

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

MAY 03 2016

BOBBY M. JUNKINS
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate or Elected Official LARRY V. PAYNE		Political Party/Ballot Affiliation REPUBLICAN	
Office Sought or Held (include district or circuit number, if applicable) ETOWAH COUNTY COMMISSIONER DIST 3			
Address <input type="checkbox"/> Check box if reporting new address 7100 DUCK SPRINGS RD			
City ATTAULA	State AL	ZIP Code 35954	Telephone Number 256 490 7574

Type of Report (check one)

<input checked="" type="checkbox"/> Monthly	<input type="checkbox"/> Amended Monthly
<input type="checkbox"/> Weekly	<input type="checkbox"/> Amended Weekly

For Monthly Reports
Month in which the report is filed.

APR

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

✓

Total Number of Pages in Report

5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	1160.79
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	0	
2b	Non-itemized cash contributions	2b	0	
2c	Total cash contributions (add lines 2a and 2b)	2c	0	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	0	
3b	Non-itemized in-kind contributions	3b	0	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	0	
4b	Non-itemized Receipts from Other Sources	4b	0	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	0	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	0	
5b	Non-itemized expenditures	5b	50.80	
5c	Total expenditures (add lines 5a and 5b)	5c	50.80	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	1109.99	

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.

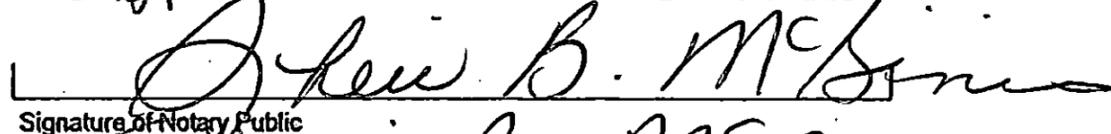
As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures,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


Signature of Candidate or Elected Official

5-3-16
Date

Sworn to and subscribed before me this **3** day of

May of the year **2016**. My commission expires the **28** day of **March** of the year **2018**


Signature of Notary Public

Sheri B. McGinnis
Print Notary's Name



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: LARRY PAYNE

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		
TOTAL CASH CONTRIBUTIONS THIS PAGE								

