



Georgia Government Transparency & Campaign Finance Commission
 200 Piedmont Avenue S.E. | Suite 1416 - West Tower | Atlanta Georgia, 30334

DECLARATION OF INTENTION TO ACCEPT CAMPAIGN CONTRIBUTIONS (FORM DOI) – COUNTY/MUNICIPAL LEVEL FILERS

INCOMPLETE FORMS WILL NOT BE PROCESSED • If form is handwritten, it must be legible.

1 Today's Date: 04/05/2021

2 Candidate (full name): John Herbert Steed
 Address: 5517 Sedgewick Dr.
 City, State, Zip: Columbus, Ga. 31904
 Telephone (optional): _____ Email: jhsteed@kar-tunes.com

3 Name County/City: <u>Muscogee/ Columbus</u>	Party Affiliation (optional): <input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Non-Partisan <input type="checkbox"/> Republican <input type="checkbox"/> Other
Name of Office Sought or Held: <u>School Board District 2</u> <small>(include office, district, post, or judicial seat)</small>	

4 Next Election Year: 2021

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): _____
 Address: _____
 City, State, Zip: _____
 Email: _____

6 Treasurer (full name): _____
 Address: _____
 City, State, Zip: _____
 Email: _____

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

John H. Steed
 Signature of Candidate

04/05/2021
 Date