

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED

NOV 07 2016

BOBBY M. JENNINS
JUDGE OF PROBATE

Please Print in Ink or Type.

Type of Report (check one)

- Monthly
- Amended Monthly
- Weekly
- Amended Weekly

For Monthly Reports
Month in which the report is filed.

11/4/2016

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

11/4/2016

Total Number of Pages in Report

5

Name of Candidate or Elected Official LARRY V. PAYNE		Political Party/Ballot Affiliation REPUBLICAN	
Office Sought or Held (include district or circuit number, if applicable) ETOWAH COUNTY COMMISSIONER DIST 3			
Address <input type="checkbox"/> Check box if reporting new address 700 OULK SPGS. RD			
City ATLANTA	State AL	ZIP Code 35954	Telephone Number 256.410.7574

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	1359.80
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	150.00	
2b	Non-itemized cash contributions	2b	0	150.00
2c	Total cash contributions (add lines 2a and 2b)	2c		84.50
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	0	
3b	Non-itemized in-kind contributions	3b	0	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	0	
4b	Non-itemized Receipts from Other Sources	4b	0	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	0	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	250.00	
5b	Non-itemized expenditures	5b	47.00	
5c	Total expenditures (add lines 5a and 5b)	5c		297.00
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6		1212.80

Candidates for State Office: File this report with the Office of the Secretary of State.
Candidates for County or Municipal Office: File this report with the Judge of Probate of the county in which the office is sought.

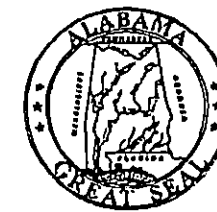
As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures,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

Signature of Candidate or Elected Official: *[Signature]* Date: **11/4/2016**

Sworn to and subscribed before me this 7th day of November of the year 2016. My commission expires the 1st day of June of the year 2019.

Signature of Notary Public: *[Signature]*

Print Notary's Name: **Debra L. Coleman**



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: LARRY V. PAYNE

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		
CRAIG DWZBT	143 FAIROAKS CIRCLE GARSDEN, AL 35901		X				11/11/2016	150.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								150.00



FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: LARRY V. PAYNE

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 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	



FORM 4: Receipts from Other Sources loans, interest, and other sources of income

NAME OF CANDIDATE OR ELECTED OFFICIAL: LARRY V. PAVO

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.

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	



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: LARRY V. PRYOR

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				
U.S POSTMASTER	700 CHESTNUT ST GADSDEN AL 35901	X											STAMPS FOR CAMPAIGN	10/31/2016	47.00
CHAD KILGORE	6061 COLONIAL PWKY APT 5304 GULFSTREAMS AL 36542		X										AD FOR FACEBOOK	11/1/2016	250.00
TOTAL EXPENDITURES THIS PAGE															297.00