FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

SUMMARY FORM 1 Please Print in Ink or Type.		Type of Repo	rt (cneck o	one) Amended Monthly
Pour division Page	ti Barket Hill grade	▼ We		Amended Weekly
Office Sought on Huild in stage district or circuit number, if applicable		For Monthly f Month for which	Reports	
		report is filed.		
Address Check box if reporting new address		For Weekly R Date of Friday		
Oity Survey Co.		week for which		
State ZIP Code Telephone N	lumber	report is filed. Total Number	of	
		Pages in Rep		
Summary of activity since last filed report				
1 Beginning balance (ending balance from previous filing)				
Cash Contributions	<u>.</u> ;			
2a Itemized cash contributions (total from Form 2)	2a	11/00 00	7	
2b Non-itemized cash contributions	125	1400.00	1	
2c Total cash contributions (add lines 2a and 2b)	1-3			
In-Kind Contributions			2c	1400.0
3a temized n-kind contributions (total from Form 3	0			
3b Non-itemized in-kind contributions	3a	-	-	
3c Total n-kind contributions add lines 3a and 3b	-l-			
Receipts from Other Sources	,3c	\$0.00		
4a Itemized Receipts from Other Sources (total from Form 4	140			
4b Non-itemized Receipts from Other Sources				
4c Total receipts from other sources (add lines 4a and 4b)	46		,	
Expenditures			4c	\$0.00
5a Itemized expenditures (total from Form 5)	- I	d - 120	1	
5b Non-itemized expenditures	5a	820.82		
5c Total expenditures (add lines 5a and 5b)	5b			
Expenditures on Line of Credit			5c	820.83
6a Itemized expenditures (total from Form 6)				
6b Non-itemized expenditures	6a			
- Thornal and	6b			
- Applications of Gredit (add lines by and bb)	6c	\$0.00		
7 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	579:180
trached report(s) and the information contained herein are the use and correct and that this information is a full and complete tatement of all contributions, expenditures, and other required the dispression during the applicable period of time.	day of the day of the day of Morary Pub	year 2020 of Elynung	M	day of y commission expires

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: RANDALL W. TALLENT

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. SOURCE OF CONTRIBUTION (CHECK ONE) CONTRIBUTOR **ADDRESS** DATE **AMOUNT** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE Susiness or Corporation Individual CONTRIBUTION OF Returned STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION Other (mo./day/yr.) A S DENNIS HARKER 3085 BRIDGE PT. RD. SOUTHSIDE, AL 35907 7/6/2020 \$400.00 \$400.00 TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011

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: RANDALL W. TALLENT

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. NATURE OF CONTRIBUTION SOURCE (CHECK ONE) (CHECK ONE) CONTRIBUTOR **ADDRESS** DATE **AMOUNT** Administrative ransportation (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE Business/ Corporation Individual Advertising CONTRIBUTION OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION Other PAC Other (mo./day/yr.) Rent TOTAL IN-KIND CONTRIBUTIONS THIS PAGE \$0.00 **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: RANDALL W. TALLENT

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.

SOURCE OF RECEIPT	ADDRESS		FOR REC	M EIPT	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	R		IPT S				
(INCLUDE FULL NAME)	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Interest	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
RANDALL W.TALLENT	4725 ROUTON LA SOUTHSIDE, AL. 35907							V			6/26/2020	\$1,000.00
DENNIS HARKER	3085 BRIDGE PT. RD. SOUTHSIDE, AL. 35907							~			7/6/2020	\$400.00
FORM REVISED 10.27.2011					TOTAL RECE	EIP7	rs 1	ГНІ	S P	AG	E	\$1,400.00

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.

					Pl	JRPC	(CH	OF E	XPE ONE	NDITL	RE		
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
TENN VALLEY SIGNS	301 THOMAS FRENCH DR. SCOTTSBORO, AL35769		~									7/8/2020	\$820.82
									-	-			
									-				
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										-			
				-									
					-								
FORM REVISED 10.27.2011					T	OTA	\L I	EXI	PEN	TIDIT	URES THIS I	PAGE	\$820.82

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

FORM 6: Expenditures On Line of Credit by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: RANDALL W. TALLENT



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

				٦	PURPOSE OF EXPENDITURE (CHECK ONE)	SE C	E EX	PEN NE)	E I	RE		
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	evitsteinimbA	Advertising Consultants/	Polling Contribution	Food	Prindraising	6иівро Т	notatroqananT	teerest	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		-										
FORM REVISED 5.19.2017				7	TA	LE	XP	Z	Ĕ	TOTAL EXPENDITURES THIS PAGE	AGE	\$ 0.00