



# Candidate & Elected Official Campaign Finance Report **SUMMARY FORM 1**

**FILED** 

NOV 03 2015

BOBBY M. JUNKINS JUDGE OF PROBATE

Please Print in Ink or Type.						
l .	olitical Party/Ba		Type of Report	·	e) Amended Monthly	
Lewis H. Faller 1	Chal	Wican	Mont	· <u>L</u>	Amended Weekly	
Office Sought or Held (include district or circuit number, if applicable)	<i>a</i>		Wee		Antended Weekly	
Address			For Monthly R Month in which report is filed.	- 1		
801 Bélleone BR.			For Weekly Re Date of Friday i	• 1		
801 Béllevue BR.  City Gadsden AL 35984 25	elephone Numl 56-472	ber B-1424	week in which t report is filed.			
			Total Number Pages in Repo			
Summary of activity since last filed report			-			
1 Beginning balance (ending balance from previous	s filing)			1	15	
Cash Contributions		•				
2a Itemized cash contributions (total from Form 2)	7	2a		]	·	
2b Non-itemized cash contributions	1	2b		1		
2c Total cash contributions (add lines 2a and 2b)		<del></del>	·	2c	B	
In-Kind Contributions	·································		•			
3a Itemized in-kind contributions (total from Form 3)		3a				
3b Non-itemized in-kind contributions		3b	<del></del>		*• •	
3c Total in-kind contributions (add lines 3a and 3b)		3c		1	;	
Receipts from Other Sources		. <u></u>		ļ	· · · · · · · · · · · · · · · · · · ·	
4a Itemized Receipts from Other Sources (total from	Form 4)	4a				•
4b Non-itemized Receipts from Other Sources		4b	•			
4c Total receipts from other sources (add lines 4a ar	nd 4b)			4c		
Expenditures				<u> </u>		
5a Itemized expenditures (total from Form 5)	!	5a	<del>_,</del>	]		
5b Non-itemized expenditures		5b		1		
5c Total expenditures (add lines 5a and 5b)				5c	0	
6 Ending balance (add lines 1, 2c, & 4c, then subtrac	t line 5c)			6	8	
		crotany of Stat				
Candidates for State Office: File this report with the Office Candidates for County or Municipal Office: File this report				ty in which	the office is sought.	
	-		ribed before me		day of	
As required by the Alabama Fair Campaign Practices Act, I hereb swear or affirm to the best of my knowledge and belief that the	, ,	_	ne year 20/		<del></del> •	
attached report(s) and the information contained herein ar	re		17	_ A	commission expires	/
true and correct and that this information is a full and complet statement of all contributions, expenditures, and other require		day	of paul	of the y	ear <u>Jojo</u>	•
information during the applicable period of time.	_ 4	$\langle \rangle$	Louis	<b>1</b>	mcAu	~
1 TOUR AVATURE 19-3-10	Signa	ture of Notary Po	blic '	12	men	- • •
signature of Candidate or Electer Official Date		5/	DDI	10	· /// (~).	N 1
, ·	Drint !	Notary's Name	C/C/			/
FORM REVISED 10.27.2011	rant i	Notally 5 Hallie				

### ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

## FORM 2: Contributions received by candidate or elected official



NAME OF CANDIDATE OR ELECTED						_				
When total contribution	ns from a single source exceed \$100.00, the FCPA requires all contributions or loans on this form. Use Forms 3 an	oution d 4 fo	is fro	m those I	at so isting	ource js.	e to be itemized.			
			SCO	OUR		ON		AMOUNT		
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation	Business or Corporation Individual		Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)			
·										
·										
ORM REVISED 10.27.2011  TOTAL CASH CONTRIBUTIONS THIS PAGE										

#### ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

### FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:



When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.

· '	DO NOT LIST cash or loans on thi	is for	m. l	Jse F	orm	s 2 a	nd 4	for	thos	e lis	tings	S	<u>.</u>	<del>[</del>	
•				URE (		<b>ONT!</b> K ON!		TION	i		SOU CHEC				
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)  by  tig  typ  ye  ye  ye  ye  ye  ye  ye  ye  ye	Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individuai	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
					1							<del> </del>	•		<u> </u>
					<u> </u>										
FORM REVISED 10.27.2011	TOTAL IN-KIND CONTRIBUTIONS THIS PAGE														

#### ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

# FORM 4: Receipts from Other Sources loans, interest, and other sources of income



NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.

			FORI RECI	M EIPT	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	R		PT S		CE		4350437	
SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Interest	Loan	Other	GUARANTORS  [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
										-			
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RM REVISED 10.27.2011	TOTAL RECEIPTS THIS PAGE												

### ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

## FORM 5: Expenditures by candidate or elected official



NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

					PU	RPO	SE (		<b>t</b>				
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
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DRM REVISED 10.27.2011	TOTAL EXPENDITURES THIS PAGE												