

THIS AREA FOR OFFICIAL USE ONLY

State of Alabama-Mobile County

I certify this instrument was filed on:
 May 25, 2006 @ 3:28:07 PM

TOTAL AMOUNT \$0.00

2006038795

Don Davis, Judge of Probate

ALABAMA FAIR CAMPAIGN PRACTICES ACT CANDIDATE / ELECTED OFFICIAL PRE-ELECTION REPORT SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official Billy RAY STROUPS		Political Party/Ballot Affiliation Democrat	
Office Sought or Held (include district or circuit number, if applicable) MOBILE COUNTY Sheriff			
Address <input type="checkbox"/> Check box if reporting new address 3785 Lakefront Dr. W.			
City MOBILE	State AL	ZIP Code 36695	Telephone Number (251) 639-0432

Type of Election

- (check one)
- Primary Election
 - Primary Runoff
 - General Election
 - Special Election

Election Date

Type of Report (check one)

- 10-5 Day Pre-Election Report
- 45 Day Pre-Election Report
- Amended Pre-Election Report
CHECK ONE OF THE ABOVE BOXES TO INDICATE WHICH TYPE OF REPORT IS BEING AMENDED

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

Sworn to and subscribed before me this 25 day of

May of the year 2006. My commission expires
 the MY COMMISSION EXPIRES: Apr 26, 2007 year _____
NOTARY PUBLIC STATE OF ALABAMA AT LARGE
 BONDED TO THE NOTARY PUBLIC UNDER LICENSE #

Marcie Lawshe
 Signature of Notary Public

MARCIE LAWSHE
 Print Notary's Name

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] 05/25/06
 Signature of Candidate or Elected Official Date

ALABAMA FAIR CAMPAIGN PRACTICES ACT

FORM 2: CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL:

Billy Ray Strooks

PAGE 2 OF 5

The FCRA requires that those contributions greater than \$100 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		
							<i>0</i>
							<i>0</i>
							<i>0</i>
							<i>0</i>
							<i>0</i>
							<i>0</i>
							<i>0</i>
							<i>0</i>
							<i>0</i>
TOTAL CASH CONTRIBUTIONS THIS PAGE							<i>0</i>

FORM 3: IN-KIND CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: BILL RAY STROOP PAGE 3 OF 5

The FCPA requires that those contributions greater than \$100 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															
0															

FORM 4: RECEIPTS FROM OTHER SOURCES

LOANS/INTEREST/OTHER SOURCES OF INCOME TO CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Billy Ray Straws

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The FCPA requires that those contributions greater than \$100 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 IF CPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEERING 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												\$	

FORM 5: EXPENDITURES

BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTIONS TO OTHER CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES

NAME OF CANDIDATE / ELECTED OFFICIAL: Billy RAY STIVERS

PAGE 5 OF 5

The FCPA requires that expenditures over \$100 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				
TOTAL EXPENDITURES THIS PAGE														<u>0</u>	