

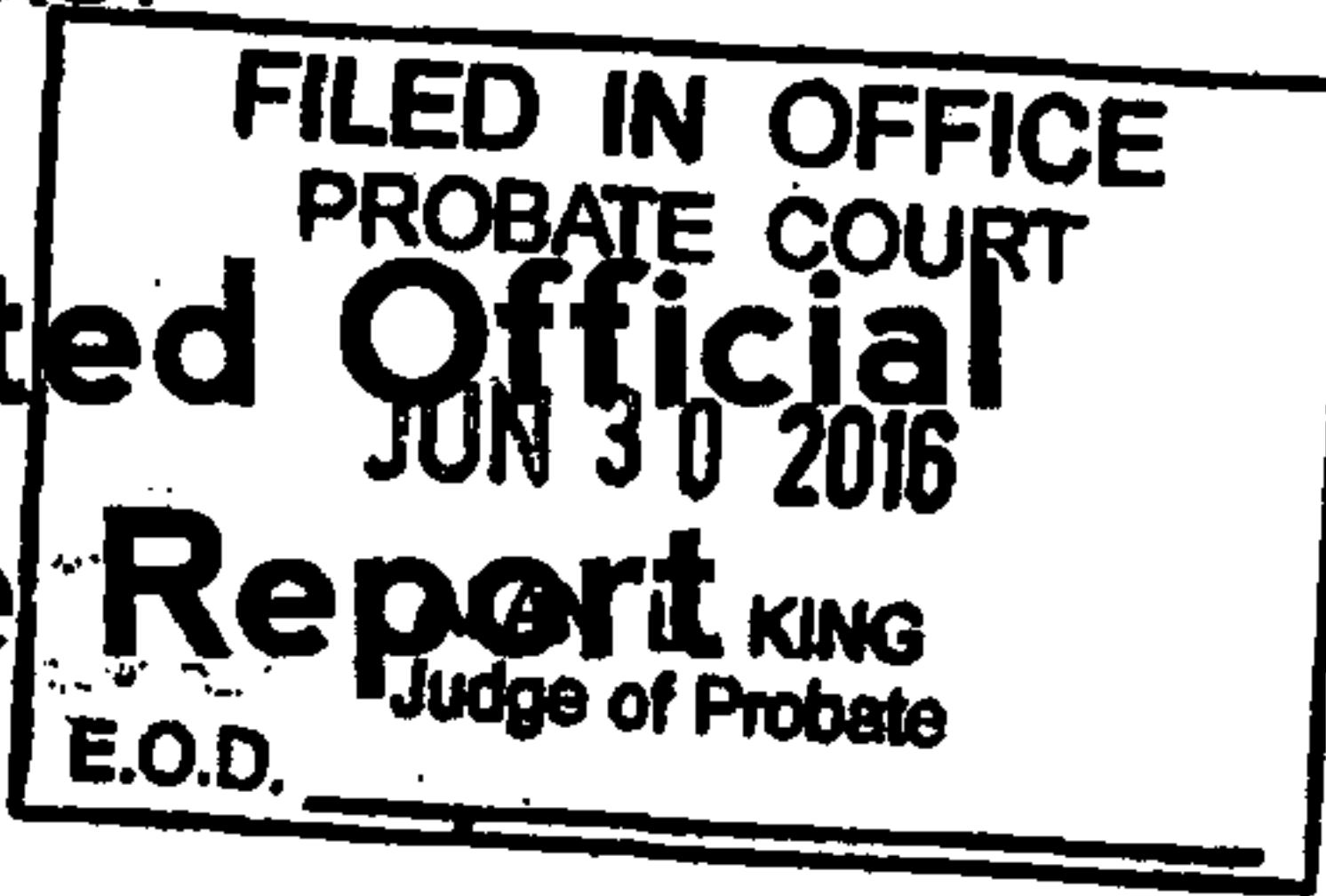
Print Form

MONTHLY & WEEKLY

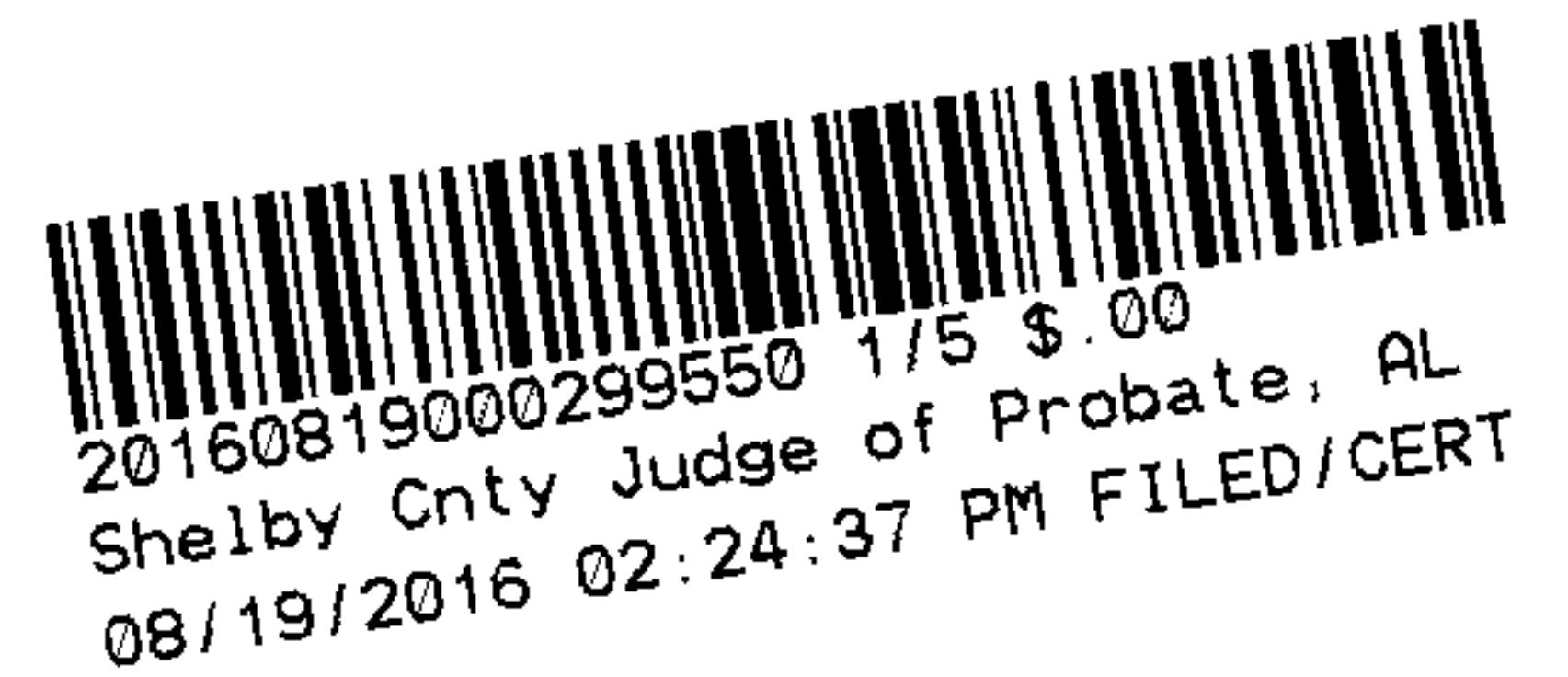


FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



THIS AREA FOR OFFICIAL USE ONLY



Please Print in Ink or Type.

Name of Candidate or Elected Official Robert S. Elliott		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) Vestavia Hills City Council Seat #4			
Address ☒ Check box if reporting new address P.O. Box 43273			
City Vestavia Hills, AL	State AL	ZIP Code 35243	Telephone Number

Type of Report (check one)

- ☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

For Monthly Reports
Month in which the report is filed.

