

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

**FILED**  
MAY 12 2014  
BOBBY M. JUNKINS  
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate or Elected Official <b>Deborah Dixon</b>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <b>Attalla City Board of Education District 2</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>1208 Old Boaz Rd</b>			
City <b>Attalla</b>	State <b>AL</b>	ZIP Code <b>35954</b>	Telephone Number <b>256-504-0331</b>

Type of Report (check one)

- Monthly  Amended Monthly  
 Weekly  Amended Weekly

For Monthly Reports  
Month in which the report is filed.

For Weekly Reports  
Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

<b>5-9-14</b>

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		1 <b>0</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>0</b>
<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	
<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	<b>0</b>
<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	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<b>0</b>

Candidates for State Office \_\_\_\_\_  
 Candidates for County or Municipal Office \_\_\_\_\_

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.

*Deborah Dixon* 5-12-14  
 Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this 12th day of May of the year 2014. My commission expires the 7th day of March of the year 2017.

*Charles Cunningham*  
 Signature of Notary Public

Charles Cunningham  
 Print Notary's Name







