



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

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Please Print in Ink or Type.

Name of Candidate or Elected Official Ouida L. Mayfield		Political Party/Ballot Affiliation Republican	
Office Sought or Held (include district or circuit number, if applicable) 5th District Council of Columbiana			
Address ☐ Check box if reporting new address 308 Old Hwy. 25 East			
City Columbiana	State Al.	ZIP Code 35051	Telephone Number 205-669-7813

Calendar Year
covered by this report.

2015☐ Amended Annual Report☐ Termination Report

Total Pages in Report
Include this page in
your count.

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

1	Beginning balance (ending balance from previous filing)		1	.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	.00	
2b	Non-itemized cash contributions	2b	.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	.00	
3b	Non-itemized in-kind contributions	3b	.00	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	.00	
Receipts from Other Sources				
4a	Total itemized receipts from other sources (total from Form 4)	4a	.00	
4b	Total non-itemized receipts from other sources	4b	.00	
4c	Total itemized receipts from other sources (add lines 4a and 4b)	4c	.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	.00	
5b	Non-itemized expenditures	5b	.00	
5c	Total expenditures (add lines 5a and 5b)	5c	.00	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	.00	

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	.00
8	Total cash contributions for year	8	.00
9	Total in-kind contributions for year	9	.00
10	Total receipts from other sources for year	10	.00
11	Total expenditures for year	11	.00
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)	12	.00
13	Total campaign debt (total debt owed as of December 31)	13	.00

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 **28th** day of **Jan** of the year **2016**. My commission expires the **14th** day of **May** of the year **2016**.

Frances W. Sammons
Signature of Notary Public

Frances W. Sammons
Print Notary's Name

Ouida L. Mayfield
Signature of Candidate or Elected Official

1-28-16
Date