

Q2006000148  
Jensen 2-20-18

Georgia Government Transparency & Campaign Finance Commission  
DECLARATION OF INTENTION TO ACCEPT CAMPAIGN CONTRIBUTIONS  
FORM DOI

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

1 Today's Date: 2/20/2018

2 Candidate (full name): SIAVOSH A Etemadi  
Address: # 624 2<sup>ND</sup> AVE.  
City, State, Zip: COLUMBUS, GA. 31901  
Telephone (optional): (706) 987-3446 Email: siaetemadi@CHARTER.com

3 Select Office Type:  State  County  Municipal  
Name of Office Sought or Held: DISTRICT 7  
(include district, post, or judicial circuit if applicable)  
Party Affiliation (optional):  
 Democrat  Non Partisan  
 Republican  Other

4 Next Election Year: 2018

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): Kristin Bourgeois  
Address: # 313 7<sup>TH</sup> STREET  
City, State, Zip: COLUMBUS, GA 31901  
Email: 2410Knb@gmail.com

6 Treasurer (full name): Ana Luisa M. Ahern  
Address: # 542 FRONT AVENUE  
City, State, Zip: COLUMBUS, GA 31901  
Email: ana.ahern@gmail.com

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

Sia Etemadi  
Signature of Candidate

2/20/2018  
Date