

## Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

	Please Print in Ink or Time				E SE	F STAT	E AND
Nar	Please Print in Ink or Type. ne of Candidate or Elected Official	Political Party/	Railet i	Affiliation	Type of Resolution	REES	Carre)
James W. Bonner Republica				Annation	✓ Monthly		Amended Monthly
Office Sought or Held (include district or circuit number, if applicable)  State house district 17					Weekly		Amended Weekly
Address Check box if reporting new address					For Monthly F Month in which		May 2014
	9 hwy 123 Phil Campbell				report is filed.		
City		I <del></del>			For Weekly R Date of Friday	•	
City State ZIP Code Telephone Nui Phil Campbell Al 35581 256 762 68			917		week in which the report is filed.		
					Total Number Pages in Rep		5
S	ummary of activity since last filed report						
1	Beginning balance (ending balance from previo	us filing)				1	\$0.00
ı	Cash Contributions		]			<u> </u>	
2a	Itemized cash contributions (total from Form 2)		2a		\$25,000.00	1	
2b	Non-itemized cash contributions		2b		· · · · · · · · · · · · · · · · · · ·	1	
2c	Total cash contributions (add lines 2a and 2b)			· · · · · · · · · · · · · · · · · · ·	74	2c	\$25,000.00
	In-Kind Contributions					المستبد	
3a	a Itemized in-kind contributions (total from Form 3)					1	
3b	Non-itemized in-kind contributions				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	
3c Total in-kind contributions (add lines 3a and 3b)			3c		<del></del>	1	
	Receipts from Other Sources		'		<del> </del>	_	
4a	Itemized Receipts from Other Sources (total from	m Form 4)	4a		T 1	]	
4b	Non-itemized Receipts from Other Sources		4b			1	
4c	Total receipts from other sources (add lines 4a	and 4b)	<b>-</b>			4c	
1	Expenditures						
5a	Itemized expenditures (total from Form 5)	767	5a		\$1,150.00	7	
5b	Non-itemized expenditures	<del></del>	5b			1	
5c	Total expenditures (add lines 5a and 5b)					5c	\$1,150.00
6	Ending balance (add lines 1, 2c, & 4c, then subtra	act line 5c)				6	\$23,850.00
Cai	ndidates for State Office: File this report with the Offi	ce of the Se	creta	rv of State	S		
	ndidates for County or Municipal Office: File this re					ty in w	hich the office is sought.
\s re	equired by the Alabama Fair Campaign Practices Act, I here	eby Swo			ribed before me		
	ar or affirm to the best of my knowledge and belief that	the			e year	_	My commission expires
ittached report(s) and the information contained herein are rue and corpect and that this information is a full and complete				day	1/	/	-   -
tatement of all contributions, expenditures, and other required information euring the applicable period of time.						_ 0 1	he year
	5/0/2	2101					
Sign	ature of Candidate or Elected Official Date	Signa	ature o	f Notary Put	TIC .		
	<b>C</b>			1,	1		!
ORM REVISED 10.27.2011 W. I file / when 5 ystum; y				's Name			
	WITH WAR CUST	a ;1 /	<i>\(\rangle\)</i>				
	- wa 1/1	., 0	1				