



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

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JAN 25 2013

James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official Bobby Joe Phillips		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) CITY COUNCIL			
Address ☐ Check box if reporting new address			
City CALERA	State AL	ZIP Code 35040	Telephone Number 205-668-0842

Calendar Year
covered by this report.**2012**☐ Amended Annual Report☐ Termination ReportTotal Pages in Report
Include this page in
your count.**5**

SECTION I - Summary of activity from last filed report through December 31 of reporting year

1	Beginning balance (ending balance from previous filing)		1	0
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a		
2b	Non-itemized cash contributions	2b		
2c	Total cash contributions (add lines 2a and 2b)	2c		0
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	Total itemized receipts from other sources (total from Form 4)	4a		
4b	Total non-itemized receipts from other sources	4b		
4c	Total itemized receipts from other sources (add lines 4a and 4b)	4c		0
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	744.00	
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c		744.00
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6		

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SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

7	Beginning balance (as of January 1 of reporting year)	7	0
8	Total cash contributions for year	8	0
9	Total in-kind contributions for year	9	0
10	Total receipts from other sources for year	10	0
11	Total expenditures for year	11	744.00
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)	12	0
13	Total campaign debt (total debt owed as of December 31)	13	0

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.

Sworn to and subscribed before me this **25th** day of **January** of the year **2013**. My commission expires the **29th** day of **April** of the year **2014**.

Bobby Phillips
Signature of Candidate or Elected Official
1-25-13
Date

Melody H. Winslett
Signature of Notary Public
Melody H. Winslett
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 (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		
		TOTAL CASH CONTRIBUTIONS THIS PAGE						0



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FORM REVISED 9.2.2011

The seal of the Georgia Institute of Technology is a circular emblem. It features a central shield with a landscape depicting a river, a bridge, and a building. The word "GEORGIA" is inscribed above the shield, and "INSTITUTION" is below it. The outer ring of the seal contains the text "THE GEORGIA INSTITUTE OF TECHNOLOGY" and is decorated with stars.

NAME OF CANDIDATE OR ELECTED OFFICIAL:

[illegible]



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: _____

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	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION			
HOME PRINTING CO	4141 CUNTY RD 45 CLANTON												7-19-12	159. ⁰⁰
23 designs	340 HWY 31 CALENA												7-20-12	585. ⁰⁰
TOTAL EXPENDITURES THIS PAGE													744. ⁰⁰	

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