



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: 5/1/20

2 Candidate (full name): Tarece Johnson  
Address: 3585 Mt Vernon Ct.  
City, State, Zip: Lawrenceville, GA 30044  
Telephone (optional): 678 438 3011 Email: artarece@gmail.com

3 Name County/City: Gwinnett/Lawrenceville  
Name of Office Sought or Held: School Board, District 5  
(include office, district, post, or judicial seat)  
Party Affiliation (optional):  
 Democrat  Non-Partisan  
 Republican  Other

4 Next Election Year: 2020

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): Vote Tarece Johnson  
Address: 3585 Mt Vernon Ct.  
City, State, Zip: Lawrenceville, GA 30044  
Email: tarece@votetarecejohnson.com

6 Treasurer (full name): Vincent Olsziewski  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Email: vinny@campaignsbyvincent.com

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

Tarece Johnson  
Signature of Candidate

5/1/20  
Date