

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20160822000303190 1/4 \$.00
Shelby Cnty Judge of Probate, AL
08/22/2016 03:49:00 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Russell Nix		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) City Council District 1			
Address <input type="checkbox"/> Check box if reporting new address 686 Salem Rd			
City Montevallo, AL	State AL	ZIP Code 35115	Telephone Number [REDACTED]

Type of Report (check one)

☐ Monthly
☒ Weekly

☐ Amended Monthly
☐ Amended Weekly

For Monthly Reports
Month in which the
report is filed.

For Weekly Reports
Date of Friday in the
week in which the
report is filed.

Total Number of
Pages in Report

8-26-16

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 320.46	
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c 320.46	
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	
3b	Non-itemized in-kind contributions	3b	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a 320.46	
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c 320.46	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	

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.

Russell Nix **8-22-16**
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this **27th** day of **Aug.** of the year **2016**. My commission expires the **28th** day of **March** of the year **2020**.

Deborah Lynn Horton
Signature of Notary Public

Deborah Lynn Horton
Print Notary's Name

NAME OF CANDIDATE OR ELECTED OFFICIAL: USSE / NIN

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

[illegible]



**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**

The Type Shop

616 Main St
A1 35115
Newbern, Mo

8-1-8

\$320.46



20160822000303190 3/4 \$.00
Shelby Cnty Judge of Probate, AL
08/22/2016 03:49:00 PM FILED/CERT

FORM REVISED 10.27.2011

TOTAL EXPENDITURES THIS PAGE

~~\$320.96~~

INVOICE #
16352

THE TYPE SHOP
DESIGN, PRINT and COPY

616 Main Street • Montevallo, Alabama 35115

Phone: 205-665-5818 • Fax: 205-665-0411

typeshopinc@aol.com

Date: August 14, 2016

Sold to: Russell Nix



20160822000303190 4/4 \$.00
Shelby Cnty Judge of Probate, AL
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DESCRIPTION OF WORK:

500 doorhangers, 4/4, 14 ptBCT\$294.00

Sales Tax (9%): \$26.46

TOTAL DUE: \$320.46

Thanks! Your Business is Appreciated!