type="checkbox"/> In-Kind	Keller Williams			
State Georgia	Zip 30346	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				

Itemized Contributions Page Total \$ 2050⁰⁰ \$

* 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

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First Name	Date	Occupation	Contribution Type	Cash Amt.	Est. Value
Hezekiah Last Name: Sistrunk Address: 127 Peachtree Street Address2: Suite 800 City: Atlanta State: GA Zip: 30303 Aff. Comm.		Attorney	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	500.00	
			<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Description
			Employer: The Cochran Firm		
Urcel Last Name: Fields Address: 1929 Shoal Creek Blvd. Address2: City: Decatur State: GA Zip: 30032 Aff. Comm.		Insurance	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	200.00	
			<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Description
			Employer: State Farm		
Charles Last Name: Huddleston Address: 1256 Pasedena Ave. Address2: City: Atlanta State: GA Zip: 30306 Aff. Comm.	June 1, 2014	Attorney	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input checked="" type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	150.00	
			<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Description
			Employer: Nelson, Mullins, Riley and Scarborough, LLP		
First Name: Last Name: Address: Address2: City: State: Zip: Aff. Comm.			<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
			<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Description
			Employer:		

Itemized Contributions Page Total \$ **850⁰⁰** \$

* 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

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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.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State Zip		State Zip	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City		City	
State Zip		State Zip	

Reference: OCGA § 21-5-34(b)(1) Loan Page Total \$ _____

* 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

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State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

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

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Atlanta Print and Mail.com, Inc. Last Name Address 1820 Briarwood Industrial Ct NE Suite 7 Address2 City Atlanta State Ga Zip 30329	Date 5/12/14 <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 checked="" type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Printer Employer 	Snacks, water, sign waiving expenses <i>Delete Mailers mac</i>	1568.19
First Name NA Last Name NA Address Address2 City State Zip	Date 5/20/14 <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 NA Employer NA	Snacks, water, sign waiving expenses	720.00
First Name Adina Last Name Erwin Address 1463 Deerwood Dr. Address2 City Decatur State Ga Zip 30030	Date 5/19/14 <input type="checkbox"/> Expenditure <input checked="" 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 General Manager Employer Fox	Robo call District data	1093.00

Page Total \$ 3381. ¹⁹

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

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List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Southeast Graphics Last Name Address PO Box 7748 Address2 City Marrietta State Ga Zip 30065	Date 6/14/14 <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Employer	Walk Cards Robo call Delete Signage	644.76
First Name Uprinting Last Name Address 8000 Haskell Ave Address2 City Van Nuys State Ca Zip 91406	Date <input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Employer	Walk Cards Robo call Delete	381.74
First Name Creative Data Design Last Name Address 565 Regency Park Dr Address2 City Atlanta State Ga Zip 30331	Date 5/20/14 <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Employer	Walk Cards ^{Delete} Robo call ^{mae}	177.93
First Name Crossroads Last Name Address 2346 Candler Rd Address2 City Decatur State Ga Zip 30032	Date 5/5/14 <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Employer	Walk Cards Robo call Delete Advertising	212.50

* 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 \$ 1416.93

Public Officer/Candidate/Other Than Candidate Committee Name Michael Erwin Page 9 of 12

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Rhonda Last Name Taylor		Date 5/27/14 <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Consultant Employer Monarch Consulting LLC	<i>Campaign Consultant</i>	4100.00
Address 2709 Chimney Rock Lane Address2					
City Conyers					
State Ga	Zip 30094				
First Name Malcolm Last Name Quillen		Date 5/1/14 <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 Nutrition Employer DCSS	<i>Field Volunteers</i>	500.00
Address 3602 Kittery Dr Address2					
City Snellville					
State Ga	Zip 30039				
First Name Custom Ink Last Name		Date 4/30/14 <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Employer	<i>T-shirts</i>	497.20
Address 2910 District Ave Address2					
City Fairfax					
State Va	Zip 22031				
First Name Southeast Graphics Last Name		Date <input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occupation Employer	<i>Signage</i>	1289.52
Address P.O. 7748 Address2					
City Marrietta					
State Ga	Zip 30065				

* 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 \$ 6386.72

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

1. Investment Name	Account #
Institution/Person Holding Account _____ Mailing Address <u>1463 Deerwood Dr.</u> Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	Difference in value \$
	Interest Paid Out \$
	Cash Dividends \$

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

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

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

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

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

The Addendum Statement should be used for explanation of any additional information needed to complete an accurate filing of this report. Information that is to be reported in the body of the report should not be listed on Addendum Statement.

[Empty box for Addendum Statement content]