

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

FILED BOBBY M. JUNKINS JUDGE OF PROBATE

	Please Print in in	K OF Type.				Type of Report	(check	one)
Name of Candidate or Elec			Political Party/E Republican		milation	Mont		Amended Monthly
Phillip Rodney Ston		ennlicable)	Topublican			₩eel	dy	Amended Weekly
	ude district or circuit number, if a , District 1, Etowah Co		ma			For Monthly Ro	-	
Address						Month in which report is filed.	the	
9741 U.S. Hwy 411						For Weekly Re	•	
City	State	ZIP Code	Telephone Nur			Date of Friday in week in which to		May 16, 2014
Gadsden	Al	35901	256-547-40	JU3 		report is filed. Total Number	. •	
						Pages in Repo		
1 Beginning bala	ance (ending balance	from previous	ous filing)				1	\$967.19
Cash Contribu	tions							
2a Itemized cash	contributions (total fr	om Form 2))	2a		\$0.00		
_~	cash contributions			2b		\$100.00		
2c Total cash con	tributions (add lines 2	2a and 2b)					2c	\$100.00
In-Kind Contri]	
3a Itemized in-kir	nd contributions (total	from Form	3)	3a		\$0.00		
	in-kind contributions			3b				
3c Total in-kind c	ontributions (add line	s 3a and 3b)	3c		\$0.00	J	
Receipts from	Other Sources			ļ			1	
4a Itemized Rece	eipts from Other Source	ces (total fro	om Form 4)			\$0.00		
	Receipts from Other			4b				
4c Total receipts	from other sources (a	add lines 4a	a and 4b)				4c	\$0.00
Expenditures							7	
5a Itemized expe	enditures (total from F	orm 5)		5a		\$260.00	1	
5b Non-itemized				[5b]		\$65.40	+	6005.40
	tures (add lines 5a ar						5c	\$325.40
6 Ending balance	ce (add lines 1, 2c, & 4	c, then subt	tract line 5c)			6	\$741.79
As required by the Ala	bama Fair Campaign Pra	ctices Act. I he	ereby Sw	orn to	and subsc	ribed before me	this/	day of
swear or affirm to the	e best of my knowledge	and belief tha	at the 🖊	M	of th	ne year	14	. My commission expires
attached report(s) a	and the information con that this information is a	tained nereit full and com	n are	<u></u>	day	MAN	Chy	ne year <u>20/8</u>
statement of all conti	ributions, expenditures, a	and other req	quired			1		mch.
information during th	e applicable period of tin	1 e .				heu	D	11/1 /orn
Whele Rod	very stare	5-18	Sig	nature	of Notary Pu	blic	D	m
Signature of Candidate	or Elected Official	Date	ŧ		21	Ler!		1. /// U/N

Print Notary's Name

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 OFFICIAL: Phillip Rodney Stone

\$0.0	HIS PAGE	S T	Š	<u> </u>	밀	II.	TOTAL CASH CONTRIBUTIONS THIS PAGE	FORM REVISED 10.27.2011
				1				
\$0.00								
OF	CONTRIBUTION RECEIVED (mo./day/yr.)	Returned	Other	PAC	Individual	Business or Corporation	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	CONTRIBUTOR (INCLUDE FULL NAME)
TUIONA	7 2 3 1	Š.	SOURCE OF CONTRIBUTION (CHECK ONE)	UCK C	() () () () () () () () () () () () () (OF		
	to be itemized.	Js.	at sc	m th se li	s fro	ution:	When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.	When total contributi

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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: Phillip Rodney Stone 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 this form. Use Forms 2 and 4 for those listings.

\$0.00	TOTAL IN-KIND CONTRIBUTIONS THIS PAGE	IT S	Š	LNBI	TR.	Š	D	₹	Z	ATC	7			FORM REVISED 10.27.2011
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			-											
\$0.00							1		-					
OF	CONTRIBUTION RECEIVED (mo./day/yr.)	Other	PAC	Corporation Individual	Other Business/	Transportation	Rent	Food	Polling Equipment	Consultants/	Administrative Advertising	<u></u>	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	CONTRIBUTOR (INCLUDE FULL NAME)
AMOUNT	DATE		SOURCE (CHECK ONE)	SO (CHE		NOIT	E RISE	X ON	NATURE OF CONTRIBUTION (CHECK ONE)	TURE	Z	· · · · · · · · · · · · · · · · · · ·		

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: Phillip Rodney Stone

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

							FORM REVISED 10.27.2011
\$0.00	M M	S PA(H	S	PT	TOTAL RECEIPTS THIS PAGE	
					-		
\$0.00		_		-			
OF RECEIPT	RECEIVED (mo./day/yr.)	Other	Business	Individual		(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) In Lo DORSING OR GUARANTORS GUARANTORS GUARANTORS FIGURES FULL NAME AND COM- IN LO DORSING OR GUARANTEEING LOAN] GUARANTORS FOR P.O. BOX, INCLUDE FIGURE ADDRESS OF INDIVIDUAL(S) EN- IN LO DORSING OR GUARANTEEING LOAN] FIGURE ADDRESS OF INDIVIDUAL(S) EN- IN LO DORSING OR GUARANTEEING LOAN] FIGURE ADDRESS OF INDIVIDUAL(S) EN- IN LO DORSING OR GUARANTEEING LOAN] FIGURE ADDRESS OF INDIVIDUAL(S) EN- IN LO DORSING OR GUARANTEEING LOAN]	SOURCE OF RECEIPT (INCLUDE FULL NAME)
	DATE		RECEIPT SOURCE (CHECK ONE)	HECT LAID	REC (C	FORM COMPLETE THIS BLOCK IF RECEIPT OF RECEIPT IS A LOAN	
						DO NOT LIST (SOLIT MINE COMMISSION OF THE PARTY OF THE PA	

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: Phillip Rodney Stone



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

\$260.00	PAGE	TOTAL EXPENDITURES THIS PAGE	D.	PE	T.	AT	77	l i	,			FORM REVISED 10.27.2011
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				<u> </u>	<u> </u>							
							_					
\$260.00	05/10/2014								×		Centre, Al 35960	Model Tees
AMOUNT OF EXPENDITURE	DATE OF EXPENDITURE (mo./day/yr.)	OTHER GIVE BRIEF EXPLANATION	Transportation	Repayment Lodging	Loan	Food Fundraising	Charitable Contribution	Consultants/ Polling	Advertising	Administrative	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)
		RE	PURPOSE OF EXPENDITURE (CHECK ONE)	(ONE)	HECK PF III	POSE	PUR					