



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

MONTHLY & WEEKLY

Candidate & Elected Official
Campaign Finance Report
SUMMARY FORM 1

FILED
AUG 04 2014

BOBBY M. JUNKINS
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Billy Fred Billingsley SR.</i>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <i>CITY COUNCIL DISTRICT #5</i>			
Address <input type="checkbox"/> Check box if reporting new address <i>931 Holly ST.</i>			
City <i>Gadsden</i>	State <i>AL</i>	ZIP Code <i>35901</i>	Telephone Number <i>256 390-8838</i>

Type of Report (check one)

- Monthly Amended Monthly
 Weekly Amended Weekly

For Monthly Reports

Month in which the report is filed.

JULY

For Weekly Reports

Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	<i>0</i>
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	<i>300.00</i>	
2b	Non-itemized cash contributions	2b	<i>90.00</i>	
2c	Total cash contributions (add lines 2a and 2b)	2c	<i>390.00</i>	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	<i>0</i>	
3b	Non-itemized in-kind contributions	3b	<i>0</i>	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<i>0</i>	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<i>841.50</i>	
4b	Non-itemized Receipts from Other Sources	4b	<i>0</i>	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<i>841.50</i>	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	<i>841.50</i>	
5b	Non-itemized expenditures	5b	<i>212.03</i>	
5c	Total expenditures (add lines 5a and 5b)	5c	<i>1053.53</i>	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<i>177.97</i>	

Candidates for State Office: File this report with the Office of the Secretary of State.

Candidates for County or Municipal Office: File this report with the Judge of Probate of the county in which the office is sought.

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.

Billy Fred Billingsley
Signature of Candidate or Elected Official
8-4-14
Date

Sworn to and subscribed before me this *4th* day of *Aug.* of the year *2014*. My commission expires the *18th* day of *April* of the year *2016*.

Karla L. Smith
Signature of Notary Public

Karla L. Smith
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: _____

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.

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		
Maitland Adams	668 Coats Rd. Gadsden		<input checked="" type="checkbox"/>				7-15-14	100
Fred Zackery	South 10th St. Gadsden		<input checked="" type="checkbox"/>				7-22-14	100
Curtis Fail	Marshall St. Gadsden		<input checked="" type="checkbox"/>				7-29-14	100
							TOTAL CASH CONTRIBUTIONS THIS PAGE	300.00



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 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						
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																			



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Billy Fred Billingsley SR.

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

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN [FCRA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)				DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT		
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business			Other	
Billy Fred Billingsley SR.	931 Holly ST		<input checked="" type="checkbox"/>		Billy F. Billingsley SR. 931 Holly ST. Gard. AL		<input checked="" type="checkbox"/>					7-25-14	1841.50
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: Billy Fred Billingsley Sr.

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

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)									DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE	
		Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation			OTHER GIVE BRIEF EXPLANATION
Bush signs	300 MAY ST. MONTGOMERY AL 36104		✓									7-25-14	841.50
											TOTAL EXPENDITURES THIS PAGE	841.50	