

FORM REVISED 10.27.2011

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Type of Report (check one) Political Party/Ballot Affiliation Name of Candidate or Elected Official Amended Monthly Monthly Amended Weekly Weekly Office Sought or Held (include district or circuit number, if applicable) ('ommissioneiz For Monthly Reports Month in which the Check box if reporting new address report is filed. ime Creck Lane For Weekly Reports Date of Friday in the Telephone Number **ZIP Code** week in which the A report is filed. **Total Number of** Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) **Cash Contributions** Itemized cash contributions (total from Form 2) 2a ~じつ ~O~ 2b Non-itemized cash contributions ~ C Total cash contributions (add lines 2a and 2b) 2c **In-Kind Contributions** 3a Itemized in-kind contributions (total from Form 3) 3b Non-itemized in-kind contributions ~0~ Total in-kind contributions (add lines 3a and 3b) 3c -07 Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) 4a Non-itemized Receipts from Other Sources 581,35 Total receipts from other sources (add lines 4a and 4b) **Expenditures** 581.35 Itemized expenditures (total from Form 5) Non-itemized expenditures -0-581.35 5c Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) 6 ~ O ~ 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. Sworn to and subscribed before me this _____30 Th__ day of As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the of the year $\mathcal{O}()$ 5. My commission expires attached report(s) and the information contained herein are day of May 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 of Notary Public Signature of Candidate or Elected Official Date

Print Notary's Name

MOV 8 0 2015
Judge of Probablester

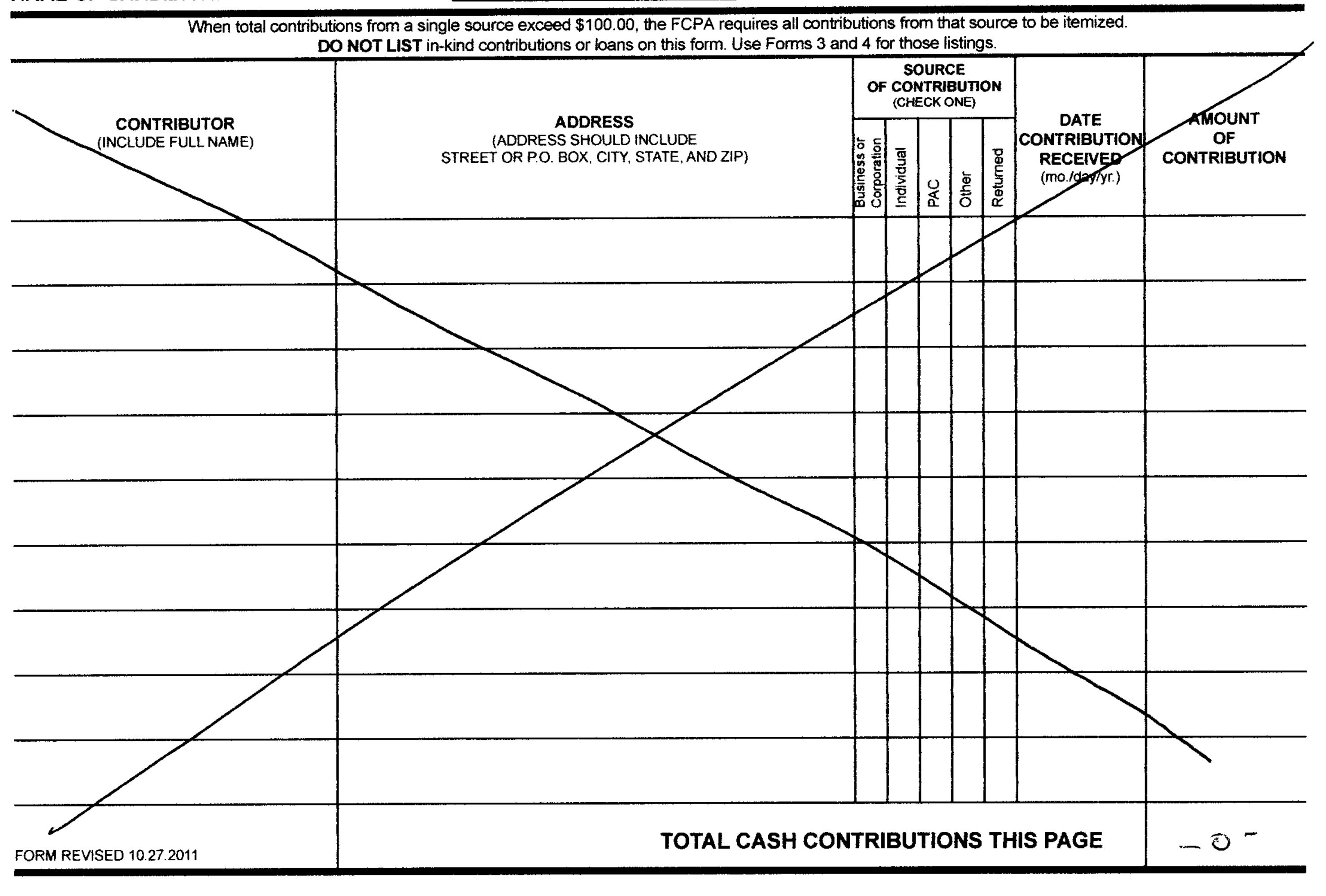
20151201000410290 1/5 \$.00 20151201000410290 1/5 \$.00 Shelby Cnty Judge of Probate, AL 12/01/2015 11:37:00 AM FILED/CERT

