

ALABAMA FAIR CAMPAIGN PRACTICES ACT
CANDIDATE / ELECTED OFFICIAL
ANNUAL REPORT
SUMMARY FORM 1A

THIS AREA FOR OFFICIAL USE ONLY



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 Shelby Cnty Judge of Probate, AL
 12/09/2016 12:41:15 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Rick Walters		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) Alabaster City Council Ward 4			
Address ☐ Check box if reporting new address 109 Shalimar Trace			
City Alabaster	State AL	ZIP Code 35007	Telephone Number [REDACTED]

Type of Report (check one)

- ☒ Annual Report for Year 2016
☐ Termination Report
☐ Amended Annual Report for Year _____

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

1	Beginning balance (ending balance from previous filing)		1	\$0.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$0.00	
2b	Non-itemized cash contributions	2b	\$0.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$0.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	\$0.00	
3b	Non-itemized in-kind contributions	3b	\$0.00	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$0.00	
Receipts from Other Sources				
4	Total receipts from other sources (total from Form 4)	4	\$0.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	\$0.00	
5b	Non-itemized expenditures	5b	\$0.00	
5c	Total expenditures (add lines 5a and 5b)	5c	\$0.00	
6	Ending balance (add lines 1, 2c, & 4, then subtract line 5c)	6	\$0.00	

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	\$0.00
8	Total cash contributions for year	8	\$1,112.45
9	Total in-kind contributions for year	9	\$0.00
10	Total receipts from other sources for year	10	\$0.00
11	Total expenditures for year	11	\$1,112.45
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)	12	\$0.00
13	Total campaign debt (total debt owed as of December 31)	13	\$0.00

Sworn to and subscribed before me this 9th day of Dec 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

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.

Rick Walters 12-9-16
 Signature of Candidate or Elected Official Date

ALABAMA FAIR CAMPAIGN PRACTICES ACT

FORM 2: CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Rick Walters

PAGE 2 OF 3

The FCPA requires that those contributions greater than \$100 be itemized. DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
	109 Shalimar Trace							\$0.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								\$0.00

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FORM 4: Receipts from Other Sources

loans, interest, and other sources of income

Rick Walters

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 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		
Rick Walters	109 Shalimar Trace Alabaster, AL 35007		X		Rick Walters 109 Shalimar Trace Alabaster, AL 35007		X			Aug 8, 2016	\$464.75
Rick Walters	109 Shalimar Trace Alabaster, AL 35007		X		Rick Walters 109 Shalimar Trace Alabaster, AL 35007		X			Aug 9, 2016	\$337.79
Rick Walters	109 Shalimar Trace Alabaster, AL 35007		X		Rick Walters 109 Shalimar Trace Alabaster, AL 35007		X			Aug 10, 2016	\$25.00
Rick Walters	109 Shalimar Trace Alabaster, AL 35007		X		Rick Walters 109 Shalimar Trace Alabaster, AL 35007		X			Aug 13, 2016	\$50.01
FORM REVISED 10.27.2011	TOTAL RECEIPTS THIS PAGE										\$877.55

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Rick Walters

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 COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN)	RECEIPT SOURCE (CHECK ONE)				DATE RECEIVED (month/day/year)	AMOUNT OF RECEIPT	
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business			Other
Rick Walters	109 Shalimar Trace Alabaster, AL 35007		X		Rick Walters 109 Shalimar Trace Alabaster, AL 35007		X				Aug 17, 20	\$126 90
Rick Walters	109 Shalimar Trace Alabaster, AL 35007		X		Rick Walters 109 Shalimar Trace Alabaster, AL 35007		X				Aug 20, 20	\$108 00
TOTAL RECEIPTS THIS PAGE												\$234 90

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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: Rick Walters



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

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 (mm/dd/yyyy)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
USPS	858 HWY 31 Saginaw, AL 35137		X									Aug 17, 2016	\$126 90
Frios Gourmet Pops	569 1st Street SW Alabaster, AL 35007		X									Aug 20, 2016	\$108 00
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TOTAL EXPENDITURES THIS PAGE													\$234 90