



FILED

JUL 05 2022

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

SCOTT W. HASSELL
JUDGE OF PROBATE

Type of Report (check one)

- Monthly
- Weekly

- Amended Monthly
- Amended Weekly

For Monthly Reports
Month for which the report is filed.

JUNE-22

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 Robert Avery		Political Party/Ballot Affiliation NONPARTISAN	
Office Sought or Held (include district or circuit number, if applicable) MAYOR			
Address <input type="checkbox"/> Check box if reporting new address 710 Crestview Dr.			
City Gadsden	State AL	ZIP Code 35901	Telephone Number (256) 393-2860

Summary of activity since last filed report

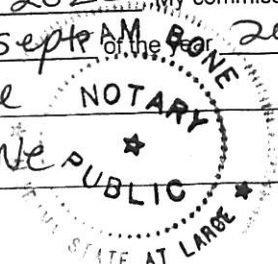
1	Beginning balance (ending balance from previous filing)		1	1,306.61
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a		\$1,675
2b	Non-itemized cash contributions	2b		0
2c	Total cash contributions (add lines 2a and 2b)	2c		\$1,675.00
In-Kind Contributions				
3a	Itemized in-kind 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		\$2,455.00
5b	Non-itemized expenditures	5b		0
5c	Total expenditures (add lines 5a and 5b)	5c		\$2,455.00
Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a		0
6b	Non-itemized expenditures	6b		0
6c	Total expenditures on credit (add lines 6a and 6b)	6c		0
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7		\$526.61

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: **Robert Avery**
Date: **7-5-22**

Sworn to and subscribed before me this 5 day of July of the year 2022. My commission expires the 24 day of September of the year 2024.

Signature of Notary Public: **Pam Bone**
Print Notary's Name: **Pam Bone**



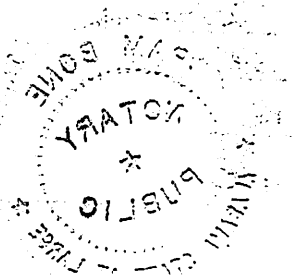
FILED

APR 28 1958

SCOTT W. HASSLELL
JUDGE OF PROBATE

CONFIDENTIAL

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FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: _____

When total contributions from a single source exceed \$100.00, the FCRA 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		
The Rouse Group Inc.	1825 WALLACE DR ATLANTA GA. 30331	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6-1-22	\$1,000.00
MISCELLANEOUS	— Less than \$100 donations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6-30-22	\$ 675.00
TOTAL CASH CONTRIBUTIONS THIS PAGE							\$ 1,675.00



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Robert Avery

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		
N/A															
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE															



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: _____

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 SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	IF CPA 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														



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Robert Avery

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			
TAM Properties	P.O. Box 2111 Gadsden, AL. 35902	<input checked="" type="checkbox"/>										Rent	6-16-22	\$ 1,000 ⁰⁰
The Reporter	P.O. Box 1962 Gadsden, AL. 35962		<input checked="" type="checkbox"/>									Ad	6-16-22	\$ 400 ⁰⁰
Tint Diva			<input checked="" type="checkbox"/>									Ad	6-1-22	\$ 200 ⁰⁰
Gadsden water works	515 Albert Rains Blvd Gadsden, AL. 35901	<input checked="" type="checkbox"/>										Utilities	6-28-22	\$ 30 ⁰⁰
McQuick Printing	616 Perry St. Montgomery, AL. 36104	<input checked="" type="checkbox"/>										Ad	6-16-22	\$ 825 ⁰⁰
TOTAL EXPENDITURES THIS PAGE													\$ 2,455 ⁰⁰	



FORM 6: Expenditures On Line of Credit by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Robert Avery

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	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION		
TOTAL EXPENDITURES THIS PAGE													