



FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED :

FEB 29 2016

BOBBY M. JUNKINS

| Please Print in Ink or Type. | | Type of Report (| check one) |
|---|---------------------|---|----------------------------------|
| Name of Candidate or Elected Official Political Party/B | allot Affiliation | Month | — A 1 1 3 4 4 L b . |
| Office Sought or Held (include district or circuit number, if applicable) | //CAR | Weekl | · L_ |
| | 42 | For Monthly Re | • |
| Address Check box if reporting new address | | Month in which the report is filed. | ne |
| 801 Bellevue PRIVE | | For Weekly Rep | I |
| City State ZIP Code Telephone Num | | Date of Friday in week in which th report is filed. | |
| Utod8den Al 35 904 256-49 | 8.1424 | Total Number o | |
| | | Pages in Repor | 3 |
| Summary of activity since last filed report | | | |
| 1 Beginning balance (ending balance from previous filing) | | | 1/0/203.99) |
| Cash Contributions | | | |
| 2a Itemized cash contributions (total from Form 2) | 2a . | <i>A</i> | |
| 2b Non-itemized cash contributions | 2b | D | |
| 2c Total cash contributions (add lines 2a and 2b) | : | | 2c |
| In-Kind Contributions | | · | |
| 3a Itemized in-kind contributions (total from Form 3) | 3a -{ | J | |
| 3b Non-itemized in-kind contributions | 3b | 2 | |
| 3c Total in-kind contributions (add lines 3a and 3b) | 3c _4 | 1 | |
| Receipts from Other Sources | | | |
| 4a Itemized Receipts from Other Sources (total from Form 4) | $ a $ l_{ℓ} | 000.00 | |
| 4b Non-itemized Receipts from Other Sources | 4b | 3 | |
| 4c Total receipts from other sources (add lines 4a and 4b) | | | 4c /000,00 |
| Expenditures | | · | |
| 5a Itemized expenditures (total from Form 5) | 5a 8,4 | 1629 | |
| 5b Non-itemized expenditures | 5b | <u> </u> | |
| 5c Total expenditures (add lines 5a and 5b) | (京社) | | 5c 0.476,39 |
| 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) | | | 6 (3,680,38) |
| Candidates for State Office: File this report with the Office of the S | | te. | |
| Candidates for County or Municipal Office: File this report with th | e Judge of Prol | bate of the count | y in which the office is sought. |
| As required by the Alabama Fair Campaign Practices Act, I hereby Swe | orn to and subse | cribed before me | this 2941 day of |
| swear or affirm to the best of my knowledge and belief that the | | | . My commission expires |
| attached report(s) and the information contained herein are true and correct and that this information is a full and complete the | day | of Quene | of the year |
| istatement of all contributions, expenditures, and other required | • | <i>V</i> . | |
| information during the applicable period of time. | deli | ia R.Co | leman |
| | nature of Notary Po | | |
| Signature of Candidate or Elected Official Date | DebRa | 1. COLE | man |
| Pri | nt 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: Lowis H. Fulleh

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NAME OF CANDIDATE OR ELECTED OFFICIAL:

| DC | NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings. SOURCE OF CONTRIBUTION (CHECK ONE) | AMOUNT OF CONTRIBUTION |
|------------------------------------|--|------------------------------|
| CONTRIBUTOR (INCLUDE FULL NAME) | ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) DATE CONTRIBUTION RECEIVED (mo./day/yr.) | |
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| ORM REVISED 10.27.2011 | TOTAL CASH CONTRIBUTIONS THIS PAGE | 0 |

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. SOURCE NATURE OF CONTRIBUTION (CHECK ONE) (CHECK ONE) **AMOUNT** DATE **ADDRESS** CONTRIBUTOR Administrative OF CONTRIBUTION Business/ Corporation (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) CONTRIBUTION **RECEIVED** STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) Rent PAC TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011

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: Lewis H. Fulleh

FORM REVISED 10.27.2011

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. COMPLETE THIS BLOCK IF RECEIPT **FORM** RECEIPT SOURCE IS A LOAN **OF RECEIPT** (CHECK ONE) **AMOUNT** DATE **ADDRESS** SOURCE OF RECEIPT RECEIVED OF (ADDRESS SHOULD INCLUDE **GUARANTORS** (INCLUDE FULL NAME) PAC Individual Business Other STREET OR P.O. BOX, (mo./day/yr.) **RECEIPT** IFCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) Other PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] 2-22-16 (000.00 Lewis H. Fuller 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: Lewis 14. Euler



When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized. **PURPOSE OF EXPENDITURE** (CHECK ONE) PERSON/GROUP/BUSINESS **ADDRESS** DATE OF **AMOUNT** Administrative OTHER (ADDRESS SHOULD INCLUDE Fundraising RECEIVING EXPENDITURE EXPENDITURE OF Advertising STREET OR P.O. BOX, CITY, STATE, AND ZIP) (INCLUDE FULL NAME) GIVE (mo./day/yr.) EXPENDITURE **BRIEF EXPLANATION** In J PASSACIASENTA Hampon DAINE WCKA Free book 2476,39 **TOTAL EXPENDITURES THIS PAGE** FORM REVISED 10.27.2011