



# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A



20161007000370830 1/5 \$ .00  
Shelby Cnty Judge of Probate: AL  
10/07/2016 04:03:10 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official <b>HOLLIE C. COST</b>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <b>MAYOR - MONTEVALLO</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>510 PINEVIEW RD</b>			
City <b>MONTEVALLO</b>	State <b>AL</b>	ZIP Code <b>35115</b>	Telephone Number

Calendar Year  
covered by this report.

**2016**☐ Amended Annual Report☒ Termination Report

Total Pages in Report  
Include this page in  
your count.

**5**

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

1	Beginning balance (ending balance from previous filing)		1	<b>196.71</b>
<b>Cash Contributions</b>				
2a	Itemized cash contributions (total from Form 2)	2a	<b>0</b>	
2b	Non-itemized cash contributions	2b	<b>0</b>	
2c	Total cash contributions (add lines 2a and 2b)	2c	<b>0</b>	
<b>In-Kind Contributions</b>				
3a	Itemized in-kind contributions (total from Form 3)	3a	<b>0</b>	
3b	Non-itemized in-kind contributions	3b	<b>0</b>	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<b>0</b>	
<b>Receipts from Other Sources</b>				
4a	Total itemized receipts from other sources (total from Form 4)	4a	<b>0</b>	
4b	Total non-itemized receipts from other sources	4b	<b>0</b>	
4c	Total itemized receipts from other sources (add lines 4a and 4b)	4c	<b>0</b>	
<b>Expenditures</b>				
5a	Itemized expenditures (total from Form 5)	5a	<b>1781.40</b>	
5b	Non-itemized expenditures	5b	<b>0</b>	
5c	Total expenditures (add lines 5a and 5b)	5c	<b>1781.40</b>	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<b>24.31</b>	

## 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	<b>0</b>
8	Total cash contributions for year	8	<b>1806.11</b>
9	Total in-kind contributions for year	9	<b>40.00</b>
10	Total receipts from other sources for year	10	<b>0</b>
11	Total expenditures for year	11	<b>1781.80</b>
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)	12	<b>24.31</b>
13	Total campaign debt (total debt owed as of December 31)	13	<b>0</b>

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 **28<sup>th</sup>** day of **Sept** of the year **2016**. My commission expires the **26<sup>th</sup>** day of **August** of the year **2017**.

*Sandra B Byrd*  
Signature of Notary Public

**Sandra B Byrd**  
Print Notary's Name

*Hollie C. Cost*  
Signature of Candidate or Elected Official

**9-28-16**  
Date

NAME OF CANDIDATE OR ELECTED OFFICIAL: HOLCIE GOS

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

FORM REVISED 10.27.2011

## TOTAL CASH CONTRIBUTIONS THIS PAGE





NAME OF CANDIDATE OR ELECTED OFFICIAL: FOLKE COST

**DO NOT LIST** cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

FORM REVISED 10.27.2011

**TOTAL RECEIPTS THIS PAGE**~~Q~~

NAME OF CANDIDATE OR ELECTED OFFICIAL: HOLLER, C. CAST

**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**

WIND WIND PLENTY

112 W AFTER DAVIS DR.  
B'ham, AL 35209

Administrative
Advertising
Consultants/ Polling
Charitable Contribution
Food
Fundraising
Loan Repayment
Lodging
Transportation

W  
∞

186.90

SHELDON COUNTY  
REPORTER

1115 N. MAIN ST  
COLOMBIA TN 35051

**OTHER**  
GIVE  
BRIEF  
EXPLANATION

20  
W

500

TRUST MARK  
BANK

835 MAIN ST.  
MONTREAL, AL 35115

Checks

7-27

15.50



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**TOTAL EXPENDITURES THIS PAGE**

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172.40