

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

<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>Smyrna City Council Ward 2</u> (Include county, municipality, district, post, or judicial circuit)</p> <p>Filer ID: _____</p> <p>Report of Organization or Person Other than Candidate's Campaign Committee</p> <p>Committee Name: _____</p> <p>Filer ID: _____</p>	<p>Use Earlier of Post Mark or Hand Delivered Date</p> <p style="font-size: 1.5em; color: blue;">10/29/19</p> <p style="font-size: 1.5em; color: blue;">Jmm</p>
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3. Identifying and Contact Information

(1) Austin Wagner (2) 10/29/2019
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 1836 Roswell St SE #10108 Smyrna GA 30080
Mailing Address City State Zip Code

(4) _____ and / or campaign@austinforsmyrna.
Primary Contact Phone Number com 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: Austin Wagner | Austin Wagner
Name of Committee Chairperson Name of Committee Treasurer

4. Period for which you are Reporting

You Must Check Only One Box

My Non Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Election
<input type="checkbox"/> January 31, <u>2019</u> (year) <input type="checkbox"/> June 30, <u>2019</u> (year) <input type="checkbox"/> December 31, <u>2019</u> (year)	<input type="checkbox"/> January 31, <u>2019</u> (year) <input type="checkbox"/> April 30, <u>2019</u> (year) <input type="checkbox"/> June 30, <u>2019</u> (year) <input type="checkbox"/> September 30, <u>2019</u> (year) <input checked="" type="checkbox"/> October 25, <u>2019</u> (year) <input type="checkbox"/> Dec. 31, <u>2019</u> (year)	<input type="checkbox"/> 6 days before Primary Run-Off, <u>2019</u> (year) <input type="checkbox"/> 6 days before General Run-Off, <u>2019</u> (year) <input type="checkbox"/> 6 days before Special Primary Run-Off, <u>2019</u> (year) <input type="checkbox"/> 6 days before Special Run-Off, <u>2019</u> (year)	<input type="checkbox"/> 15 days before Special Primary, <u>2019</u> (year) <input type="checkbox"/> 15 days before Special, <u>2019</u> (year) <input type="checkbox"/> Dec. 31, <u>2019</u> (year)

*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34i

Verification by Oath or Affirmation

I, Austin Wagner, State of Georgia, County of Cobb, 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 filed electronically, filed.

Sworn to and subscribed to before me on October 29, 2019

Tina M. Wagner Signature of Notary Public
 NOTARY PUBLIC
 TINA M. WAGNER
 CHEROKEE COUNTY, GEORGIA
 COMMISSION EXPIRES DECEMBER 27, 2020

12/27/2020 Commission Expiration

Austin Wagner 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.	\$20.94	\$4,080.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0.00	\$550.00
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	\$330.00
5	Total contributions reported this period (Line 3 + 3a + 3b + 3c + 3d + 4).	\$0.00	\$880.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$20.94	\$4,960.00

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	\$961.75
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.	\$0.00	\$2,178.34
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	\$2,178.34
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	\$0.00	\$3,140.09

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)		\$1,819.91
	SEEO Total		\$0.00

* 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	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name / Business Name Stacey Last Name Evans Address 1818 Windemere Dr NE Address2 City Atlanta State GA Zip 30324-4918 Aff. Comm.	Date 10/21/2019 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Attorney Employer Wargo & French LLP	<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 2019 <input type="checkbox"/> Associated with a regulated entity	Cash Amt. \$200.00	Est. Value \$0.00 Description
First Name / Business Name Scott Last Name Wagner Address 353 Wiltshire Cir Address2 City Fletcher State NC Zip 28732-8315 Aff. Comm.	Date 10/10/2019 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Executive Employer Crossroads Entertainment	<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 2019 <input type="checkbox"/> Associated with a regulated entity	Cash Amt. \$50.00	Est. Value \$0.00 Description
First Name / Business Name Scott Last Name Wagner Address 353 Wiltshire Cir Address2 City Fletcher State NC Zip 28732-8315 Aff. Comm.	Date 10/17/2019 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Executive Employer Crossroads Entertainment	<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 2019 <input type="checkbox"/> Associated with a regulated entity	Cash Amt. \$100.00	Est. Value \$0.00 Description

Itemized Contribution Page Total

\$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.
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	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name / Business Name David Last Name Woodbery Address 4794 Rebel Trl Address2 City Atlanta State GA Zip 30327-4641 Aff. Comm.	Date 10/15/2019 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> Inkind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occupation Real estate Employer The Woodbery Group LLC	<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 2019 <input type="checkbox"/> Associated with a regulated entity	Cash Amt. \$200.00	Est. Value \$0.00 Description

Itemized Contribution Page Total	<u>\$200.00</u>	<u>\$0.00</u>
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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 is \$100.00 or more

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Facebook Last Name Address Address2 City State Zip	Date 10/15/2019 <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	Digital advertisement	\$25.00
First Name Facebook Last Name Address Address2 City State Zip	Date 10/15/2019 <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	Digital advertisement	\$25.00
First Name Facebook Last Name Address Address2 City State Zip	Date 10/16/2019 <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	Digital advertisement	\$35.00

Page Total \$85.00

* 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 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 Facebook Last Name Address Address2 City State Zip	Date 10/21/2019 <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	Digital advertisement	\$50.00
First Name Facebook Last Name Address Address2 City State Zip	Date 10/24/2019 <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	Digital advertisement	\$75.00
First Name NGP VAN Last Name Address Address2 City State Zip	Date 10/02/2019 <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	NGP Subscription	\$150.00

Page Total \$275.00

* 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
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.