



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official Chris Dunn		Political Party/Ballot Affiliation Republican	
Office Sought or Held (include district or circuit number, if applicable) Shelby County Commissioner Dist 9			
Address <input type="checkbox"/> Check box if reporting new address 211 Lime Creek Lane			
City Chelsea	State AL	ZIP Code 35043	Telephone Number [REDACTED]

Type of Report (check one)

- ☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

For Monthly Reports

Month in which the report is filed.

11-15

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	-0-	
2b	Non-itemized cash contributions	2b	-0-	
2c	Total cash contributions (add lines 2a and 2b)	2c	-0-	
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	581.35	
4b	Non-itemized Receipts from Other Sources	4b	-0-	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	581.35	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	581.35	
5b	Non-itemized expenditures	5b	-0-	
5c	Total expenditures (add lines 5a and 5b)	5c	581.35	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	-0-	

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.

Chris Dunn
Signature of Candidate or Elected Official

11-30-15
Date

Sworn to and subscribed before me this **30th** day of

Nov of the year **2015**. My commission expires
the **8th** day of **May** of the year **2016**.

Lisa Morgan
Signature of Notary Public

Lisa Morgan
Print Notary's Name



20151201000410290 1/5 \$.00
Shelby Cnty Judge of Probate, AL
12/01/2015 11:37:00 AM FILED/CERT

RECEIVED
NOV 30 2015
James W. Fuhrmeister
Judge of Probate

NAME OF CANDIDATE OR ELECTED OFFICIAL: Chris Dunn

DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

FORM REVISED 10.27.2011

20151201000410290 2/5 \$.00
Shelby Cnty Judge of Probate, AL
12/01/2015 11:37:00 AM FILED/CERT

NAME OF CANDIDATE OR ELECTED OFFICIAL: Chris Dunn

DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.

FORM REVISED 10.27.2011

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Shelby Cnty Judge of Probate, AL
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FORM 4: Receipts from Other Sources

NAME OF CANDIDATE OR ELECTED OFFICIAL: Chris Dunn

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 <small>[FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]</small>	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other		
Christopher Lee Dunn	211 Lime Creek Lane Chelsea, AL 35643		<input checked="" type="checkbox"/>		Christopher Lee Dunn			<input checked="" type="checkbox"/>			11-5-15	581 ³⁵
											TOTAL RECEIPTS THIS PAGE	581 ³⁵

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FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Chris Dunn

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	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION			
Shelby County Republican Party	1920 Valleydale Rd Ste 154 Hoover, AL 35244	<input checked="" type="checkbox"/>												581 ³⁵
TOTAL EXPENDITURES THIS PAGE														581 ³⁵

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