

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report IMMARY FORM 1A

FILED

JAN 03 2014

BOBBY M. JUNKINS JUDGE OF PROBATE

Please Print in lnk or Type.			
Name of Candidate or Elected Official F	Political Party/Ballot Affiliation	Calendar Year covered by this report.	
Jerry W. ENTREKIN	Dem.		1-1-13-12-31-15
Office Sought or Held (include district or circuit number, if applicable)]	mended Annual Report
Constable-ETowah County		T	ermination Report
Address		Total Pages in Report	
37 CABOT AVE.		Include this page in	
GAdSden Ah. 35904	Telephone Number 256 547-6678	your count.	
SECTION I - Summary of activity from last file	d report through De	ecember 31 of repor	ting year
1 Beginning balance (ending balance from previous filing)			
Cash Contributions			
2a Itemized cash contributions (total from Form 2)	2a ()	-	
2b Non-itemized cash contributions	2b (C)	425 173 18 80 - 10 10 10 10 10 10 10 10 10 10 10 10 10	
2c Total cash contributions (add lines 2a and 2b)		2c	
In-Kind Contributions			
3a Itemized in-kind contributions (total from Form 3)	3a ()		
3b Non-itemized in-kind contributions	3c 3c		
3c Total in-kind contributions (add lines 3a and 3b)			
Receipts from Other Sources	rm 4) 4a		
4a Total itemized receipts from other sources (total from Fo	4b (2)		
4b Total non-itemized receipts from other sources	2000 A 100 A	4c	
4c Total itemized receipts from other sources (add lines 4a	and 4b)		
Expenditures 5a Itemized expenditures (total from Form 5)	5a O		
	5b O		
5b Non-itemized expenditures 5c Total expenditures (add lines 5a and 5b)		5c	
C. Fading holonog (add lines 1, 2c, & 4c, then subtract line	5c)	6	
SECTION II - Summary of activity for entire re	porting year - Janu	ary 1st through De	cember 31st
7 Beginning balance (as of January 1 of reporting year)			Q
8 Total cash contributions for year		8	
9 Total in-kind contributions for year	9 0		
10 Total receipts from other sources for year		10	
11 Total expenditures for year		11 11 11 11 11 11 11 11	<u> </u>
12 Ending balance (add lines 7, 8, & 10, then subtract line	11)	12	<u> </u>
13 Total campaign debt (total debt owed as of December 3	31) 13 0	3	
As required by the Alabama Fair Campaign Practices Act, I hereby swe affirm to the best of my knowledge and belief that the attached report(s) the information contained herein are true and correct and that this information a full and complete statement of all contributions, expenditures, and required information during the applicable period of time.	year 2014. other the year 2014.	My commission expires the	day of April of the
1 1	Signature of Natary	Public	
AlMelle / Gulieki 11/3/1	4 Stopai	D. Honold	
Signature of Landidate or Elected Official Date	Print Notary's Name		
			FORM REVISED 9.2.20

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: Jerry W FNTrekin



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	> 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	SOURCE OF CONTRIBUTION (CHECK ONE)	
(INCLUDE FULL NAME)	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation Individual PAC Other Returned CONTRIBUTION (mo./day/yr.)	AMOUNT OF CONTRIBUTION
	NONE		
FORM REVISED 9.2.2011	TOTAL CASH CONT	TOTAL CASH CONTRIBUTIONS THIS PAGE	

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

FORM 3: In-Kind Contributions received by candidate or elected officia

NAME OF CANDIDATE OR ELECTED OFFICIAL:



When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source . **DO NOT LIST** cash or loans on this form. Use Forms 2 and 4 for those listings. to be itemized.

	TOTAL IN-KIND CONTRIBUTIONS THIS PAGE	로	NS SN(BU	코	N N	Ü	Ž			AT (ᆏ		FORM REVISED 9.2.2011
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														None	
CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Other	PAC	Individual	Business/ Corporation	Other	Transportation	Rent	Food	Equipment	Consultants/ Polling	Advertising	Administrative	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
	7	⊕	SOURCE (CHECK ONE)	SOL CHEC	<u>~</u>	_	TION	RIBL	NATURE OF CONTRIBUTION (CHECK ONE)	OF ('CHE(URE C	N N		ADDRESS	CONTRIBUTOR

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

FORM 4: Receipts from Other Sources loans, interest, and other sour ces of income

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.

FORM REVISED 9.2.2011 SOURCE OF RECEIPT (INCLUDE FULL NAME) ADDRESS
(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings. OF RECEIPT Interest Loan Other [FCPA REQUIRES FULL NAME AND COM-PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] COMPLETE THIS BLOCK IF RECEIPT **GUARANTORS** IS A LOAN TOTAL RECEIPTS THIS PAGE Lending Institution RECEIPT SOURCE (CHECK ONE) **PAC** Individual **Business** Other (mo./day/yr.) RECEIVED DATE **AMOUNT** RECEIPT

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.

	AGE	I OTAL EXPENDITURES THIS PAGE		N N	×			_				FORM REVISED 9.2.2011
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AMOUNT OF EXPENDITURE	DATE OF EXPENDITURE (mo./day/yr.)	OTHER GIVE BRIEF EXPLANATION	Transportation	Lodging	Loan Repayment	Fundraising	Food	Polling Contribution	Consultants/	Administrative Advertising	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	RECEIVING EXPENDITURE (INCLUDE FULL NAME)
		RE	טדום	ONE)	PURPOSE OF EXPENDITURE (CHECK ONE)	C)	Ř	┨ _	-	-		· · · · ·