

THIS AREA FOR OFFICIAL USE ONLY

FILED

JAN 2 7 2023

SCOTT W. HASSELL JUDGE OF PROBATE

Waiver of Report

FOR CANDIDATES (OPTIONAL FORM)

Please Print in Ink or Type.

Name of Candidate		Political Party/Ballot Affiliation	Тур	e of Report (check one)	ř
AMHOWE C Office Sought (include district or circuit number		DEMOCRAT		Monthly Report Month in which the report is filed.	
Address Check box if reporting new addition	Strict # 1			Weekly Report Date of Friday in the week in which the	
City 7 (11 5)	State ZIP Code	Telephone Number		report is filed.	
ATTALLA	76. 35954	256-312-5652		Annual Report Calendar year covered by this report.	

This form is not for use by principal campaign committees for elected, public officials.

In any reporting period, no campaign finance report is required if the appropriate filing threshold has not been reached by the candidate. The filing thresholds are as follows:

- ▶ \$25,000 candidates for state offices
- ▶ \$10,000 candidates for State Senate
- ▶ \$5,000 candidates for State House of Representatives
- ▶ \$5,000 candidates for district or circuit offices
- ▶ \$1,000 candidates for local offices

I have not reached the filing threshold amount as set forth in the Fair Campaign Practices Act for the office for which I am seeking nomination or election.

This OPTIONAL form gives notice that no contribution or expenditure report will be submitted.

Signature of Carldidate

Date

Date

FORM REVISED 1.10 2012

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Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

JAN 2 7 2023

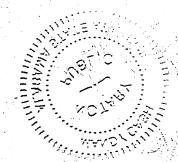
SCOTT W. HASSELL JUDGE OF PROBATE

	Please Print in Ink or Type.				
Nar		al Party/Ballot Affilia		r Year by this report.	2
Offi	ce Sought or Held (include district or circuit number, if applicable)				7072
	COUNCILMAN DISTRICT TID				mended Annual Report
Add	ress Check box if reporting new address				ermination Report
City	State ZIP Code Teleph	none Number		ges in Report his page in	
City			(6S) your cou		
SE	ECTION I - Summary of activity from last filed re	port throug	h December :	31 of repor	ting year
1	Beginning balance (ending balance from previous filing)		in Booomisor	1	4
-	Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a			
2b	Non-itemized cash contributions (total from 7 offin 2)	2b			
75577		20		2c	\$0.00
2c	Total cash contributions (add lines 2a and 2b) In-Kind Contributions			20	70.00
_	Itemized in-kind contributions (total from Form 3)	3a			
3a	Non-itemized in-kind contributions (total from Form 3)	3b			
3b					
3c	Total in-kind contributions (add lines 3a and 3b)	3c	ç	0.00	
	Receipts from Other Sources				
4a	Total itemized receipts from other sources (total from Form 4)				
4b	Total non-itemized receipts from other sources	4b			
4c	Total receipts from other sources (add lines 4a and 4b)			4c	\$0.00
	Expenditures				
5a	Itemized expenditures (total from Form 5)	5a			
5b	Non-itemized expenditures	5b			
5c	Total expenditures (add lines 5a and 5b)			5c	\$0.00
	Expenditures on Line of Credit				
6a	Itemized expenditures on line of credit (total from Form 6)	6a			
6b	Non-itemized expenditures	6b			
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c	S	0.00	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	\$0.00
SI	ECTION II - Summary of activity for entire report	ting year - J	anuary 1st th	rough Dec	ember 31st
8	Beginning balance (as of January 1 of reporting year)			8	
9	Total cash contributions for year			9	
10	Total in-kind contributions for year	10			
11	Total receipts from other sources for year			11	
12	Total expenditures for year			12	
13	Total expenditures on line of credit for year	13			#
14	Ending balance (add lines 8, 9, & 11, then subtract line 12)			14	\$0.00
15	Total campaign debt (total debt owed as of December 31)	15		71	
affin the ii is a f	equired by the Alabama Fair Campaign Practices Act, I hereby swear or in to the best of my knowledge and belief that the attached report(s) and information contained herein are true and correct and that this information ull and complete statement of all contributions, expenditures, and other irred information during the applicable period of time.	Sworn to and su year	bscribed before me thi My commission e		day of day of the day of the day of the day of
Sim	Matuke of Cantinate or Elected Official Date		/ Allan	ay Chim	(3 1 110
Sig	nature or Calindrate or Elected Official Date	Print Notary's N	ame 🗸	/	FORM REVISED 5.24.2017

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SCOTT W. HASSELL JUDGE OF PROBATE



FORM 2: CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL:	ANTHONE CYLAN DISTRICT 7	# 2					PAG	E OF
	greater than \$100 be itemized. DO NOT LIST in-kind contributions or			this	form	n. Us	e Forms 3 and 4 f	or those listings.
		OF	CO	OUR NTRI ECK (BUT	ON		AMOUNT
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation	Individual	PAC	Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
FORM REVISED 10.29.99	TOTAL CASH CON	ITRI	BU	TIO	NS	ТН	IIS PAGE	\$0.00

FORM 3: IN-KIND CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL:	ANTHOM E. C	VIAR	DISTANT # 2	PAGE OF

The FCPA requires that those contributions greater than \$100 be itemized. DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings. **NATURE OF CONTRIBUTION** SOURCE (CHECK ONE) (CHECK ONE) **CONTRIBUTOR ADDRESS** DATE **AMOUNT** Transportation Administrative Advertising Consultants/ Polling Business/ Corporation Individual CONTRIBUTION OF (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE Equipment STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION Food Other Other (mo./day/yr.) \$0.00 **TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 10.29.99**

FORM 4: RECEIPTS FROM OTHER SOURCES LOANS/INTEREST/OTHER SOURCES OF INCOME TO CANDIDATE OR ELECTED OFFICIAL

	ADDRESS		FORM RECI		COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	RI	ECEI (CH	PT S ECK		CE	DATE	AMOUN
SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Interest	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	Lending Institution	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)	OF RECEI
			/									
				-								
REVISED 10.29.99		1	I	<u> </u>	TOTAL REC	L EIP	LS.	THI	S P	L AG	E	\$0.00

ALABAMA FAIR CAMPAIGN PRACTICES ACT

FORM 5: EXPENDITURES

BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTIONS TO OTHER CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES

Comment of the Commen

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The FCPA requires that expenditures over \$100 be itemized. NAME OF CANDIDATE / ELECTED OFFICIAL: PATHONA

				PUR	PURPOSE OF EXPENDITURE (CHECK ONE)	 유 는 한 분	EXPE CONE	ă (URE		
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	evitertainimbA gnisitrevbA	Consultants/ Polling	neitudintneO	Food	Fundraising Loan Repayment	Repayment Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		$\overline{}$									
				:							
								-			
FORM REVISED 10.29.99				9	I	Ä	PE	9	TOTAL EXPENDITURES THIS PAGE	AGE	\$0.00

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

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FORM 6: Expenditures On Line of Credit by candidate or elected official NAME OF CANDIDATE OR ELECTED OFFICIAL: #NTENDING & CINCAL OSTRICE

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized

0.00 EXPENDITURE **AMOUNT** တ EXPENDITURE (mo./day/yr.) DATE OF **TOTAL EXPENDITURES THIS PAGE** GIVE BRIEF EXPLANATION OTHER PURPOSE OF EXPENDITURE (CHECK ONE) Interest Transportation Guigbo. Fundraising poo₄ Contribution guilloq Consultants **gnisihevbA** Administrative (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) ADDRESS PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) FORM REVISED 5.19.2017