


**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A


 20160128000027930 1/4 \$.00
Shelby Cnty Judge of Probate, AL
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JAN 27 2016

James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official Mike Vest		Political Party/Ballot Affiliation Republican	
Office Sought or Held (include district or circuit number, if applicable) Shelby County Commissioner - Dist. 6			
Address ☐ Check box if reporting new address 2344 Lakeside Dr.			
City B'ham	State AL	ZIP Code 35244	Telephone Number 205-602-0907

Calendar Year covered by this report.

- ☐
- Amended Annual Report
-
- ☐
- Termination Report

Total Pages in Report Include this page in your count.

SECTION I - Summary of activity from last filed report through December 31 of reporting year

1	Beginning balance (ending balance from previous filing)		1	166.98
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	Total itemized receipts from other sources (total from Form 4)	4a	581.35	
4b	Total non-itemized receipts from other sources	4b	0	
4c	Total itemized 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	166.98	

SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

7	Beginning balance (as of January 1 of reporting year)	7	166.98
8	Total cash contributions for year	8	0
9	Total in-kind contributions for year	9	0
10	Total receipts from other sources for year	10	0
11	Total expenditures for year	11	0
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)	12	166.98
13	Total campaign debt (total debt owed as of December 31)	13	581.35

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.

Sworn to and subscribed before me this 27th day of Jan of the year 2016. My commission expires the 25th day of Oct of the year 2017.

Signature of Notary Public

Print Notary's Name

Signature of Candidate or Elected Official

1-27-16
Date

KEVIN T. ATWELL
Print Notary's Name



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Mike Vest

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 [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)				DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other	
Mike Vest	2344 Lakeside Dr.				Personal loan			✓			581.33
Personal loan	2344 Lakeside Dr	✓			Mike Vest					10/12/15	
Mike Vest	131101 AC 35244										
TOTAL RECEIPTS THIS PAGE											\$ 581.33

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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:

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.

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																

FORM REVISED 9.2.2011

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NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

[illegible]

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