

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

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

(1) Virginia Woodall Blakeney (2) April 27, 2020
Full Name of Candidate or Other Than Candidate Campaign Committee Name Today's Date

(3) [REDACTED] Williamson GA 30292
Mailing Address City State Zip Code

(4) [REDACTED] and/or [REDACTED]
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

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"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)	<input type="checkbox"/> January 31, _____ (year) <input checked="" type="checkbox"/> April 30, <u>2020</u> (year) <input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> September 30, _____ (year) <input type="checkbox"/> October 25, _____ (year) <input type="checkbox"/> Dec. 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)
Supplemental Reporting <input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)	<small>*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</small>		

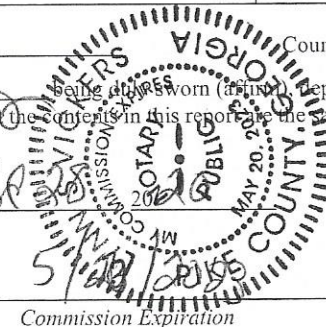
State of GA County of Pike

I, Virginia Blakeney 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 27, 2020

[Signature] Virginia Blakeney
Signature of Notary Public a. Signature of Candidate

[Signature]
b. Organization/Chairperson/Treasurer


Commission Expiration

CFC-CCDR 10/19

State of Georgia
Campaign Contribution Disclosure Report
Summary Report

CONTRIBUTIONS RECEIVED

1		In-Kind Estimated Value	Cash Amount
	<input checked="" type="checkbox"/> I have no contributions to report. <input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:		
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	0
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		2,900
3a	All loans received this reporting period.		6,850
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 \$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.		610
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		10,360
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		10,360
EXPENDITURES MADE			
7	<input checked="" 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.		9985.46
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		247.14
11	Total expenditures reported this period. (Line 9 + 10)		10,232.60
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		10,232.60
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
TOTAL NET BALANCE ON HAND			
15	Net balance on hand. (Line 6 - 12 + 14)		127.40

* 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>General</u> Election Year: <u>2020</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	6,850
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)	6,850
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	

* 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

CFG-CCLR 10/19

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 or Business Name Chad Last Name Proctor Address [REDACTED] Address2 [REDACTED] City Williamson State GA Zip 30292 Aff. Comm.	Date 02.10.2020 paypal donation accepted	Occupation owner & operator @ SouthSide Steel Employer SouthSide Steel - self employed	<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	500.00	Est. Value Description
First Name or Business Name Pamela Last Name Blakeney Address [REDACTED] Address2 [REDACTED] City Williamson State GA Zip 30292 Aff. Comm.	Date 02.10.2020 paypal donation accepted	Occupation manager Employer Norfolk Southern Railroad	<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	200.00	Est. Value Description
First Name or Business Name Carol Last Name Boronkas Address [REDACTED] Address2 [REDACTED] City Williamson State GA Zip 30292 Aff. Comm.	Date 02.10.2020	Occupation retired Employer	<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	1,000.00	Est. Value Description

Itemized Contributions Page Total \$ 1,700 s.

Public Officer/Candidate/Other Than Candidate Committee Name

Virginia W. Blakeney

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First Name or Business Name	Date	Occupation		Cash Amt.	Est. Value
James Woodall	02.12.2020	retired	<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	200.00	
Address					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind				
State	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Ricky "pat" Patterson	02.13.2020	retired	<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	500.00	
Address					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind				
State	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Johnnie & Rita Caldwell	03.07.2020	attorney	<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	250.00	
Address					
Address2	<input checked="" type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind	self employed			
State	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					
Flanders Farms & Timber LLC	04.27.2020	farmer	<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	250.00	
Address					
Address2	<input type="checkbox"/> Monetary	Employer			
City	<input type="checkbox"/> In-Kind	self employed			
State	<input type="checkbox"/> Common Source				
Zip	<input type="checkbox"/> Credit Received on Loan				
Aff. Comm.					

