

# CANDIDATE / ELECTED OFFICIAL ANNUAL REPORT SUMMARY FORM 1A

**FILED**  
**JAN 27 2016**  
**BOBBY M. JUNKINS**  
**JUDGE OF PROBATE**

Please Print in Ink or Type.

Name of Candidate or Elected Official Robert W. Echols, Jr.		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) City Council - District 4			
Address <input type="checkbox"/> Check box if reporting new address 111 Gwindale Road			
City Gadsden	State AL	ZIP Code 35901	Telephone Number 256-442-5829

**Type of Report** (check one)

Annual Report for Year 2015

Termination Report

Amended Annual Report for Year \_\_\_\_\_

**SECTION I - Summary of activity from last filed report through December 31 of reporting year**

<b>1</b>	Beginning balance (ending balance from previous filing)		<b>1</b>	\$208.31
<b>Cash Contributions</b>				
<b>2a</b>	Itemized cash contributions (total from Form 2)	<b>2a</b>	\$0.00	
<b>2b</b>	Non-itemized cash contributions	<b>2b</b>	\$0.00	
<b>2c</b>	Total cash contributions (add lines 2a and 2b)	<b>2c</b>	\$0.00	
<b>In-Kind Contributions</b>				
<b>3a</b>	Itemized in-kind contributions (total from Form 3)	<b>3a</b>	\$0.00	
<b>3b</b>	Non-itemized in-kind contributions	<b>3b</b>	\$0.00	
<b>3c</b>	Total in-kind contributions (add lines 3a and 3b)	<b>3c</b>	\$0.00	
<b>Receipts from Other Sources</b>				
<b>4</b>	Total receipts from other sources (total from Form 4)	<b>4</b>	\$247.37	
<b>Expenditures</b>				
<b>5a</b>	Itemized expenditures (total from Form 5)	<b>5a</b>	\$0.00	
<b>5b</b>	Non-itemized expenditures	<b>5b</b>	\$0.00	
<b>5c</b>	Total expenditures (add lines 5a and 5b)	<b>5c</b>	\$0.00	
<b>6</b>	Ending balance (add lines 1, 2c, & 4, then subtract line 5c)	<b>6</b>	\$455.68	

**SECTION II - Summary of activity for entire reporting year - January 1st through December 31st**

<b>7</b>	Beginning balance (as of January 1 of reporting year)	<b>7</b>	\$208.31
<b>8</b>	Total cash contributions for year	<b>8</b>	\$0.00
<b>9</b>	Total in-kind contributions for year	<b>9</b>	\$0.00
<b>10</b>	Total receipts from other sources for year	<b>10</b>	\$247.37
<b>11</b>	Total expenditures for year	<b>11</b>	\$0.00
<b>12</b>	Ending balance (add lines 7, 8, & 10, then subtract line 11)	<b>12</b>	\$455.68
<b>13</b>	Total campaign debt (total debt owed as of December 31)	<b>13</b>	

Sworn to and subscribed before me this 12<sup>th</sup> day of Jan. of the year 2016. My commission expires the 28<sup>th</sup> day of March of the year 2017.

Iva Nelson  
Signature of Notary Public  
Iva Nelson  
Print Notary's Name

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures, and other required information during the applicable period of time.

Robert W Echols Jr  
Signature of Candidate or Elected Official  
Date

**FORM 2: CONTRIBUTIONS** RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Robert W. Echols, Jr.

The FCPA requires that those contributions greater than \$100 be itemized. **DO NOT LIST** in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
<b>TOTAL CASH CONTRIBUTIONS THIS PAGE</b>							<b>\$0.00</b>	

# FORM 3: IN-KIND CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Robert W. Echols, Jr.

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The FCPA requires that those contributions greater than \$100 be itemized. **DO NOT LIST** cash or loans on this form. Use Forms 2 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)								SOURCE (CHECK ONE)				DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other		
<b>TOTAL IN-KIND CONTRIBUTIONS THIS PAGE</b>														\$0.00	



