## ORIGINAL



## Georgia Government Transparency & Campaign Finance Commission

200 Piedmont Avenue S.E.   Suite 1416 - West Tower   Atlanta Georgia, 30334						
1-2/	DECLARATION OF IN	TENTION TO ACCEPT CAMPAIGN CONTRIBUTI	IONS (FO	-	4	
	INCOMPLETE FORMS WILL NOT BE PROCESSED • If form is handwritten, it must be legible.					
1	Today's Date:	0 13/19	31.4	3 P		
2	Candidate (full name):	Jerica Marie Richardson	ig	12: 0	žť	
	Address:	2850 Delk Rd Apt 356		9	_	
	City, State, Zip:	Marietta, GA 30067				
	Telephone (optional):	504.858-7728 Email: jerica @ jerica forcobocon				
3	Select Office Type: State	wide 🗆 State 🔎 County 🗆 Municipal	arty Affiliatior	(optional	):	
	Name of Office Sought or H	eld: Cobb County Commissioner District 2 (include district, post, or judicial circuit if applicable)	Democrat Republican	□ Non Pai □Other	rtisan	
4	Next Election Year: 20	10				
	Complete sections 5 and 6 ONLY if you have a campaign committee.  This information does not register a campaign committee. (Please use Form RC to register.)					
5	Campaign Committee Chairperson (full name):	Jerica Marie Richardson				
	Address:	2850 Delk Rd Apt 356			_	
	City, State, Zip	Marietta, GA 30067				
	Email :	jerica @ jericaforcobb.com				
6	Treasurer (full name):					
	Address:					
	City, State, Zip					
	Email:					
I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.						
Signature of Candidate  Date						