



CCDR Electronic Filing Access Code OTHER THAN CANDIDATE COMMITTEES

Georgia Government Transparency and Campaign Finance Commission
200 Piedmont Avenue
Suite 1402 - West Tower
Atlanta, GA 30334

PERSONAL IDENTIFICATION NUMBER APPLICATION (** All Fields must be completed and legible in order to process application **)

Non-Candidate Committee's Identification - Please Print

Application Status _____

Committee Name _____

Address _____

Address2 _____

City, State Zip _____

Contact Phone _____ Alternate Phone _____

Email Address _____

I understand this confidential PIN number is assigned to the above Non-Candidate Committee and only the State Ethics Commission staff and the listed filer will have access to this confidential number.

Verification - Must Be Notarized

State of _____, County of _____.

FILER: I, the undersigned filer do hereby swear or affirm that the information in this application is complete, true, and correct to the best of my knowledge and belief. I acknowledge that any report I submit electronically in the future I shall verify as complete, true, and correct to the best of my knowledge and belief.

SIGNATURE OF FILER: _____

NOTARY PUBLIC (sign name): _____

PRINT NOTARY'S NAME: _____

My Commission expires: _____

For Office Use Only

FilerID:

Approved By _____ Date _____