FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

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FILED
SEP 18 2018
BOBBY M. JUNKINS
JUDGE OF PROBATE

Statement of Dissolution

FOR ELECTED OFFICIALS, CANDIDATES AND POLITICAL ACTION COMMITTEES

Please Print in Ink or Type.

Name of Candidate or Elected Official, or Political Committee: Sam Ashley

Office Sought or Held (include district or circuit number, if applicable): City Council District 2

Address ☐ Check box if reporting new address: 109 Graves St

City	State	ZIP Code	Telephone Number
Gadsden	Al	35901	256-504-8224

Report Status (check one)

☐ No report required because I have had no activity since the last reporting period

☑ Termination report attached

Note:
If you have had activity since the last report filed, you are responsible for filing the requisite **Annual Report** covering the last year of activity. However, the submission of a **Termination Report** along with the **Statement of Dissolution** will satisfy this requirement.

This statement dissolves the above-named Principal Campaign Committee or Political Action Committee as of the 18th day of September in the year 2018.

Pursuant to §17-5-7(a) [Code of Alabama, 1975], any excess funds shall be disposed of in the following manner:

N/A

As required by the Alabama Fair Campaign Practices Act, I hereby swear, or affirm, to the best of my knowledge and belief that this Statement of Dissolution is true and correct.

Sam Ashley — Signature of Candidate or Elected Official, or Chairperson or Treasurer of Political Committee

9-18-18 — Date

FORM REVISED 9.2.2011

ANNUAL

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

THIS AREA FOR OFFICIAL USE ONLY

FILED
SEP 18 2018
BOBBY M. JUNKINS
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate or Elected Official	Political Party/Ballot Affiliation
Sam Ashley	
Office Sought or Held (include district or circuit number, if applicable): City Council District 2	
Address ☐ Check box if reporting new address: 109 Graves St	
City: Gadsden State: Al ZIP Code: 35901	Telephone Number: 256-504-8224

Calendar Year covered by this report.

☐ Amended Annual Report
☑ Termination Report

Total Pages in Report Include this page in your count.

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	500.00		
2b	Non-itemized cash contributions	2b	582.00		
2c	Total cash contributions (add lines 2a and 2b)			2c	1,082.00
	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	500		
4b	Non-itemized receipts from other sources	4b	0		
4c	Total receipts from other sources (add lines 4a and 4b)			4c	500.00
	Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	1,308.28		
5b	Non-itemized expenditures	5b	273.72		
5c	Total expenditures (add lines 5a and 5b)			5c	1,582.00
	Expenditures on Line of Credit				
6a	Itemized expenditures on line of credit (total from Form 6)	6a	0		
6b	Non-itemized expenditures	6b	0		
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c	0		
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	0

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

8	Beginning balance (as of January 1 of reporting year)			8	
9	Total cash contributions for year			9	
10	Total in-kind contributions for year	10			
11	Total receipts from other sources for year			11	
12	Total expenditures for year			12	
13	Total expenditures on line of credit for year	13			
14	Ending balance (add lines 8, 9, & 11, then subtract line 12)			14	
15	Total campaign debt (total debt owed as of December 31)	15			

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.

Sam Ashley
Signature of Candidate or Elected Official

9-18-18
Date

Sworn to and subscribed before me this 18th day of Sept. of the year 2018. My commission expires the 28th day of March of the year 2021.

Iva Nelson
Signature of Notary Public

Iva Nelson
Print Notary's Name

FORM REVISED 5.24.2017

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: SAM Ashley

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) Business or Corporation	Individual	PAC	Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
Jud Means	4182 River Rd Southside, Al 35907		X					$ 500.00
	TOTAL CASH CONTRIBUTIONS THIS PAGE							$500.00

FORM REVISED 10.27.2011

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

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Sam Ashley

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		
	TOTAL IN-KIND CONTRIBUTIONS THIS PAGE														

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: Sam Ashley

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	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	Lending Institution	PAC	Individual	Business	Other		
Jud Means	4182 River 35902 Southside, Al		X									$500.00
											TOTAL RECEIPTS THIS PAGE	$500.00

FORM REVISED 10.27.2011

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: Sam Ashley

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) Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
Build A Sign	11525 A Stonehollow Dr Suite 100 Austin Tx 78758		X									7-19-18	631.00
Office Max	530 George Wallace Dr Gadsden, Al 35903		X									7-20-18	366.30
"	"		X									7-22-18	132.00
The Print Shop	P.O. Box 811 Attalla, Al 35954		X									8-4-18	178.98
											TOTAL EXPENDITURES THIS PAGE		1308.28

FORM REVISED 10.27.2011

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

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Sam Ashley

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	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION		
	TOTAL EXPENDITURES THIS PAGE												

FORM REVISED 5.19.2017