

State of Georgia Campaign Contribution Disclosure Report

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 checked="" type="checkbox"/> Candidate or Public Official Office Sought or Held: <u>Commission District 9</u> <i>(Include county, municipality, district, post or judicial circuit)</i> Committee Name: _____ <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) Johnny R. Hatney (2) 7/10/2009
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 119 E Walker St. Augusta, GA 30901
Mailing Address City State Zip Code

(4) (706) 722-1031 and / or (706) 722-5035
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: ~~Margaret~~ MR. Whaley
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 are in a Run-Off Election)</small>	Special Elections <small>(Report required only if you are in a Special Election)</small>
<input checked="" 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 type="checkbox"/> March 31, ____ (year) <input checked="" type="checkbox"/> June 30, <u>2009</u> (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, Margaret Whaley, 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 10, 2009

[Signature]
Signature of Notary Public

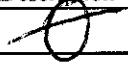
[Signature]
a. Signature of Candidate
b. Organization/Chairperson/Treasurer

My Commission expires 3/4/2011



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
					
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 \$ 

* 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/Other than Candidate Committee Name Johnny R. Hettray Page _____ of _____

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
				\$ <u>0</u>
				\$
				\$
				\$
				\$
				\$
				\$
				\$

Page Total \$ 0

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

Public Officer/Candidate/Other Than Candidate Committee Name Johnny R. Hatney Page _____ of _____

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 \$
	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

Total value of investments at beginning of reporting period \$ _____ Total value of investments at end of reporting period \$ _____ Total difference in value \$ _____	Page Total Cash Dividends: \$ <u>0</u> Page Total Interest Paid Out: \$ _____ Page Total Profit: \$ _____ Page Total Loss: \$ <u>0</u>
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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.

