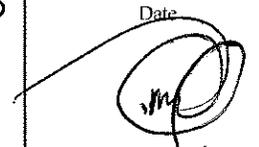


Campaign Contribution Disclosure Report

Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue S.E. | Suite 1402 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>Snellville City Council Post 3</u> <small>(Include county, municipality, district, post or judicial circuit)</small></p> <p>Filer ID _____ <small>(Filer ID that begins with the letter "C")</small></p> <p>Organization or Person Other than Candidate's Campaign Committee</p> <p>Committee Name: <u>None</u></p> <p>Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small></p>	<p>Use Earlier of Post Mark or Hand Delivered Date</p> <p style="text-align: center;"></p> <p style="text-align: center; border: 1px solid black; padding: 5px;">9/29/15</p>
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3. Identifying and Contact Information

(1) Cristy Lynn Lenski (2) 9/30/2015
Full Name of Candidate or Other Than Candidate Campaign Committee Today's Date

(3) 2608 Hickory Trail Snellville GA 30078
Mailing Address City State Zip Code

(4) 770-846-3494 and/or cristyforCouncil@gmail.com
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

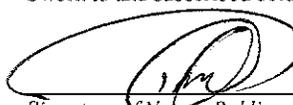
My Non Election Year	My Election Year	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small>	Special Election
<input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> June 30, ____ (year)	<input type="checkbox"/> January 31, ____ (year) <input type="checkbox"/> March 31, ____ (year) <input type="checkbox"/> June 30, ____ (year) <input checked="" type="checkbox"/> September 30, <u>2015</u> (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)
<p>Supplemental Reporting</p> <input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<p><small>*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></p>		

State of Georgia County of Gwinnett

I, Phyllis M Richardson Cristy L. Lenski, 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.

PHYLLIS M RICHARDSON
NOTARY PUBLIC
GWINNETT COUNTY
STATE OF GEORGIA
My Commission Expires February 19, 2017

Sworn to and subscribed before me on September 29, 2015

 Signature of Notary Public

2-19-17 Commission Expiration

Cristy L. Lenski
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.	0	0
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	350.00	1550.00
3a	All loans received this reporting period.		1301.00
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.		2090.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	350.00	4941.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	350.00	4941.00

EXPENDITURES MADE

7	<input 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.	0	2563.47
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	0	355.96
11	Total expenditures reported this period. (Line 9 + 10)	0	2879.43
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)	0	2929.43

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)		2011.57
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* 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 Outstanding Indebtedness		
Election *: <u>City Council Post 3 Snellville</u> Election Year: <u>2015</u>		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	0
2	Loans received this reporting period.	1301.00
3	Deferred payment of expenses this reporting period	0
4	Payments made on loans this reporting period.	1301.00
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)	0
Election *: _____ 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 *: _____ 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 (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)

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**	Cash Amount	In-Kind Contributions
	Received Date Contribution Type*	Occupation & Employer			Estimated Value
					Description
First Name Bobby Last Name Howard Address 2240 Pinehurst Road Address2 City Snellville State GA Zip 30078 Aff. Comm.	Date 7/29/2015 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occ. Self-Employed Emp. Odd Job Bob, Inc.	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 250.00	Est. Value Description
First Name Barbara Last Name Bender Address 2092 Scenic Hwy Suite A Address2 City Snellville State GA Zip 30078 Aff. Comm.	Date 8/20/2015 <input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occ. Accountant Emp. Hamilton Financial, PC	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 200.00	Est. Value Description
First Name Don Last Name Britt Address 3197 Classic Drive Address2 City Snellville State GA Zip 30078 Aff. Comm.	Date 9/1/2015 <input type="checkbox"/> Monetary <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Occ. Manager Emp. Summit Chase Country Club	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 350.00	Est. Value 350.00 Description Facility use, food, & beverages
Itemized Contributions Page Total \$				450.00	\$ 350.00

Cristy Lenski

First Name Laurie		Date 9/1/2015	Occ. Waitress	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 150.00	Est. Value
Last Name Williams					Description	
Address 96 Spence Road						
Address2		<input checked="" type="checkbox"/> Monetary	Emp. Little Hawaiian Restaurant			
City Carrollton		<input type="checkbox"/> In-Kind				
State GA	Zip 30117	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name Kurt		Date 9/1/2015	Occ. Retired	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 150.00	Est. Value
Last Name Schulz					Description	
Address 2027 Tanglewood Dr						
Address2		<input checked="" type="checkbox"/> Monetary	Emp. Retired			
City Snellville		<input type="checkbox"/> In-Kind				
State GA	Zip 30078	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name Stephen		Date 9/2/2015	Occ. Sales	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 150.00	Est. Value
Last Name Daniell					Description	
Address 761 Berryman Place						
Address2		<input checked="" type="checkbox"/> Monetary	Emp. Self-Employed			
City Lawrenceville		<input type="checkbox"/> In-Kind				
State GA	Zip 30045	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name Anthony		Date 9/1/2015	Occ. Attorney	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 500.00	Est. Value
Last Name Powell					Description	
Address 10 Lumpkin Street						
Address2		<input checked="" type="checkbox"/> Monetary	Emp. Webb, Tanner, Powell & Wilson, LLP			
City Lawrenceville		<input type="checkbox"/> In-Kind				
State GA	Zip 30046	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total \$					950.00	\$ 0