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: Chris Dunn



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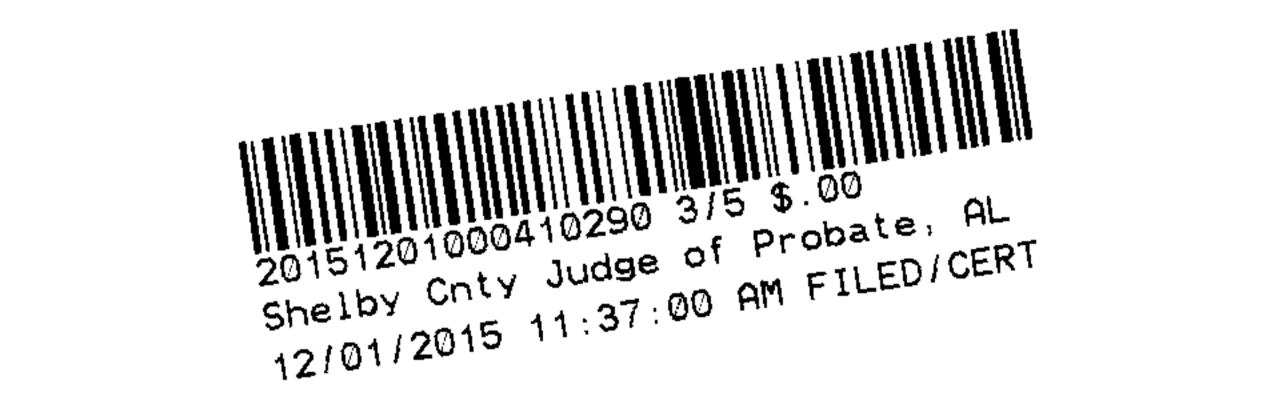
ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

