



DAILY

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED

AUG 10 2020

Please Print in Ink or Type.

SCOTT W. HASSELL  
JUDGE OF PROBATE

Name of Candidate or Elected Official <b>Charles E. Gilchrist</b>		Political Party/Ballot Affiliation <b>GOP</b>	
Office Sought or Held (include district or circuit number, if applicable) <b>MAYOR</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>413 MARKER AVE.</b>			
City <b>GLUCED E</b>	State <b>AL.</b>	ZIP Code <b>35905</b>	Telephone Number <b>256-312-2582</b>

Date Covered by Report

Amended Daily Report

Total Number of Pages in Report

### Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	<b>620.54</b>
<b>Cash Contributions</b>				
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	<b>500.00</b> <del>\$0.00</del>
<b>In-Kind Contributions</b>				
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		<del>\$0.00</del>
<b>Receipts from Other Sources</b>				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a		
4b	Non-itemized Receipts from Other Sources	4b		
4c	Total receipts from other sources (add lines 4a and 4b)		4c	<del>\$0.00</del>
<b>Expenditures</b>				
5a	Itemized expenditures (total from Form 5)	5a		
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)		5c	<b>575.00</b> <del>\$0.00</del>
<b>Expenditures on Line of Credit</b>				
6a	Itemized expenditures on line of credit (total from Form 6)	6a		
6b	Non-itemized expenditures on line of credit	6b		
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c		<del>\$0.00</del>
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)		7	<b>545.54</b> <del>\$0.00</del>

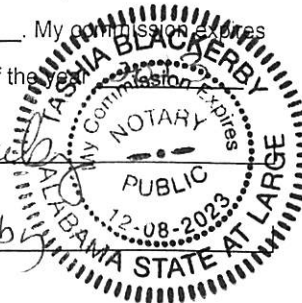
As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures,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

**Charles E. Gilchrist** | **8-10-20**  
Signature of Candidate or Elected Official | Date

Sworn to and subscribed before me this 10 day of August of the year 2020. My commission expires the 8 day of Dec of the year 2021.

**Tashia Blackerby**  
Signature of Notary Public

**Tashia Blackerby**  
Print Notary's Name



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: Charles C. Gilchrist

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient 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		
Lang Graphics		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Signs		300. <sup>00</sup>
Facebook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			125. <sup>00</sup>
David Garner		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			150. <sup>00</sup>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
FORM REVISED 9.2.2011	<b>TOTAL EXPENDITURES THIS PAGE</b>											575. <sup>00</sup>	

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: Charles E. Gilchrist

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.

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			
CHARLES Gilchrist	413 MARKET AVE. GLENCOE AL. 35905							8-8-20	500.00
								<b>TOTAL CASH CONTRIBUTIONS THIS PAGE</b>	
								500.00	

FORM REVISED 9.2.2011



# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Principal Campaign Committee			
Full Name of Candidate			Political Party
Office Sought (include district or circuit number, if applicable)			
Address			
City	State	ZIP Code	Telephone Number

Amended Major Contribution Report

Date of this Report

### Summary of Major Contribution Activity

1	Beginning balance (ending balance from previous filing)		1	
2	Total Cash Contributions (total from Form 2)		2	
3	Total In-Kind Contributions (total from Form 3)		3	
4	Total Receipts from Other Sources (total from Form 4)		4	
5	Ending balance (add lines 1, 2, 3 and 4)		5	

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.

Sworn to and subscribed before me this \_\_\_\_\_ day  
of \_\_\_\_\_ of the year \_\_\_\_\_. My commission  
expires the \_\_\_\_\_ day of \_\_\_\_\_ of the year  
\_\_\_\_\_.

\_\_\_\_\_  
Signature of Candidate, Elected Official or Committee Member      Date

\_\_\_\_\_  
Signature of Notary Public

FORM REVISED 01.02.2018

\_\_\_\_\_  
Print Notary's Name

### Where to file this form ...

► **State Candidates and Elected Officials:** File this report electronically with the Office of the Secretary of State:  
<http://fcpa.alabamavotes.gov>

Do you have questions or need assistance? Contact the Elections Division:

Call us: 334-242-7210  
800-274-8683

Visit our office:  
Elections Division  
600 Dexter Avenue, Room E-210  
Montgomery, Alabama 36130

Write to us:  
Elections Division  
P.O. Box 5616  
Montgomery, Alabama 36103-5616