POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE

The following information is provided in accordance with the Georgia Conflict of Interest in Zoning Actions law, O.C.G.A. § 36-67A-1 et seq. The Applicant identified below has filed a request for a rezoning or special use approval for a property located in unincorporated Camden County, Georgia, being more specifically described: in the attached deed or boundary description. as located at: _____ and identified as Tax Parcel Number: Within the two years preceding the date of said application, THE APPLICANT has made campaign contributions or gifts aggregating \$250 or more to the following members of the Camden County Board of Commissioners: Name of Commissioner Amount and Description of Date of Contribution or Gift Contribution or Gift Name of Applicant: Address of Applicant: Signature of Applicant Date: ______ , 20 ____ Within the two years preceding the date of said application, the APPLICANT'S ATTORNEY has made campaign contributions or gifts aggregating \$250 or more to the following members of the Camden County Board of Commissioners: Name of Commissioner Amount and Description of Date of Contribution or Gift Contribution or Gift Name of Applicant's Attorney: Address of Applicant's Attorney:

Attach additional sheets as needed.

_____ , 20 ____

Signature of Applicant's Attorney

An Official Form of

Date: _____



Within the two years preceding the date of said application, an **OTHER PERSON** representing or acting on behalf of the **APPLICANT** has made campaign contributions or gifts aggregating \$250 or more to the following members of the Camden County Board of Commissioners:

Name of Commissioner	A	mount and Description of Contribution or Gift	Date of Contribution or Gift
Name of Person representing Applicant:		Address of Person represent	ing Applicants
Name of Person representing Applicant.		Address of Person represent	під Арріїсані.
Signature: Applicant's Representative			
Within the two years preceding the date of the APPLICANT has made campaign of the Camden County Board of Commiss	contributions of the contribution of the contributi	or gifts aggregating \$250 c	or more to the following member
Name of Commissioner	A	mount and Description of Contribution or Gift	Date of Contribution or Gift
Name of Person representing Applicant:		Address of Person represent	ing Applicant:
Signature: Applicant's Representative		·	

Attach additional sheets as needed