June 2016

For Weekly Reports
Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	0
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	1,300.00	
2b	Non-itemized cash contributions	2b	0.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	1,300.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	0.00	
3b	Non-itemized in-kind contributions	3b	0.00	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0.00	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	0.00	
4b	Non-itemized Receipts from Other Sources	4b	0.00	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	0.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	409.16	
5b	Non-itemized expenditures	5b	122.74	
5c	Total expenditures (add lines 5a and 5b)	5c	532.26	
6	Ending balance (add lines 1, 2c, & 4c then subtract line 5c)	6	767.74	

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.

Signature of Candidate or Elected Official

6/30/2016
Date

Sworn to and subscribed before me this **30th** day of **June** of the year **2016**. My commission expires the **30** day of **June** of the year **2016**.

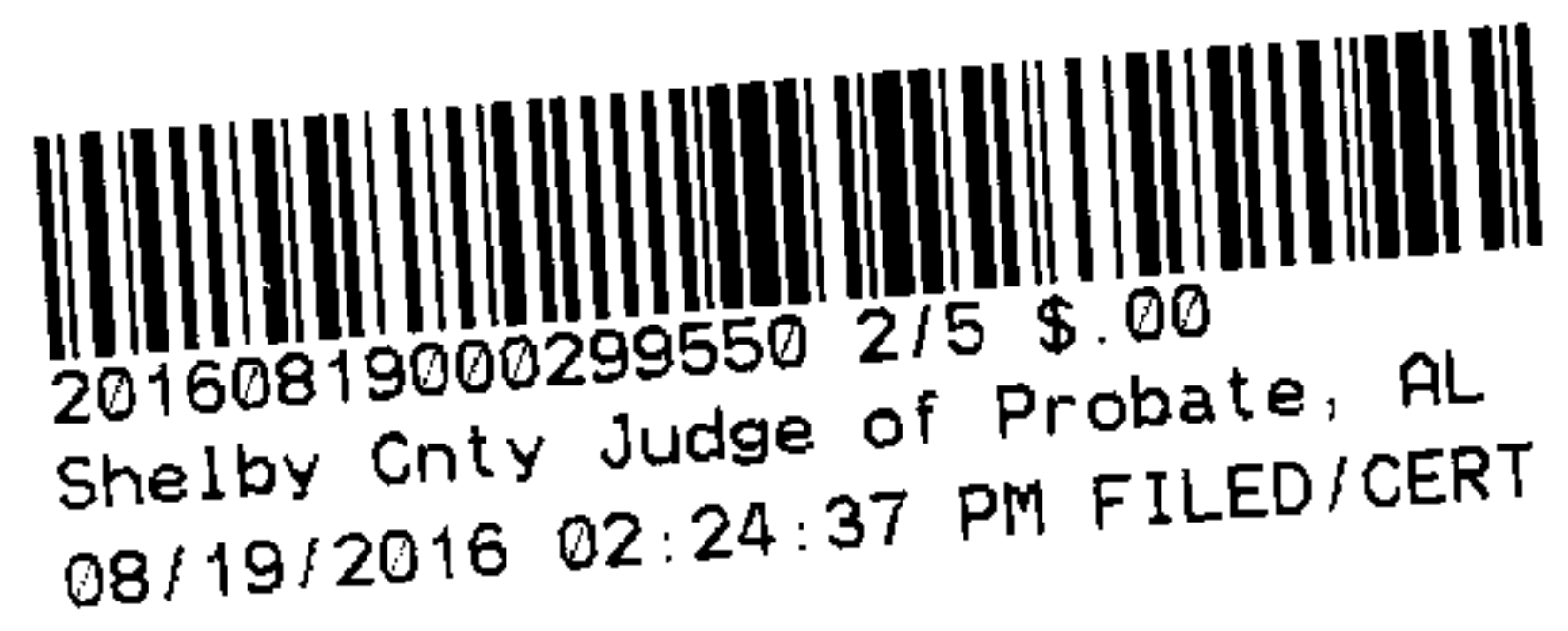
Signature of Notary Public

Daniel Lawler
Print Notary's Name

FORM 2: Contributions received by candidate or elected official

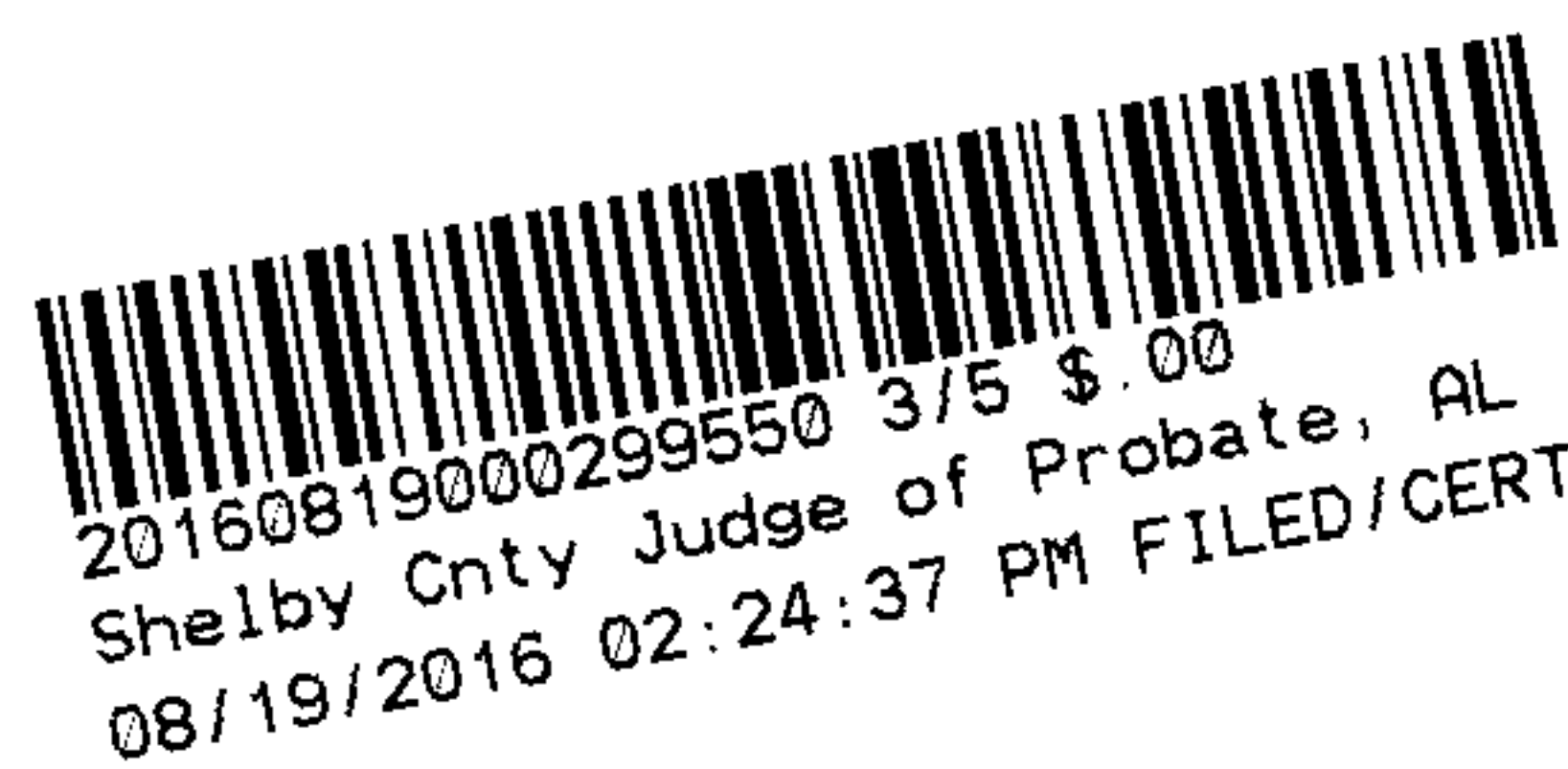
When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

FORM REVISED 10.27.2011



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.

FORM REVISED 10.27.2011



ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

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



NAME OF CANDIDATE OR ELECTED OFFICIAL: Robert S. Elliott

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 (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS [FCPA 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												0.00

FORM REVISED 10.27.2011

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20160819000299550 5/5 \$.00
Shelby Cnty Judge of Probate, AL
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