

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**  
NOV 04 2013  
BOBBY M. JUNKINS  
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate or Elected Official <b>Michael Head</b>		Political Party/Ballot Affiliation <b>Republican</b>	
Office Sought or Held (include district or circuit number, if applicable) <b>Coroner</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>305 Mistletoe Hollow Road</b>			
City <b>Opelika</b>	State <b>AL</b>	ZIP Code <b>35901</b>	Telephone Number <b>312-3811</b>

Type of Report (check one)

Monthly  Amended Monthly  
 Weekly  Amended Weekly

For Monthly Reports  
Month in which the report is filed. **October**

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 2010.00
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a	950.00
2b	Non-itemized cash contributions	2b	---
2c	Total cash contributions (add lines 2a and 2b)	2c	2960.00
<b>In-Kind Contributions</b>			
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	---
<b>Receipts from Other Sources</b>			
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	---
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a	250.00
5b	Non-itemized expenditures	5b	0
5c	Total expenditures (add lines 5a and 5b)	5c	250.00
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	2710.00

**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.

*Michael Head*  
Signature of Candidate or Elected Official

10/31/13  
Date

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ of the year \_\_\_\_\_. My commission expires the \_\_\_\_\_ of the year \_\_\_\_\_.  
**JOHN S. HEAD II**  
**NOTARY PUBLIC**  
**ALABAMA STATE AT LARGE**  
**MY COMMISSION EXPIRES 4/13/2014**

*[Signature]*  
Signature of Notary Public

*[Signature]*  
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		
RIDHT L.L.C.	1734 Rainbow Dr Gad 35901	X					10/4/13	50 <sup>00</sup>
Aletry Works	P.O. Box 100 Walnut Grove AL 35990		X				10/4/13	50 <sup>00</sup>
Dr. Gordon Isbell III	241 52th St Gad, AL 35901		X				10/4/13	50 <sup>00</sup>
Dr. Andrew Brown	515 S 3rd St Gad AL 35901		X				10/4/13	25 <sup>00</sup>
E. C. Wilson	1419 Reid Circle Glencoe, AL 35903		X				10/5/13	50 <sup>00</sup>
Joyce Parker	P.O. Box 817 Gad, AL 35902		X				10/5/13	25 <sup>00</sup>
Patrick McLeod	101 Norwood Dr. Gad AL 35902		X				10/11/13	100 <sup>00</sup>
Pete Crowe	102 Hartwood Circle RBC AL 35906		X				10/17/13	200 <sup>00</sup>
Craig Imzer	315 S 2nd St Gadsden, AL 35901		X				10/17/13	100 <sup>00</sup>

TOTAL CASH CONTRIBUTIONS THIS PAGE

650<sup>00</sup>

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		Business or Corporation	Individual	PAC	Other	Returned		
Charles Scott	100 Dalehaven Place Gad, AL 35901		<input checked="" type="checkbox"/>				10/17/13	100.00
Dr. Thomas & Valerie Pugliese	2710 Bulkhaven Dr. SS, AL 35907		<input checked="" type="checkbox"/>				10/21/13	100.00
Patricia Sherman	307 Wall St Gad, AL 35904		<input checked="" type="checkbox"/>				10/22/13	50.00
Darden Burre	913 Bellevue Dr. Gad, AL 35904		<input checked="" type="checkbox"/>				10/28/13	25.00
Peggy Clark	510 E Grand Ave RBC, AL 06		<input checked="" type="checkbox"/>				10/29/13	25.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								300.00

Total 950.00

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: \_\_\_\_\_



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	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
Etowah County Republicans Party	54th St Goodwater, AL 35901		X									10/22/13	250.00
<b>TOTAL EXPENDITURES THIS PAGE</b>													250.00