# ANNUAL

# FAIR CAMPAIGN PRACTICES ACT

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

FILED

JAN 08 2016

BOBBY M. JUNKINS JUDGE OF PROBATE

Please Print in Ink or Type.	·	<del></del>
Name of Candidate or Elected Official Political Party/	Ballot Affiliation Calendar Year covered by this	report.
TROIL D. Mc ( AN Kepy	blicave	2015
Office Sought or Held (include district or circuit number, if applicable)	12 Count	Amended Annual Report
1105 5th Storet S.W.7Dorto	7 / Caru y	Termination Report
Address Check box if reporting new address	Total Pages in	Papart -
State ZIP Code Telephone Nu	Total Pages in Include this pag	·
City State ZIP Code Telephone Nu	your count.	
Attalla At. 33954 236-6/3	3-3/5	. Sec. 2
SECTION I - Summary of activity from last filed report	through December 31 of	reporting year
1 Beginning balance (ending balance from previous filing)		1 28,37
Cash Contributions		
2a Itemized cash contributions (total from Form 2)	2a	
2b Non-itemized cash contributions	2b 5 5	
2c Total cash contributions (add lines 2a and 2b)		2c _ D _
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)	<b>在一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>	40 0-
Expenditures		
5a Itemized expenditures (total from Form 5)	5a	
5b Non-itemized expenditures	5b	
5c Total expenditures (add lines 5a and 5b)		5c
6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)		6 01583
SECTION II - Summary of activity for entire reporting	year - January 1st throug	h December 31st
7 Beginning balance (as of January 1 of reporting year)		7 80.
8 Total cash contributions for year		8
9 Total in-kind contributions for year	9	
10 Total receipts from other sources for year - Opus poul Lond	· · · · · · · · · · · · · · · · · · ·	10 3,000
11 Total expenditures for year		11 21881.63
12 Ending balance (add lines 7, 8, & 10, then subtract line 11)		12 1128.77
13 Total campaign debt (total debt owed as of December 31)	13 3,0000	
	orn to and subscribed before me this	day of Tau of the
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 vea	7516	the 24 day of Sept of
the information contained herein are true and correct and that this information	0.01	
is a full and complete statement of all contributions, expenditures, and other the required information during the applicable period of time.		· · · · · · · · · · · · · · · · · · ·
,	Pan Bo	<b>NQ</b> . ,
Sig	gnature of Notary Public	
- 1-8-15		
	Pam Bon	
Signature of Candidate or Elected Official Date Pri	nt 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: TETTY DM " CANON 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) **AMOUNT** DATE ADDRESS CONTRIBUTOR OF CONTRIBUTION (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) Individual Returned CONTRIBUTION RECEIVED STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) 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



When total of	contributions from a single source exceed \$100.0  DO NOT LIST cash or loans on this	0, the	e FC n. U	PA r se F	equi orm:	res a s 2 a	ill co nd 4	ntribu for t	ition: hose	s froi e list	m tha ings.	t soi	urce	to be itemized.	· .
	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)							SOURCE (CHECK ONE)			) .		ABNOLINT	
CONTRIBUTOR (INCLUDE FULL NAME)		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
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- - FORM REVISED 9.2.2011	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: TONY DIME CLAN

FORM REVISED 9.2.2011

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 ADDRESS SOURCE OF RECEIPT **RECEIVED** OF **GUARANTORS** (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) Individual Business Other **RECEIPT** (mo./day/yr.) STREET OR P.O. BOX, [FCPA REQUIRES FULL NAME AND COM-Interest CITY, STATE, AND ZIP) PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] 1105 5th street CW. B1,00000 2.000

TOTAL RECEIPTS THIS PAGE

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

#### FORM 5: Expenditures by candidate or elected official

FORM REVISED 9.2.2011

NAME OF CANDIDATE OR ELECTED OFFICIAL: TOM ON ECLAND



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) **AMOUNT** DATE OF **ADDRESS** PERSON/GROUP/BUSINESS Administrative **OTHER** Advertising Consultants/ Polling OF EXPENDITURE Fundraising (ADDRESS SHOULD INCLUDE RECEIVING EXPENDITURE **EXPENDITURE** (mo./day/yr.) GIVE STREET OR P.O. BOX, CITY, STATE, AND ZIP) Lodging (INCLUDE FULL NAME) **BRIEF** Food **EXPLANATION** DUNIFE 11-3-15 E Town Courty Republicator PATTY 1431 300  $|\chi|$ 11-24-15 Sive AWAe Purchase of Model Tees Adventa Adverting MANNAY Materials Posts FOV SIGAS Meizhan Blud Advertise in Chromis hole TOTAL EXPENDITURES THIS PAGE