

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

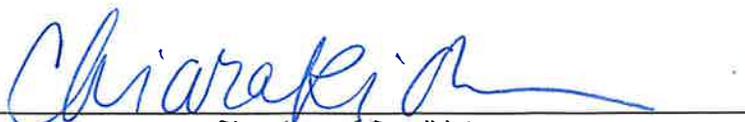
INCOMPLETE FORMS WILL NOT BE PROCESSED - If form is handwritten, it must be legible.

1	Today's Date: 03/09/2026	
2	Candidate (full name): <u>Chiara Nicole Richardson</u> Address: <u>4519 Woodruff Rd Unit 4 #101</u> City, State, Zip: <u>Columbus, GA 31904</u> Telephone (optional): _____ Email: <u>info@chiarafordistrict7.com</u>	
3	Select Office Type: <input type="checkbox"/> State <input type="checkbox"/> County <input checked="" type="checkbox"/> Municipal Name of Office Sought or Held: <u>City Council District 7</u> <small>(include district, post, or judicial circuit if applicable)</small>	Party Affiliation (optional): <input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Non Partisan <input type="checkbox"/> Republican <input type="checkbox"/> Other
4	Incumbent: _____	Next Election Year: _____

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): <u>Barbara Chambers</u> Address: <u>670 Parkchester Dr</u> City, State, Zip: <u>Columbus</u> <u>Georgia</u> <u>31906</u> Email: <u>chambers670@att.net</u>	
6	Treasurer (full name): <u>Laticia Sharp-Frazier</u> Address: <u>305 Goshawk Ridge SW</u> City, State, Zip: <u>Atlanta</u> <u>Georgia</u> <u>30331</u> Email: <u>sharpmlc@gmail.com</u>	

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


Signature of Candidate

03/09/2026

Date