



FILED

JAN 27 2023

SCOTT W. HASSELL
JUDGE OF PROBATE

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

Please Print in Ink or Type.

Name of Candidate or Elected Official ROBERT CROSS		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) CITY COUNCIL - CITY OF ATHALLA DIST. #5			
Address <input type="checkbox"/> Check box if reporting new address 612 4TH ST. N.W.			
City ATHALLA	State ALA	ZIP Code 35954	Telephone Number (256) 538-9986

Calendar Year
covered by this report.

2022

☐ Amended Annual Report
☒ Termination Report

Total Pages in Report
Include this page in
your count.

1

SECTION I - Summary of activity from last filed report through December 31 of reporting year

1	Beginning balance (ending balance from previous filing)		1	0
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	0	
2b	Non-itemized cash contributions	2b	0	
2c	Total cash contributions (add lines 2a and 2b)	2c	0	\$0.00
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		\$0.00
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 receipts from other sources (add lines 4a and 4b)	4c		\$0.00
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	0	
5b	Non-itemized expenditures	5b	0	
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		\$0.00
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7		\$0.00

SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

8	Beginning balance (as of January 1 of reporting year)	8	0
9	Total cash contributions for year	9	0
10	Total in-kind contributions for year	10	0
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	

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures, and other required information during the applicable period of time.

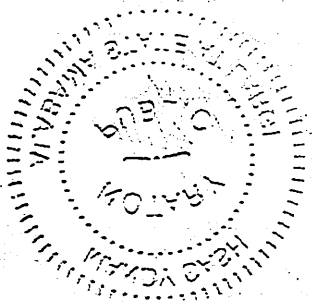
Robert G. Cross **1/27/23**
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this **27** day of **Jan** of the year **2023**. My commission expires the **20** day of **June** of the year **2025**.
Mandy Cash
Signature of Notary Public
Print Notary's Name

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JUDGE OF PROBATE
SCOTT W. HASSELL




NAME OF CANDIDATE / ELECTED OFFICIAL:

PAGE 2 OF 6

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)						DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned			
									
FORM REVISED 10.29.99	TOTAL CASH CONTRIBUTIONS THIS PAGE								\$0.00

FORM 3: IN-KIND CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIALNAME OF CANDIDATE / ELECTED OFFICIAL: ROBERT CROSS PAGE 3 OF 6The 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.

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)				DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other				
																	
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																	\$0.00

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)						DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other				
TOTAL RECEIPTS THIS PAGE													\$0.00	


FORM 5: EXPENDITURES

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

NAME OF CANDIDATE / ELECTED OFFICIAL:

ROBERT CROSSPAGE 5 OF 6

The FCPA requires that expenditures over \$100 be itemized.

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)										DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
													
TOTAL EXPENDITURES THIS PAGE												\$0.00	

NAME OF CANDIDATE OR ELECTED OFFICIAL: Kolant Cross

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)										DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION		
													\$ 0.00
		TOTAL EXPENDITURES THIS PAGE											\$ 0.00