

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

Shelby Cnty Judge of Probate, AL 11/02/2015 03:54:23 PM FILED/CERT Please Print in Ink or Type.

Name of Candidate or Elected Official Political Party/Ballot Affiliation	Type of Report (check of	one)
THOMAS DALE NEUENDORE NA	Monthly	Amended Monthly
Office Sought or Held (include district or circuit number, if applicable)	Weekly	Amended Weekly
MAYOR OF CHELSEA	For Monthly Reports	
Address Check box if reporting new address	Month in which the report is filed.	OCT. 2015
P.O. Box 293	For Weekly Reports	
City State ZIP Code Telephone Number	Date of Friday in the week in which the	
CHELSEA AL 35043	report is filed.	
	Total Number of Pages in Report	
Cump months of a ativity aire a local filed was and	rages in Kepon	
Summary of activity since last filed report		0211
1 Beginning balance (ending balance from previous filing)	1	924.00
Cash Contributions		
	200.00	
2b Non-itemized cash contributions 2b		
2c Total cash contributions (add lines 2a and 2b)	2c	1000,00
In-Kind Contributions		
3a Itemized in-kind contributions (total from Form 3) 3a 3a	-0-	
3b Non-itemized in-kind contributions 3b		
3c Total in-kind contributions (add lines 3a and 3b) 3c — 2		
Receipts from Other Sources		
4a Itemized Receipts from Other Sources (total from Form 4) 4a	2 —	
4b Non-itemized Receipts from Other Sources 4b		
4c Total receipts from other sources (add lines 4a and 4b)	4c	0.00
Expenditures		
5a Itemized expenditures (total from Form 5) 5a 101	8.50	
5b Non-itemized expenditures 5b -6	<u> </u>	
5c Total expenditures (add lines 5a and 5b)	5c	1018,50
6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	905.50
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 Prob		ch the office is sought
		7
As required by the Alabama Fair Campaign Practices Act, I hereby Sworn to and subsc swear or affirm to the best of my knowledge and belief that the	cribed before me_this(day of
attached report(s) and the information contained herein are	ne year N	My commission expires
true and correct and that this information is a full and complete the day statement of all contributions, expenditures, and other required	of MULL of the	year <u>COL</u> .
information during the applicable period of time.		1-A-A-C1
Three Sold Monday 11/2/15 A HOVE		
Signature of Candidate or Elected Official Date Signature of Notary Put		
Men	XXXXXX	MU
FORM REVISED 10.27.2011 Print Notary's Name		

AL ABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTE

Expenditures by candidate or elected official FORM 5.

NEWENSTORF DALE THOMAS ATE OR ELECTED OFFICIAL: NAME OF CANDID



When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to tha

		PURPOSE OF EXPE (CHECK ON	EXPENDITURE KONE)		
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative Advertising Contribution Polling Contribution Food Food Loan Loan Loan Loan Loan Loan Loan Loan	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
NEW LEAR TESTIGHT	P.O. BOX. AL 35043			10/6/15	120.00
POSTNETATION	CHELSEA CAMERS CHELSEA AL 350 W3			10/14/15	733.50
WESSTE DESIGN	HEUSEA, AL			10/19/15	165.00
20151102000381430 2/3 \$.00 Shelby Cnty Judge of Probate, AL 11/02/2015 03:54:23 PM FILED/CERT					
SED 9.		TOTAL EXPE	NDITURES THIS	PAGE	10/8.50

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

Contributions received by candidate or elected official

CANDIDATE 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. OR ELECTED OFFICIAL: THOMAS BALE NEWENDORF



1000.00	IIS PAGE	HISNO	ČŢ.	NTRIBL	TOTAL CASH CO	FORM REVISED 9.2.2011
2015110 Shelby 11/02/2						
20003814 Cnty Jud						
30 3/3 \$ ge of Prid: 4:23 PM						
_						
1000,00	61/10/		<u> </u>		51 CROSSBROOK CLRCLE CHELSEA AL 35043	THOMAS DALE NEUBYCORF
CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Other Returned	Individual PAC	Business or Corporation	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
		RIBUTION KONE)	SOUR CONTR	<mark>유</mark>		
		e listings.	those	and 4 for	NOT LIST in-kind contributions or loans on this form. Use Forms 3	DO