



FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED
OCT 24 2010

BOBBY M JUNKING

Please Print in Ink or Type.	
Training of Contractor of Life of Contractor o	y/Ballot Affiliation Type of Report (check one)
LARRY V. PAINE REPU	BUCH N Monthly Amended Monthly Weekly Amended Weekly
Office Sought or Held (include district or circuit number, if applicable)	
0.00	For Monthly Reports Month in which the
Address Check box if reporting new address	report is filed.
7100 DUCK SPRINGS RD	For Weekly Reports Date of Friday in the week in which the
City State ZIP Code Telephone	week in which the report is filed.
77/ACLA, NC 51959 200,	Total Number of
	Pages in Report
Summary of activity since last filed report	
1 Beginning balance (ending balance from previous filing)	1 4858.98
Cash Contributions	
2a Itemized cash contributions (total from Form 2)	2a <i>O</i>
2b Non-itemized cash contributions	2b <i>O</i>
2c Total cash contributions (add lines 2a and 2b)	2c O
In-Kind Contributions	
3a Itemized in-kind contributions (total from Form 3)	3a O
3b Non-itemized in-kind contributions	3b Q
3c Total in-kind contributions (add lines 3a and 3b)	3c C
Receipts from Other Sources	
4a Itemized Receipts from Other Sources (total from Form	1) 4a O
4b Non-itemized Receipts from Other Sources	4b 0
4c Total receipts from other sources (add lines 4a and 4b)	4c O
Expenditures	
5a Itemized expenditures (total from Form 5)	5a 1975.38
5b Non-itemized expenditures	5b 23.80
5c Total expenditures (add lines 5a and 5b)	5c 1999, 18
6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5	c) 6 2854,80
Candidates for State Office: File this report with the Office of the	Secretary of State.
Candidates for County or Municipal Office: File this report with	the Judge of Probate of the county in which the office is sought.
	worn to and subscribed before me this day of
swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are	of the year 2016. My commission expires
true and correct and that this information is a full and complete. the	e 22 day of Marchine year 2018
statement of all contributions, expenditures, and other required	De Mchi
information earing the applicable period of time.	The 11 on
Signature of Candidate or Elected Official Date	ignature of Notary Public

Print 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: LARRY J, HAYNS

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemize

	s from a single source exceed \$100.00, the FCPA requires all contri NOT LIST in-kind contributions or loans on this form. Use Forms 3 ar						e to be itemized.	
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS	OF	CO	OURO NTRII ECK (BUTI		DATE	AMOUNT
	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)			Business or Corporation Individual PAC			CONTRIBUTION RECEIVED (mo./day/yr.)	
								\bigcirc
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								74.74
					٠			
FORM REVISED 10.27.2011	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 official



NAME OF CANDIDATE OR ELECTED OFFICIAL: LARRY V, PAYNE

When tota	I contributions from a single source exceed \$100.0 DO NOT LIST cash or loans on thi	00, th s for	ne FC m. L	CPA i Jse F	equi orm	res a s 2 a	all co and 4	ntrib I for	ution thos	s fro e list	m th ings	at so	ource	e to be itemized.	
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)					11101117
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
															8
<u> </u>															
										/					
			-												
			44	 											
M REVISED 10.27,2011	TOTAL IN-KIND CONTRIBUTIONS THIS PAGE														

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: LARRY V, PAYNE



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 SOURCE OF RECEIPT **ADDRESS** (ADDRESS SHOULD INCLUDE **RECEIVED** OF (INCLUDE FULL NAME) **GUARANTORS** Business Other STREET OR P.O. BOX, Individual (mo./day/yr.) RECEIPT Interest [FCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) Loan PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] TOTAL RECEIPTS THIS PAGE FORM REVISED 10.27.2011

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

FORM 5: Expenditures by candidate or elected official





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 Advertising Consultants/ Polling OTHER (ADDRESS SHOULD INCLUDE Charitable Contribution EXPENDITURE **OF** RECEIVING EXPENDITURE Fundraising STREET OR P.O. BOX, CITY, STATE, AND ZIP) GIVE (mo./day/yr.) **EXPENDITURE** (INCLUDE FULL NAME) BRIEF **EXPLANATION** 10950 BUAZ, AL 35986 SNBADGE U. S. Postmaster NON Conpaign Brochue **TOTAL EXPENDITURES THIS PAGE** FORM REVISED 10.27.2011