Itemized Contributions Page Total \$ 1,200 \$

* 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.) John	1. 01.12.2020	First Name Virginia	1. fabricator
Lender Last Name Blakeney	2. \$6,500.00	Last Name Blakeney	2. Southside Steel
Address 	3. <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	Address 	3. <input type="checkbox"/> Public Officer <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City Williamson		City Williamson	
State GA Zip 30292		State GA Zip 30292	
Lender Name (First Name, Business, Inst.) Virginia	1. 01.28.2020	First Name Virginia	1. department director
Lender Last Name Blakeney	2. \$350.00	Last Name Blakeney	2. Pike County BOC
Address 	3. <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	Address 	3. <input type="checkbox"/> Public Officer <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name
Address2		Address2	
City Williamson		City Williamson	
State GA Zip 30292		State GA Zip 30292	
Reference: OCGA § 21-5-34(b)(1)			Loan Page Total \$ 6,850

* 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

CFC-CCDR 10/19

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 Discount Last Name Mugs Address 14410 NW 115th Ave Address2 City Miami State FL Zip 33178	Date 01.12.2020 <input checked="" type="checkbox"/> Expenditure 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	Koozies for promotion	200.09
First Name Signs on Last Name the cheap Address 11525A Stonehollow Drive Address2 Suite 100 City Austin State TX Zip 78758	Date 01.12.2020 <input checked="" type="checkbox"/> Expenditure 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	bumper stickers for promotion	288.90
First Name Build A Sign Last Name Address 11525A Stonehollow Drive Address2 Suite 100 City Austin State TX Zip 78758	Date 01.12.2020 <input type="checkbox"/> Expenditure 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	yard signs	493.26

Page Total \$ **982.25**

* 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 <i>Pike County</i>	Last Name <i>Journal Reporter</i>	Date <i>01.14.2020</i>	Occupation	newspaper candidacy announcement	95.58
Address <i>16026 Barnesville St</i>					
Address2		<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	Employer		
City <i>Zebulon</i>					
State <i>GA</i>	Zip <i>30295</i>				
First Name <i>Pike County</i>	Last Name <i>Journal Reporter</i>	Date <i>01.24.2020</i>	Occupation	newspaper campaign	84.96
Address <i>16026 Barnesville St</i>					
Address2		<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	Employer		
City <i>Zebulon</i>					
State <i>GA</i>	Zip <i>30295</i>				
First Name <i>Build A Sign</i>	Last Name	Date <i>01.26.2020</i>	Occupation	yard signs	769.72
Address <i>11525A Stonehollow Dr.</i>					
Address2 <i>Suite 100</i>		<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	Employer		
City <i>Austin</i>					
State <i>TX</i>	Zip <i>78758</i>				
First Name <i>Pike County Times</i>	Last Name	Date <i>01.27.2020</i>	Occupation	online newspaper advertisement	140.00
Address <i>PO Box 843</i>					
Address2		<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	Employer		
City <i>Zebulon</i>					
State <i>GA</i>	Zip <i>30295</i>				

* 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 \$ 1090.26

Public Officer/Candidate/Other Than Candidate Committee Name

Virginia W. Blakeney

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Build A Sign	Last Name	Date 01.29.2020	Occupation	license plates for parade	103.54
Address 11525A Stonehollow Dr.					
Address2 Suite 100	City Austin	State TX	Zip 78758	<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	Employer
City					
First Name 24 Hour Wristbands	Last Name	Date 01.30.2020	Occupation	bracelets for promo items	136.50
Address 14550 Beechnut St					
Address2	City Houston	State TX	Zip 77083	<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	Employer
City					
First Name 24 Hour Wristbands	Last Name	Date 02.04.2020	Occupation	buttons & banners for events	223.15
Address 14550 Beechnut St					
Address2	City Houston	State TX	Zip 77083	<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	Employer
City					
First Name Signs.com	Last Name	Date 02.10.2020	Occupation	big signs 4x4	2,624.85
Address 1550 South Gladiola St					
Address2	City Salt Lake City	State UT	Zip 84104	<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	Employer
City					

* 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 \$ **3088.04**

Public Officer/Candidate/Other Than Candidate Committee Name Virginia W. Blakeney Page 9 of 14

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List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Vistaprint Last Name Address 275 Wyman St Address2 City Waltham State MA Zip 02451	Date 02.17.2020	Occupation Employer	rack cards = 2 different ones	293.09
First Name Vistaprint Last Name Address 275 Wyman St Address2 City Waltham State MA Zip 02451	Date 02.17.2020	Occupation Employer	tri fold brochure	350.50
First Name Signs.com Last Name Address 1550 South Gladiola St Address2 City Salt Lake City State UT Zip 84104	Date 02.16.2020	Occupation Employer	magnets for cars	388.04
First Name Erica Patterson Blakeney Last Name Address [REDACTED] Address2 City Williamson State GA Zip 30292	Date 02.20.2020	Occupation Employer	tshirts	214.50

