



# Candidate & Elected Official

## Campaign Finance Report

### SUMMARY FORM 1

**RECEIVED**

JUL 12 2012

 James W. Fuhrmeister  
 Judge of Probate

Please Print in Ink or Type.

|                                                                                                            |                    |                                                  |                                       |
|------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------|---------------------------------------|
| Name of Candidate or Elected Official<br><b>Paul Gregory Eddins</b>                                        |                    | Political Party/Ballot Affiliation<br><b>N/A</b> |                                       |
| Office Sought or Held (include district or circuit number, if applicable)<br><b>Mayor "City of Helena"</b> |                    |                                                  |                                       |
| Address <input type="checkbox"/> Check box if reporting new address<br><b>3011 Longleaf Lane</b>           |                    |                                                  |                                       |
| City<br><b>Helena</b>                                                                                      | State<br><b>AL</b> | ZIP Code<br><b>35080</b>                         | Telephone Number<br><b>[REDACTED]</b> |

## 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.

 Total Number of  
 Pages in Report

**7-13-12**
**5**

## Summary of activity since last filed report

|                                    |                                                               |    |                          |                |
|------------------------------------|---------------------------------------------------------------|----|--------------------------|----------------|
| 1                                  | Beginning balance (ending balance from previous filing)       |    | 1                        | <b>2025.02</b> |
| <b>Cash Contributions</b>          |                                                               |    |                          |                |
| 2a                                 | Itemized cash contributions (total from Form 2)               | 2a | <b>160.<sup>00</sup></b> |                |
| 2b                                 | Non-itemized cash contributions                               | 2b | <b>0</b>                 |                |
| 2c                                 | Total cash contributions (add lines 2a and 2b)                | 2c | <b>160.<sup>00</sup></b> |                |
| <b>In-Kind Contributions</b>       |                                                               |    |                          |                |
| 3a                                 | Itemized in-kind contributions (total from Form 3)            | 3a | <b>0</b>                 |                |
| 3b                                 | Non-itemized in-kind contributions                            | 3b | <b>0</b>                 |                |
| 3c                                 | Total in-kind contributions (add lines 3a and 3b)             | 3c | <b>0</b>                 |                |
| <b>Receipts from Other Sources</b> |                                                               |    |                          |                |
| 4a                                 | Itemized Receipts from Other Sources (total from Form 4)      | 4a | <b>0</b>                 |                |
| 4b                                 | Non-itemized Receipts from Other Sources                      | 4b | <b>0</b>                 |                |
| 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 | <b>1108.41</b>           |                |
| 5b                                 | Non-itemized expenditures                                     | 5b | <b>0</b>                 |                |
| 5c                                 | Total expenditures (add lines 5a and 5b)                      | 5c | <b>1108.41</b>           |                |
| 6                                  | Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) | 6  | <b>1076.61</b>           |                |

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.

**Paul Gregory Eddins**  
 Signature of Candidate or Elected Official

**7-11-12**  
 Date

 Sworn to and subscribed before me this 11 day of July of the year 2012. My commission expires the 5 day of April of the year 2012.

**Jeralyn C. Chastain**  
 Signature of Notary Public

**Jeralyn C. Chastain**  
 Print Notary's Name

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: \_\_\_\_\_

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<br>(INCLUDE FULL NAME)       | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | SOURCE<br>OF CONTRIBUTION<br>(CHECK ONE) |                                     |     |       | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |                    |
|------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------|-------------------------------------|-----|-------|---------------------------------------------------|------------------------------|--------------------|
|                                          |                                                                                 | Business or<br>Corporation               | Individual                          | PAC | Other |                                                   |                              | Returned           |
| Clayton Bailey<br>Victory Automotive LLC | 1150 George Roy Parkway<br>Calera AL 35040                                      | <input checked="" type="checkbox"/>      |                                     |     |       |                                                   | 7-7-12                       | 125. <sup>00</sup> |
| James Kossinger                          | 2200 OLD CAMARSA PLACE<br>Helena AL 35080                                       |                                          | <input checked="" type="checkbox"/> |     |       |                                                   | 7-3-12                       | 35. <sup>00</sup>  |
|                                          |                                                                                 |                                          |                                     |     |       |                                                   |                              |                    |
|                                          |                                                                                 |                                          |                                     |     |       |                                                   |                              |                    |
|                                          |                                                                                 |                                          |                                     |     |       |                                                   |                              |                    |
|                                          |                                                                                 |                                          |                                     |     |       |                                                   |                              |                    |
|                                          |                                                                                 |                                          |                                     |     |       |                                                   |                              |                    |
|                                          |                                                                                 |                                          |                                     |     |       |                                                   |                              |                    |
|                                          |                                                                                 |                                          |                                     |     |       |                                                   |                              |                    |
|                                          |                                                                                 |                                          |                                     |     |       |                                                   |                              |                    |
| TOTAL CASH CONTRIBUTIONS THIS PAGE       |                                                                                 |                                          |                                     |     |       |                                                   | 160. <sup>00</sup>           |                    |

Paul Gregory Eddins

**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.**

20120713000250150 3/5 \$.00  
Shelby Cnty Judge of Probate, AL  
07/13/2012 10:00:15 AM FILED/CERT



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: Paul Gregory Eddins

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

| PERSON/GROUP/BUSINESS<br>RECEIVING EXPENDITURE<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PURPOSE OF EXPENDITURE<br>(CHECK ONE) |             |                         |              |      |             |      |           |         |                | DATE OF<br>EXPENDITURE<br>(mo./day/yr.) | AMOUNT<br>OF<br>EXPENDITURE |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|--------------|------|-------------|------|-----------|---------|----------------|-----------------------------------------|-----------------------------|
|                                                                       |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Contribution | Food | Fundraising | Loan | Repayment | Lodging | Transportation |                                         |                             |
| Helen Postoffice                                                      | Helen AL 35080                                                                  | ✓                                     |             |                         |              |      |             |      |           |         | Postage        | 7-3-12                                  | \$ 17.86                    |
| City of Helen                                                         | P.O. Box 613<br>Helen AL 35080                                                  | ✓                                     |             |                         |              |      |             |      |           |         | Qual. fee      | 7-3-12                                  | \$ 50.00                    |
| City of Helen                                                         | P.O. Box 613<br>Helen AL 35080                                                  | ✓                                     |             |                         |              |      |             |      |           |         |                | 7-10-12                                 | \$ 695.00                   |
| Enterprise Bank                                                       | 1129 1st St. N<br>Huntsville AL 35007                                           |                                       |             |                         |              |      |             |      |           | ✓       |                | 7-10-12                                 | \$ 345.55                   |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                |                                         |                             |
| TOTAL EXPENDITURES THIS PAGE                                          |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                | 1108.41                                 |                             |