

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED

AUG 10 2018

BOBBY M. JUNKINS
JUDGE OF PROBATE

Type of Report (check one)

- Monthly
- Weekly
- Amended Monthly
- Amended Weekly

For Monthly Reports
Month for which the report is filed.

For Weekly Reports
Date of Friday in the week for which the report is filed.

Total Number of Pages in Report

Month for which the report is filed.

Aug 10, 18

6

Please Print in Ink or Type.

Name of Candidate or Elected Official JAMES Christopher Robinson		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) GADSDEN city Council Dist 7			
Address <input type="checkbox"/> Check box if reporting new address 335 Harts Ave			
City GADSDEN	State AL	ZIP Code 35904	Telephone Number 256-393-1657

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	703.40
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	1000.00	
2b	Non-itemized cash contributions	2b	146.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	1245.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	—	
3b	Non-itemized in-kind contributions	3b	—	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	—	
Receipts from Other Sources				
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 and 4b)	4c	—	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	453.12	
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c	453.12	
Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a	—	
6b	Non-itemized expenditures	6b	—	
6c	Total expenditures on credit (add lines 6a and 6b)	6c	—	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	791.88	

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.

Signature of Candidate or Elected Official: [Signature] Date: Aug 10, 18

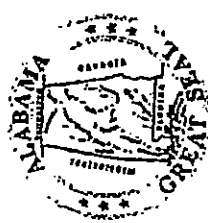
Sworn to and subscribed before me this 10 day of Aug of the year 2018. My commission expires the 24 day of Sept of the year 2020

Signature of Notary Public: Pam Bone
Print Notary's Name: Pam Bone

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: CHRIS ROBINSON



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		
NATHAN AND CAROL SULLIVAN	2601 Hill Top GADSDEN AL 35904		✓					100.00
RAYN AN MISTY KEEL	216 Brown Drive GADSDEN AL 35904		✓					100.00
PIERCE H. WILLIAMS SR.	1425 BELLEVUE DRIVE GADSDEN AL 35904		✓					100.00
MICHAEL ATKINS	309 Locust St GADSDEN AL 35901		✓					200.00
EDDIE AN SARAH ROBINSON	1301 Monte Vista Drive GADSDEN AL 35904		✓					500.00
CASH			✓					99.00
CASH			✓					59.00
CASH			✓					95.00
							TOTAL CASH CONTRIBUTIONS THIS PAGE	1245.00

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: CHRIS ROBINSON

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 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 [FCPA 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			
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: CHRIS ROBERTS

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			
Trinit Up	111 Broad Street Gadsden, AL 35901		<input checked="" type="checkbox"/>										8/6/18	\$315.00
Build a sign.com	11525A Stonehollow Drive Austin, TX 78757-5410		<input checked="" type="checkbox"/>										8/10/18	\$138.12
TOTAL EXPENDITURES THIS PAGE														\$153.12

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

FORM 6: Expenditures On Line of Credit by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: CHRIS ROBINSON



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	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION		
TOTAL EXPENDITURES THIS PAGE													