40NTHLY & 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. Type of Report (check one) Political Party/Ballot Affiliation Name of Candidate or Elected Official Amended Monthly Amended Weekly Office Sought or Held (include district or circuit number, if applicable) For Monthly Reports Month in which the Address / Check box if reporting new address report is filed. For Weekly Reports Date of Friday In the ZIP Code Telephone Number State week in which the 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 Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) **In-Kind Contributions** 3a Itemized in-kind contributions (total from Form 3) 3a 3b Non-itemized in-kind contributions 3c | Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) [4a] Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) 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 ______ 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 \(\lambda My commission expires 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. Signature of Notary Public Signature of Candidate or Elected Official Date

Print Notary's Name

CTICES ACT CAMPAIGN FINANCE REPORT FOR CANDIDATE Qο ELECTED OFFICIAL

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OF CANDIDATE OR ELECTED OFFICIAL:

When total contributions from a single source exceed \$100.00, the FCPA requires all corms 3



FORM REVISED Shelby Cnty Judge of Probate, AL 08/22/2016 03:49:00 PM FILED/CERT ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) TOTAL CASH CONTRIBUTIONS and Business or 4 for those listings. 읶 Corporation SOURCE CONTRIBUTION (CHECK ONE) Individual PAC Other THIS Returned ONTRIBUTION PAGE (mo./day/yr.) DATE

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: FOR X
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 Expenditures by candidate or elected TE OR ELECTED OFFICIAL: 14556// official W, X



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

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PURPOSE OF EXPENDITURE (CHECK ONE)			RE) UTION	ONE	OF E	OSE SOC	PUR				

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616 Main Street • Montevallo, Alabama 35115
Phone: 205-665-5818 • Fax: 205-665-0411
typeshopinc@aol.com

Date: August 1e 2016

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Sold to: Russell Nix

Shelby Cnty Judge of Probate, AL 08/22/2016 03:49:00 PM FILED/CERT

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!