



Statement of Dissolution

FOR ELECTED OFFICIALS, CANDIDATES AND
POLITICAL ACTION COMMITTEES

FILED

MAY 09 2019

SCOTT W. HASSELL
JUDGE OF PROBATE

Please Print in Ink or Type.

Report Status (check one)

- No report required because I have had no activity since the last reporting period
- Termination report attached

Note:

If you have had activity since the last report filed, you are responsible for filing the requisite **Annual Report** covering the last year of activity. However, the submission of a **Termination Report** along with the **Statement of Dissolution** will satisfy this requirement.

Name of Candidate or Elected Official, or Political Committee <i>Robert Louis Hunter</i>			
Office Sought or Held (include district or circuit number, if applicable) <i>Board of Education District 2</i>			
Address <input type="checkbox"/> Check box if reporting new address <i>308 West Lake Drive</i>			
City <i>Galster</i>	State <i>AL</i>	ZIP Code <i>3590</i>	Telephone Number <i>256-691-4104</i>

This statement dissolves the above-named Principal Campaign Committee or Political Action Committee as of the ninth day of May in the year 2019.

Pursuant to §17-5-7(a) [Code of Alabama, 1975], any excess funds shall be disposed of in the following manner:

Donation to the State General Trust Fund in the amount of \$6.04

As required by the Alabama Fair Campaign Practices Act, I hereby swear, or affirm, to the best of my knowledge and belief that this Statement of Dissolution is true and correct.

Robert L. Hunter | 5/9/2019
 Signature of Candidate or Elected Official, or Chairperson or Treasurer of Political Committee | Date



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

ANNUAL

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

FILED

MAY 09 2019

SCOTT W. HASSELL
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate or Elected Official Robert Louis Hunter		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) Board of Education District 2			
Address <input type="checkbox"/> Check box if reporting new address 308 West Lake Drive			
City Gadsden	State AL	ZIP Code 35901	Telephone Number 256-691-4104

Calendar Year covered by this report. **2019**

Amended Annual Report
 Termination Report

Total Pages in Report Include this page in your count. **6**

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

1	Beginning balance (ending balance from previous filing)		1	0
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a		
2b	Non-itemized cash contributions	2b	80.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	80.00	
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	73.96	
5c	Total expenditures (add lines 5a and 5b)	5c	73.96	
Expenditures on Line of Credit				
6a	Itemized expenditures on line of credit (total from Form 6)	6a	0	
6b	Non-itemized expenditures	6b	0	
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c	0	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	6.04	

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

8	Beginning balance (as of January 1 of reporting year)	8	0
9	Total cash contributions for year	9	80.00
10	Total in-kind contributions for year	10	0
11	Total receipts from other sources for year	11	0
12	Total expenditures for year	12	73.96
13	Total expenditures on line of credit for year	13	0
14	Ending balance (add lines 8, 9, & 11, then subtract line 12)	14	6.04
15	Total campaign debt (total debt owed as of December 31)	15	0

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: **Robert Hunter**
Date: **11/8/19**

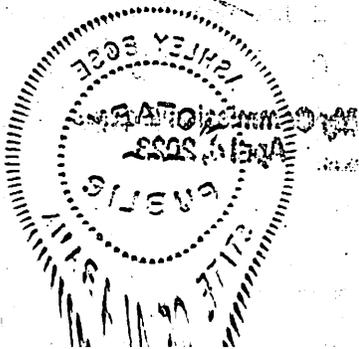
Sworn to and subscribed before me this **9** day of **May** of the year **2019**. My commission expires **April 4, 2023**

Signature of Notary Public: **Ashley Base**
Print Notary's Name: **Ashley Base**

FILED

MAY 12 2016

SCOTT W. HASSELL
JUDGE OF PROBATE





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																	\$0.00	



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Robert Louis Hunter

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	
walmart	6000 58th Ave N 340 E Meighan Blvd. 940518 AL 35401						✓								37.62
office Max	530 George Wallace Dr. 940518 AL 35401		✓												36.34
TOTAL EXPENDITURES THIS PAGE													\$0.00		

