

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED
NOV 03 2014
BOBBY M. JUNKINS
JUDGE OF PROBATE

Please Print in Ink or Type

Name of Candidate or Official Michael Head		Political Party/Ballot Affiliation Republican	
County or District (include district or circuit number, if applicable) Etowah County Coroner			
Address (check box if reporting new address) 305 Misthete Hollow Rd			
City Gadsden	State AL	ZIP Code 35901	Telephone Number 256-312-3811

Type of Report (check one)

- Monthly
 Weekly
 Amended Monthly
 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.

Oct 31, 2014

Total Number of Pages in Report

1

1	Starting Balance (opening balance from previous filing)			2512.80
2. Contributions				
2a	Itemized contributions (total from Form 2)		0	
2b	Non-itemized contributions		0	
2c	Total contributions (add lines 2a and 2b)		0	
3. Receipts from Other Sources				
3a	Itemized receipts from other sources (total from Form 3)		0	
3b	Non-itemized receipts from other sources		0	
3c	Total receipts from other sources (add lines 3a and 3b)		0	
4. Receipts from Other Sources				
4a	Itemized receipts from other sources (total from Form 4)		0	
4b	Non-itemized receipts from other sources		0	
4c	Total receipts from other sources (add lines 4a and 4b)		0	
Expenditures				
5a	Itemized expenditures (total from Form 5)		0	
5b	Non-itemized expenditures		0	
5c	Total expenditures (add lines 5a and 5b)		0	
6	Net balance (add lines 1, 2, & 4c, then subtract line 5c)			2512.80

I, the undersigned, hereby certify that the information contained herein is a full and complete report of my campaign activities, and other required information, for the period of time...

Signature of Candidate or Elected Official: **Michael Head**
Date: **11/03/14**

Sworn to and subscribed before me this **3rd** day of **November** of the year **2014**. My commission expires the **6th** day of **February** of the year **2018**.

Signature of Notary Public: **Sonya Turner Johnson**
Print Notary's Name: **Sonya Turner Johnson**