FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Shelby Cnty Judge of Probate, AL

08/14/2020 11:30:01 AM FILED/CERT

ALAN L. KING Judge of Probate

E.O.D.

PROBATE COURT

OFFICE County Division Code: AL040 Inst. # 2020085903 Pages: 1 of 1 I certify this instrument filed on 8/10/2020 11:57 AM Doc: ELCAPRE Judge of Probate Jefferson County, AL.

1.0

Clerk: SSTEPHENS

SIIMMARY FORM 1

国 SUMMARY FORM 1		Type of Report (check one)	e did marrie primeria de la marrie di la compania de la compania del compania de la compania de la compania del compania de la compania del compania del compania del compania de la compania del compania
Please Print in Ink or Type.		Monthly	Amended Monthly
Name of Candidate or Elected Official	Political Party/Ballot Affiliation	Weekly	Amended Weekly
Or. Casey W. Middlebrooks	N/A	For Monthly Reports Month for which the	. 1
Office Sought or Held (include district or circuit number, if applicable)	report is filed.	De:11.5050	
Hoover City Council, Place 6		For Weekly Reports	· · · · · · · · · · · · · · · · · · ·
Address Check box if reporting new address 2395 Abbeyglen Cir		Date of Friday in the week for which the report is filed.	
City State ZIP	Code Telephone Number	Total Number of	<u> </u>
Hoover AL 35226		Pages in Report	

S	ummary of activity since last filed report				
1	Beginning balance (ending balance from previous filing)		•:	1	4053.00
	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	\$0.00
	In-Kind Contributions			-	
3a	Itemized in-kind contributions (total from Form 3)	3a	\mathcal{E}]	
3b	Non-itemized in-kind contributions	3b	0	1	
3c	Total in-kind contributions (add lines 3a and 3b)	3с	\$0.00	-	•
	Receipts from Other Sources				• •
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	0		
4b	Non-itemized Receipts from Other Sources	4b	0	1 .	- - - -
4c	Total receipts from other sources (add lines 4a and 4b)			4c	\$0.00
	Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	O	`	- -
5b	Non-itemized expenditures	5b	0		
5c	Total expenditures (add lines 5a and 5b)			5c	\$0.00
	Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a	()		
6b	Non-itemized expenditures	6b	()	-	· · ·
6c	Total expenditures on credit (add lines 6a and 6b)	6c	\$0.00		
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	40\$3.00

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.
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1 7 71 11 71 71 71 71 7 1 1 1 1 1 1 1 1

210912020 Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this $\frac{10^{17}}{10^{17}}$ day of
HUBIT of the year 2020. My commission expires
the HM day of FEBRUARY of the year 2024.
Possed institutions
Signature of Notary Public

LENICE JUNE RICHARDSON Notary Public, Alabama State At Large My Commission Expires 2/4/2024 Print Notary's Name