

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

JUL 08 2022

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

SCOTT W. HASSELL
JUDGE OF PROBATE

Type of Report (check one)

- Monthly Amended Monthly
 Weekly Amended Weekly

For Monthly Reports
Month for which the report is filed.

July

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

Total Number of Pages in Report

6

Please Print in Ink or Type.

Name of Candidate or Elected Official JAMES CHRISTOPHER ROBINSON		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) GADSDEN CITY COUNCIL DIST 7			
Address <input type="checkbox"/> Check box if reporting new address 335 HANTS AVE			
City GADSDEN	State AL	ZIP Code 35904	Telephone Number 256-393-1657

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		1 191.13
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a 1400.00	
2b	Non-itemized cash contributions	2b —	
2c	Total cash contributions (add lines 2a and 2b)		2c 1591.13
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	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 —
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a 50.00	
5b	Non-itemized expenditures	5b —	
5c	Total expenditures (add lines 5a and 5b)		5c —
Expenditures on Line of Credit			
6a	Itemized expenditures (total from Form 6)	6a —	
6b	Non-itemized expenditures	6b —	
6c	Total expenditures on credit (add lines 6a and 6b)	6c —	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)		7 1541.13

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.

Chris Robinson
Signature of Candidate or Elected Official
Date **7-8-22**

Sworn to and subscribed before me this 8th day of July of the year 2022. My commission expires the 7th day of April of the year 2025.

Janetta Gunter
Signature of Notary Public
Print Notary's Name Janetta Gunter

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JUDGE OF PROBATE
SCOTT W. HARRILL

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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: CHRIS ROBINSON

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		
Michele Atkins	329 LOCUST STREET GADSDEN, AL 35901		<input checked="" type="checkbox"/>				07/01/22	300.00
Blackstone Paper	525 BROAD STREET GADSDEN AL 35901	<input checked="" type="checkbox"/>					07/07/22	1000.00
Cony O'BRIEN	111 ATHENA STREET GADSDEN, AL 35904		<input checked="" type="checkbox"/>				07/01/22	100.00
							TOTAL CASH CONTRIBUTIONS THIS PAGE	1400.00

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: CHAD RUPINSON



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	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION			
City of Gadsden	90 Beard Street GADSDEN AL 35901	<input checked="" type="checkbox"/>											06/21/12	50.00
TOTAL EXPENDITURES THIS PAGE													50.00	