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



NAME OF CANDIDATE OR ELECTED OFFICIAL: Chris Dunn

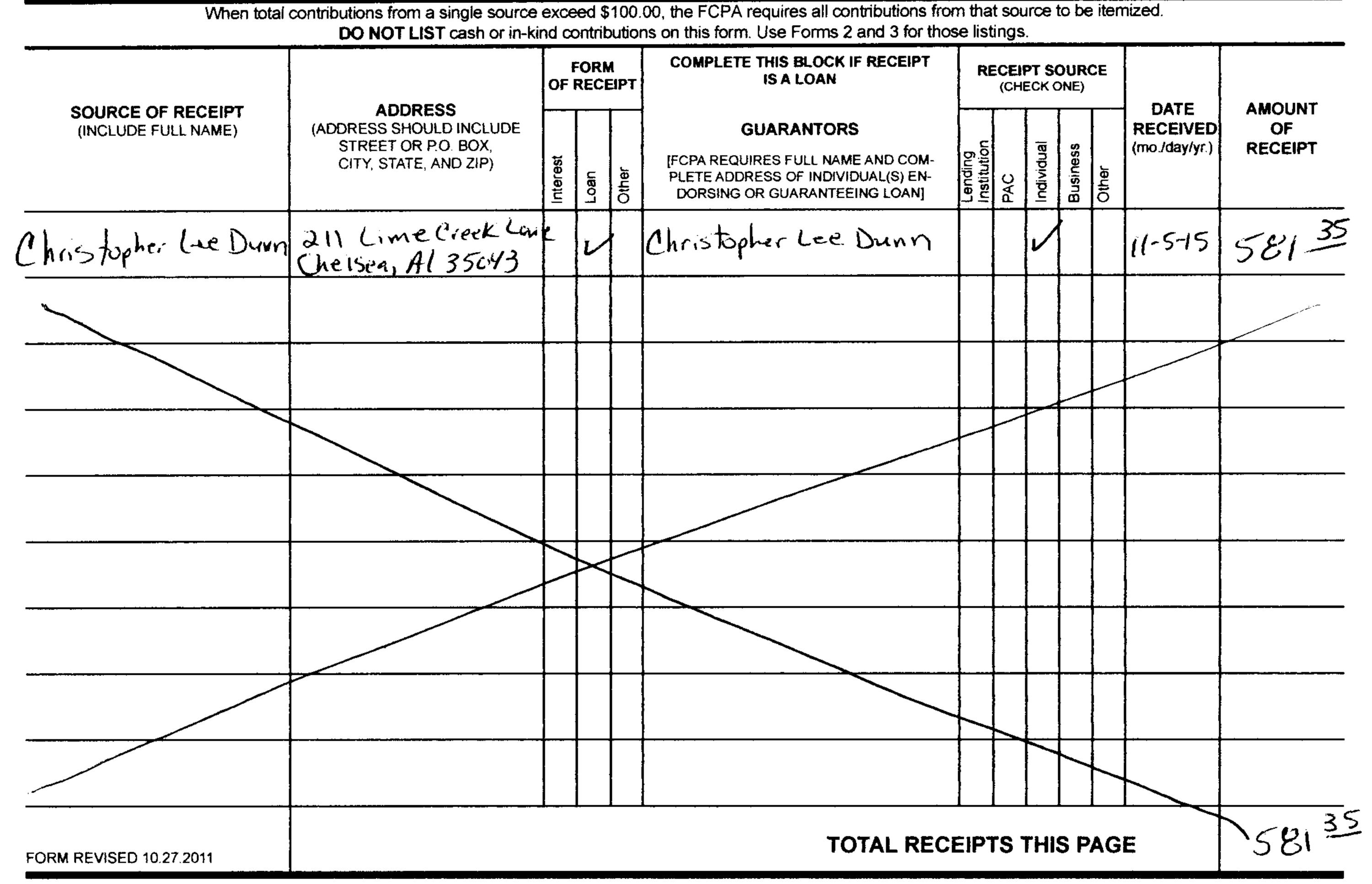
When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings. SOURCE NATURE OF CONTRIBUTION (CHECK ONE) (CHECK ONE) **AMOUNT** DATE **ADDRESS** CONTRIBUTOR Food Rent Transportation Other Consultants/ Polling Equipment CONTRIBUTION (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED (mo./day/yr.) TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011

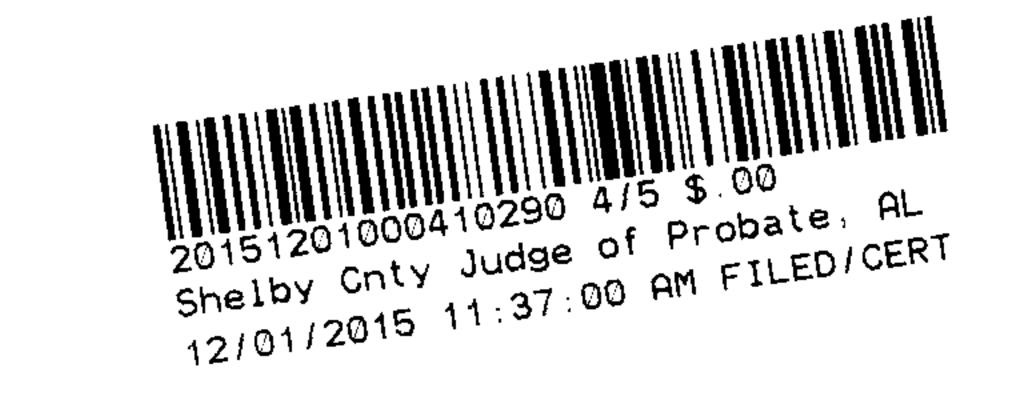


ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

FORM 4: Receipts from Other Sources loans, interest, and other sources of income (

NAME OF CANDIDATE OR ELECTED OFFICIAL: Chris Dunn





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: Chris Dunn





PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)				PU	RPO	SE O						
		Administrative	dvertisi	응등	Charitable Contribution	Food	Fundraising	Loan Repayment	odging	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
shelby county coublisms Party	1920 Valley date Rd Stels4 Hoover, AL 35244	V											581 ³⁵
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ORM REVISED 10.27.2011	TOTAL EXPENDITURES THIS PAGE												581

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