

# State of Georgia Campaign Contribution Disclosure Report

  
**RECEIVED**  
**OFFICE OF**  
**MUNICIPAL CLERK**  
 2009 APR -7 PM 1:27  
 Use Earlier of Post  
 Mark or Hand  
 Delivered Date

1. Report Type  
(Select One)

- Original Report
- Amended Report
- Amendment # \_\_\_\_\_

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

- Candidate or Public Official  
 Office Sought or Held: MAYOR Fulton County  
(Include county, municipality, district, post or judicial circuit)
- Committee Name: \_\_\_\_\_
- Report of Organization or Person Other than Candidate's Campaign Committee

### 3. Identifying and Contact Information

- (1) Duwon Robinson (2) 4-7-09  
Full Name of Candidate or Non-Candidate Campaign Committee Today's Date
- (3) 195 Fynhurst dr. Atlanta GA 30311  
Mailing Address City State Zip Code
- (4) (404) 429-6431 and / or ( ) \_\_\_\_\_  
Contact Phone Number (We will understand the release of this information as permission to call your office if necessary)
- (5) If a Candidate or Public Official, is there a 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: \_\_\_\_\_  
Name of Chairperson and/or Treasurer of Committee

### 4. Period for which you are Reporting

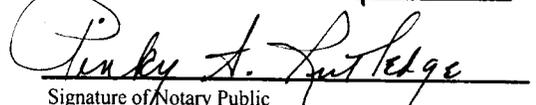
My Non Election Year	My Election Year	Run-Offs <small>(Report required only if you me in a Run-Off Election)</small>	Special Elections <small>(Report required only if you me in a Special Election)</small>
<input type="checkbox"/> June 30, _____ (year)	<input type="checkbox"/> March 31, <u>2009</u> (year)	<input type="checkbox"/> 6 days before Primary Run-Off, _____ (year)	<input type="checkbox"/> 15 days before Special Primary, _____ (year)
<input type="checkbox"/> Dec. 31, _____ (year)	<input type="checkbox"/> June 30, _____ (year)	<input type="checkbox"/> 6 days before General Run-Off, _____ (year)	<input type="checkbox"/> 15 days before Special, _____ (year)
<small>*Persons elected to office in each year following the year in which the election occurs            *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"/> September 30, _____ (year)	<input type="checkbox"/> 6 days before Special Primary Run-Off, _____ (year)	<input type="checkbox"/> Dec. 31, _____ (year)
	<input type="checkbox"/> October 25, _____ (year)	<input type="checkbox"/> 6 days before Special Run-Off, _____ (year)	
	<input type="checkbox"/> December 31, _____ (year)		

### Verification by Oath or Affirmation

State of Georgia County of Fulton

I, Duwon Robinson, 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 April 7, 2009

  
 Signature of Notary Public

  
 a. Signature of Candidate  
 b. Organization/Chairperson/Treasurer

4/7/09

My Commission expires \_\_\_\_\_  
Notary Public, Fulton County, Georgia

Any person who knowingly fails to comply with or who knowingly violates any of the provisions of the Ethics in Government Act shall be guilty of a misdemeanor.



## State of Georgia Campaign Contribution Disclosure Report Itemized Contributions

Must list contributions received by a single contributor for which the aggregate total is \$101.00 or more  
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
None				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
Itemized Contributions Page Total \$					\$

### Loan Reporting

Name of Lender Mailing Address	Date of Loan Amount of Loan Election Cycle"	Person(s) responsible for repayment of loan Mailing Address	Occupation & Place of Employment Fiduciary Relationship***
		1.	
		2.	
		1.	
		2.	
Reference: OCGA § 21-5-34(b)(1)			Loan Page Total \$ <u>0.00</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  
 Public Officer/Candidate/Non-Candidate Committee Name  Page \_\_\_\_\_ of \_\_\_\_\_

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

Election Cycle*: _____ Election Year: <u>2009</u>		Amount
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: _____		Amount
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: _____		Amount
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/Non-Candidate Committee Name



## State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total is \$101.00 or more

List Name and Mailing Address of Recipient	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
				\$ 0
				\$ 0
				\$ 0
				\$ 0
				\$ 0
				\$ 0
				\$ 0
				\$ 0

Page Total     \$ 0.00

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

## State of Georgia Campaign Contribution Disclosure Report Investments Statement

1. Investment Name

Account Number

Institution/Person  
Holding Account \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

City, State, Zip \_\_\_\_\_

Value at beginning of reporting period \$ 0

Value at end of reporting period \$ 0

Difference in value \$ 0

Interest Paid Out \$ 0

Cash Dividends \$ 0

Investment Transactions

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

2. Investment Name

Account Number

Institution/Person  
Holding Account \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

City, State, Zip \_\_\_\_\_

Value at beginning of reporting period \$ 0

Value at end of reporting period \$ 0

Difference in value \$ 0

Interest Paid Out \$ 0

Cash Dividends \$ 0

Investment Transactions

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

Total value of investments at beginning of reporting period \$ 0

Total value of investments at end of reporting period \$ 0

Total difference in value \$ 0

Page Total Cash Dividends: \$ 0

Page Total Interest Paid Out: \$ 0

Page Total Profit: \$ 0

Page Total Loss: \$ 0

Public Officer/Candidate/Non-Candidate Committee Name

*Qu...*

Page \_\_\_\_\_ of \_\_\_\_\_

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.

STATE OF GEORGIA  
CAMPAIGN CONTRIBUTION DISCLOSURE REPORT

Electronically Filed With Atlanta  
(City or County Filing Officer)

Date of This Filing: April 17, 2009

Name of Public Officer or Candidate: Mayor

Mailing Address: 195 Lynhurst Dr.  
Atlanta, GA 30311

Telephone Number: (Office) 404-429-6431 (Home) \_\_\_\_\_

Name of Public Office Held or Sought: \_\_\_\_\_  
(Include County, Municipality, District, Post or Judicial Circuit)

**PAPER NOTARIZED AFFIDAVIT REQUIRED FOR ANY CAMPAIGN CONTRIBUTION  
DISCLOSURE REPORTS FILED ELECTRONICALLY.**

SEND TO:  
State Ethics Commission  
200 Piedmont Avenue  
Suite 1416 - West Tower  
Atlanta, GA 30334

State of Georgia

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

I, the undersigned, being duly sworn, do swear or affirm, certify and say that the Campaign Contribution Disclosure Report that I have filed electronically (this affidavit and the information hereinabove set forth constitute the first portion thereof) is true, complete, and correct to the best of my knowledge and belief.

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

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Signature of Affiant Filer

My Commission Expires on \_\_\_\_\_, 20 \_\_\_\_\_.