* 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 \$ 1246.13

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Pike County Times Last Name		Date 02.12.2020	Occupation	online newspaper advertising	140.00
Address PO Box 843 Address2 City Zebulon State GA Zip 30295					
		<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	Employer		
First Name Last Name Pike County		Date 02.21.2020	Occupation	newspaper campaign	159.32
Address Journal Reporter Address2 10026 Barnesville St City Zebulon State GA Zip 30295					
		<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	Employer		
First Name Last Name Pike County Board of Commissioners		Date 03.03.2020	Occupation	qualifying fees	1312.25
Address 331 Thomaston Street Address2 City Zebulon State GA Zip 30295					
		<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	Employer		
First Name Last Name Pike County Times		Date 03.08.2020	Occupation	online newspaper advertising	140.00
Address PO Box 843 Address2 City Zebulon State GA Zip 30295					
		<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	Employer		

* 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 \$ 1831.57

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Executive Advertising		Date 03.06.2020	Occupation	ballpark baseball clapper promo item	405.61
Last Name					
Address 181 E Main St		<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	Employer		
Address2 #4					
City Hendersonville					
State TN	Zip 37075				
First Name Pike County		Date 04.03.2020	Occupation	newspaper campaign	175.23
Last Name Journal Reporter					
Address 16026 Barnesville St		<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	Employer		
Address2					
City Zebulon					
State GA	Zip 30295				
First Name Build A Sign		Date 03.15.2020	Occupation	yard signs refill	468.66
Last Name					
Address 11525A Stonehollow Dr		<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	Employer		
Address2 Suite 100					
City Austin					
State TX	Zip 78758				
First Name Pike County Times		Date 04.12.2020	Occupation	online newspaper	140.00
Last Name					
Address PO Box 843		<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	Employer		
Address2					
City Zebulon					
State GA	Zip 30295				

* 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 \$ **1189.50**

Public Officer/Candidate/Other Than Candidate Committee Name

Virginia W. Blakeney

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List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid					
First Name <i>Pike County Journal</i>	Date <i>04.15.2020</i>	Occupation	Employer	newspaper campaign	39.83					
Last Name <i>Reporter</i>										
Address <i>16026 Barnesville St</i>	<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							
Address2										
City <i>Zebulon</i>										
State <i>GA</i>						Zip <i>30295</i>				
First Name <i>Build A Sign</i>						Date <i>04.27.2020</i>	Occupation	Employer	yard sign refill	517.88
Last Name										
Address <i>11525A Stonehollow Dr.</i>	<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							
Address2 <i>Suite 100</i>										
City <i>Austin</i>										
State <i>TX</i>						Zip <i>78758</i>				
First Name						Date	Occupation	Employer		
Last Name										
Address	<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							
Address2										
City										
State						Zip				
First Name						Date	Occupation	Employer		
Last Name										
Address	<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							
Address2										
City										
State						Zip				

* 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 \$ 557.71

Public Officer/Candidate/Other Than Candidate Committee Name

Virginia W. Blakeney

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State of Georgia Campaign Contribution Disclosure Report Investments Statement

1. 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

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.

State of Georgia

Two Business Days Report of Contributions Received

MUST BE SENT VIA FACSIMILE (404-463-1988) OR ELECTRONIC TRANSMISSION.
 ANY FACSIMILE FILING SHALL ALSO HAVE AN IDENTICAL ELECTRONIC FILING WITHIN FIVE BUSINESS DAYS
 FOLLOWING THE TRANSMISSION OF SUCH FACSIMILE FILING.

To be used to report contributions (including loans) of \$1,000 or more,
 IF RECEIVED BETWEEN LAST REPORT DUE BEFORE AN ELECTION AND THE ELECTION.
 Must be reported within two business days of receipt!

Use Earlier of Post
 Mark or Hand
 Delivered Date

02.10.2020

Identifying Information:

Virginia "Ginny" Blakeney Probate ~~_____~~
 Candidate or Committee Name Office Sought E-Mail

Filer ID (begins with the letter "C")

~~_____~~ Williamson GA 30292
 Mailing Address (number and street) City State Zip

Full Name of Contributor Mailing Address (PAC Affiliation if applies)	Contributor		Election	Amount
	Received Date Contribution Type*	Occupation & Employer		
Carol J. Boronkas _____ Williamson, GA 30292	monetary	retired	May 2020	\$1,000.00

* Monetary, In-Kind or Loan

I certify and affirm that I have examined this report, and say that the information in this report 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. I further affirm that I understand that the above contribution(s) must also be reported on the next succeeding regularly scheduled campaign contribution disclosure report.

Name of Candidate Chairman Treasurer

Ginny Blakeney _____ 02.11.2020
 Signature Date