

State of Georgia Campaign Contribution Disclosure Report - Statewide Elected Executive Officer

1. Report Type (Select One) <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Amended Report Amendment # _____	2. Filing is being made on behalf of (Select One): <input type="checkbox"/> Candidate or Public Official Office Sought or Held: <u>Augusta-Richmond County Commissioner District #4</u> <i>(Include county, municipality, district, post or judicial circuit)</i> Committee Name: <u>Committee to Elect Sammie L. Sias</u> <input type="checkbox"/> Report of Organization or Person Other than Candidate's Campaign Committee	Filing office use only Use Earlier of Post Mark or Hand Delivered Date
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3. Identifying and Contact Information

(1) Sammie L. Sias (2) 1 April 2010
Full Name of Candidate or Non-Candidate Campaign Committee Today's Date

(3) 3839 Crest Drive Hephzibah GA 30815
Mailing Address City State Zip Code

(4) (706) 840 - 5240 and / or (706) 793 - 3529
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: Eugene Hunt / Kathryn Capizzi
Name of Chairperson and / or Treasurer of Committee

4. Period for which you are Reporting

You Must Check Only One Box

My Non Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Elections <small>(Report required only if you are in a Special Election)</small>
<input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> Dec. 31, _____ (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 checked="" type="checkbox"/> March 31, <u>2010</u> (year) <input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> September 30, _____ (year) <input type="checkbox"/> October 25, _____ (year) <input type="checkbox"/> December 31, _____ (year)	<input type="checkbox"/> 6 days before Primary Run-Off, _____ (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)

Verification by Oath or Affirmation

State of Georgia County of Richmond

I, Kathryn Capizzi, 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 1, 2010

Amy D. Thomas
Signature of Notary Public

AMY D. THOMAS

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

NOTARY PUBLIC RICHMOND COUNTY, GA

My Commission expires _____

MY COMMISSION EXPIRES AUGUST 24, 2010
 PENALTIES: Any person who knowingly fails to comply with the provisions of the Ethics in Government Act shall be guilty of a misdemeanor.



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State of Georgia County of Richmond

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Sworn to and subscribed before me on April 1, 2010

Amy D. Thomas
Signature of Notary Public

AMY D. THOMAS

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

NOTARY PUBLIC RICHMOND COUNTY GA
My Commission Expires AUGUST 23, 2010

PENALTIES: 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 - Statewide Elected Executive Officer
Summary Report

CONTRIBUTIONS RECEIVED

1	<input checked="" type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:	<u>In-Kind Estimated Value</u>	<u>Cash Amount</u>
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 Reporting Cycle*, ENTER 0 in the in-kind column and list any <u>net balance</u> on hand brought forward from the previous reporting 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 Reporting 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 are listed on the "Itemized Contributions" page.	0	200.00
3a	All loans received this reporting period.		0
3b	Interest earned on campaign account this reporting period.		0
3c	Total amount of investments sold this reporting period.		0
3d	Total amount of cash dividends and interest paid out this reporting period.		0
4	Total amount of all separate contributions of less than \$101.00 received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.		875.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		1075.00
6	Total contributions to date. <i>Total to be carried forward to next report of this reporting cycle*</i> . (Line 2 + 5)		1075.00

EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:	<u>In-Kind Estimated Value</u>	<u>Cash Amount</u>
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Reporting Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.		0
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		258.34
10	Total amount of all separate expenditures of less than \$101.00 that were made in this reporting period and not listed on the "Itemized Expenditures" page.		266.13
11	Total expenditures reported this period. (Line 9 + 10)		524.47
12	Total expenditures to date. <i>Total to be carried forward to next report of this reporting cycle*</i> . (Line 8 + 11)		524.47

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
15	Net balance on hand. (Line 6 - 12 + 14)		0

* O.C.G.A. 21-5-34(b)(1)(D)(ii) A reporting cycle shall commence on January 1 of the year in which an election is to be held for the public office to which a candidate seeks election and shall conclude:

- (I) At the expiration of the term of office if such candidate is elected and does not seek reelection or election to some other office;
- (II) On December 31 of the year in which such election was held if such candidate is unsuccessful; or
- (III) If such candidate is successful and seeks reelection or seeks election to some other office the current reporting cycle shall end when the reporting cycle for reelection or for some other office begins.

Public Officer/Candidate/Other Than Candidate Committee Name

Sammie L. Sias

State of Georgia

Campaign Contribution Disclosure Report - Statewide Elected Executive Officer

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.

<input type="checkbox"/> Mark if associated* with a regulated entity 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
<input type="checkbox"/> Sammie L. Sias 3839 Crest Dr Hephzibah, GA 30815	8 Mar 10		Retired		200.00	
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						
Regulated Entity Page Total		\$ _____	Itemized Contribution Page Total		\$ 200.00	\$ 0.00
Regulated Entity 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 \$ _____	

* Any person who may be employed by a regulated entity, including a person in whose name a license or lease is held, or who is an officer of a regulated entity
 ** 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 persons shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

State of Georgia
Campaign Contribution Disclosure Report - Statewide Elected Executive Officer
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
Wachovia Bank Tobacco Rd Hephzibah, GA 30815	8 Mar 10	Bank	Checking Account Setup	\$ 144.15
	Expenditure			
Radio Shack	10 Mar 10	Retail	Campaign Phone	\$ 114.19
				\$
				\$
				\$
				\$
				\$
				\$

Page Total \$ 258.34

* 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 - Statewide Elected Executive Officer Investments Statement

1. Investment Name	Account Number
Institution/Person Holding Account _____ Mailing Address _____ _____ 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 Number
Institution/Person Holding Account _____ Mailing Address _____ _____ 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>0.00</u>
<u>Total value of investments at end of reporting period</u> \$	Page Total Interest Paid Out: \$ <u>0.00</u>
<u>Total difference in value</u> \$	Page Total Profit: \$ <u>0.00</u>
	Page Total Loss: \$ <u>0.00</u>

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Addendum Statement

The Addendum Statement should be used for explanation of any additional information needed to complete an accurate filing of this report.

(This area is intentionally left blank for the Addendum Statement.)