Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

FILED

JAN 0 7 2014

BOBBY M. JUNKINS JUDGE OF PROBATE

SUMMARI FURM					
Please Print in Ink or Type Name of Candidate or Elected Official	e. Political Partv	/Ballot Affiliation	Calendar Year		
A •	REP		covered by this r	eport.	1013
LARRY P. KEENUM				F A	
Office Sought or Held (include district or circuit number, if applicable	e,				mended Annual Report
Address Check box if reporting new address				П	ermination Report
Address Creck box in reporting flew address		-1	Total Pages in F	Report	
123 WINDY HILL Rd.			Include this page		
City State ZI	P Code Telephone N	umber	your count.		
123 WINDY HILL Rd. City State ZI RAINBOW CITY, AL. 359	06 26-4	42-4013			
SECTION I - Summary of activity from la				repor	ting year
1 Beginning balance (ending balance from previou				1	0
Cash Contributions					
2a Itemized cash contributions (total from Form 2)		2a			
2b Non-itemized cash contributions		2b			
2c Total cash contributions (add lines 2a and 2b)				2c	0
In-Kind Contributions					
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			
Receipts from Other Sources					
4a Total itemized receipts from other sources (total	from Form 4)	4a			
4b Total non-itemized receipts from other sources		4b			
4c Total itemized receipts from other sources (add	lines 4a and 4b)			4c	
Expenditures					
5a Itemized expenditures (total from Form 5)		5a			
5b Non-itemized expenditures		5b			
5c Total expenditures (add lines 5a and 5b)				5c	<u> </u>
6 Ending balance (add lines 1, 2c, & 4c, then subt	ract line 5c)			6	0
SECTION II - Summary of activity for er	ntire reporting	year - Janua	ary 1st throug	h Dec	cember 31st
7 Beginning balance (as of January 1 of reporting				7	<u> </u>
8 Total cash contributions for year	, , , , , , , , , , , , , , , , , , , ,			8	0
9 Total in-kind contributions for year		9			
				10	0
10 Total receipts from other sources for year 11 Total expenditures for year				11	0
12 Ending balance (add lines 7, 8, & 10, then subt	ract line 11)			12	\mathcal{O}
13 Total campaign debt (total debt owed as of Dec	cember 31)	13			0
As required by the Alabama Fair Campaign Practices Act, I he affirm to the best of my knowledge and belief that the attached the information contained herein are true and correct and that the is a full and complete statement of all contributions, expenditurequired information during the applicable period of time.	ereby swear or Sv d report(s) and his information		ed before me this My commission expires to be the period of the		_day of <u>Jan</u> of the at day of <u>Septo</u> of
,	لِّ	ignature of Notary P			
A 21	5	ignature of Notary P	.A 3/A		
Laur P. Keennen	1-7-20x		an Bone		
Signature of Candidate or Elected Official	Date P	rint 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.

TO NOT I IST in kind contributions or loops on this form. I lea Forms 3 and 4 for those listings.

							FORM REVISED 9.2.2011
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C	CONTRIBUTION RECEIVED (mo./day/yr.)	Returned	Other	PAC	Corporation Individual	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) since state and since state state and since state and since state state and since state and since state and since	CONTRIBUTOR (INCLUDE FULL NAME)
AMOUNT	DATE		SOURCE OF CONTRIBUTION (CHECK ONE)	NTRI	ÇÇ S	0	
		19	10	030	<u>5</u>	DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 ion wide inclinations	DC

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:

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CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Other	PAC	Individual	Business/ Corporation	Other	Transportation	Rent	Food	Equipment	Consultants/ Polling	Advertising	Administrative	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	CONTRIBUTOR (INCLUDE FULL NAME)
AMOUNT	DATE	TE)	SOURCE (CHECK ONE)	SOL CHEC	<u></u>		NOIT	1 ^{IJ} RIBU		OF C	URE	NATI			
	all contributions from that source to be itemized. and 4 for those listings.	ource	nat si	om the	all contributions from the and 4 for those listings	ution	ntrib	ind 4		requires Forms 2	CPA requires Use Forms 2	e FC)0, the I	When total contributions from a single source exceed \$100.00, the FCPA	When total cont

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:

NAME OF CANDIDA IE OR ELECTED OFFICIAL.	nontributions from a single source (ехсеє	d \$1	00.00	ATE OR ELECTED OFFICIAL: When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be item.) that	Sourc	6 6	oe ite	mized.	
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SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	terest	oan	ther	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN-	ending nstitution	PAC	Individual	Business Other	RECEIVED (mo./day/yr.)	OF RECEIPT
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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:



	PAGE	TOTAL EXPENDITURES THIS	END	EXPI	F F	101		•				FORM REVISED 9.2.2011
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OF EXPENDITURE	DATE OF EXPENDITURE (mo./day/yr.)	OTHER GIVE BRIEF EXPLANATION	Transportation	Repayment Lodging	Fundraising Loan	Food	Contribution	Consultants/ Polling	Administrative Advertising	ADDRESS (ADDRESS SHOULD INCLUDE T OR P.O. BOX, CITY, STATE, AND ZIP)	ADDRESS (ADDRESS SHOULD INCLUD STREET OR P.O. BOX, CITY, STATE,	PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)
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	ent be itemized.	res to that recipient	nditui	expei	s all	quire	A rec	FCP	the	e recipient exceed \$100.00, the FCPA requires all expenditures	When total expenditures to a single recipient exceed	When total expe