First Name Denice		Date 9/25/2015	Occ. Teacher	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 150.00	Est. Value
Last Name Gilbert						
Address 4960 Bainbridge Court						
Address2		<input checked="" type="checkbox"/> Monetary	Emp.			Description
City Liburn		<input type="checkbox"/> In-Kind	Gwinnett County Public Schools			
State GA	Zip 30047	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name Aggregate Donors		Date 9/29	Occ.	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	Cash Amt. 2090.00	Est. Value
Last Name 100 or less						
Address						
Address2		<input type="checkbox"/> Monetary	Emp.			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input checked="" type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name		Date	Occ.	<input type="checkbox"/> Primary <input 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	Cash Amt.	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Emp.			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name		Date	Occ.	<input type="checkbox"/> Primary <input 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	Cash Amt.	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Emp.			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name		Date	Occ.	<input type="checkbox"/> Primary <input 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	Cash Amt.	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Emp.			Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total \$					2240.00	\$ 0

State of Georgia Campaign Contribution Disclosure Report Loan Reporting

Name of Lender & Mailing Address	1. Date of Loan 2. Amount of Loan 3. Election	Person(s) responsible for repayment of loan & Mailing Address	1. Occupation & 2. Place of Employment
Lender Name (First Name, Business, Inst.) Cristy	1. 7/18/2015	First Name Cristy	1. Teacher
Lender Last Name Lenski	2. 1301.00	Last Name Lenski	2. Gwinnett County Public Schools
Address 2608 Hickory Trail	3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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 2608 Hickory Trail	
Address2		Address2	
City Snellville		City Snellville	
State <small>GA</small>		State <small>GA</small>	
Zip <small>30078</small>		Zip <small>30078</small>	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input 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	
Address2		Address2	
City		City	
State		State	
Zip		Zip	
Reference: OCGA § 21-5-34(b)(1)			Loan Page Total \$ <u>1301.00</u>

* If any such person(s) 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 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	Expenditure Date Expenditure Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Hi Tech Signs Last Name Address 1018 N. 5th Ave. NE Address2 City Rome State GA Zip 30165	Date 7/28/2015 <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 Expense <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occ. advertising Emp.	campaign yard signs	337.05
First Name Office Depot Last Name Address 1905 Scenic Hwy suite 9000 Address2 City Snellville State GA Zip 30078	Date 7/29/2015 <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 Expense <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occ. business products Emp.	ink cartridges, invitations	135.63
First Name Victory Store Last Name Address 5200 30th St SW Address2 City Davenport State IA Zip 52802	Date 8/15/2015 <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 Expense <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Occ. printing & graphic art Emp.	campaign push cards & door hangers	669.79

Page Total \$ 1142.47

List Name and Mailing Address of Recipient		Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Cristy		Date 9/29/2015	Occ. Teacher Emp. Gwinnett County Public Schools	Loan to Self Repayment	1301.00
Last Name Lenski					
Address 2608 Hickory Trail					
Address2					
City Snellville					
State GA	Zip 30078				
First Name City of Snellville		Date 9/2/2015	Occ. City Government Emp.	Candidate Qualifying Fee	120.00
Last Name					
Address 2342 Oak Road					
Address2					
City Snellville					
State GA	Zip 30078				
First Name		Date	Occ.		
Last Name					
Address					
Address2					
City					
State	Zip				
First Name		Date	Occ.		
Last Name					
Address					
Address2					
City					
State	Zip				

Cristy Lenski

**State of Georgia
Campaign Contribution Disclosure Report
Investments Statement**

1. Investment Name 0	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> <u>Total value of investments at end of reporting period \$</u> <u>Total difference in value \$</u>	Page Total Cash Dividends: \$ _____ 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.
Information that is to be reported in the body of the report **should not** be listed on Addendum Statement.

none

TRANSMISSION VERIFICATION REPORT

TIME : 10/07/2015 11:03
NAME : CITY OF SNELLVILLE
FAX : 7709853525
TEL : 7709853500
SER.# : 000A6J707277

DATE, TIME	10/07 10:59
FAX NO./NAME	918669147974
DURATION	00:04:17
PAGE(S)	11
RESULT	OK
MODE	STANDARD