FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY

County Division Code: AL040 Inst. # 2021041642 Pages: 1 of 5 I certify this instrument filed on 4/9/2021 2:36 PM Doc: ELCAPRE Judge of Probate Jefferson County, AL.

Clerk: NICOLE

Please Print in Ink or Type.		Tours of Daniel (abook	·\
Name of Candidate or Elected Official	Political Party/Ballot Affiliation	Type of Report (check	one)  ☐☐ Amended Monthly
Unis Woods	WIT	- Weekly	Amended Weekly
Office Sought or Held (include district or circuit number, if applicable)  MAYUR OF BIVMING MAN	- -	For Monthly Reports	
Address    Check box if reporting new address		Month in which the report is filed.	MANCH 2021
P.D. Box 2471		For Weekly Reports	
City State ZIP Code Simming At 35201	Telephone Number	Date of Friday in the week in which the report is filed.	
		Total Number of Pages in Report	3
Summary of activity since last filed report			
1 Beginning balance (ending balance from previ	ous filing)	1	20,109.30
Cash Contributions	· -	· · · · · · · · · · · · · · · · · · ·	
2a Itemized cash contributions (total from Form 2	) 2a / <i>U</i> <sub>j</sub>	500.	
2b Non-itemized cash contributions	2b		
2c Total cash contributions (add lines 2a and 2b)		2c	10,500
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	o) 3c		
Receipts from Other Sources		<u> </u>	
4a Itemized Receipts from Other Sources (total from	om Form 4) 4a 15	100.	
4b Non-itemized Receipts from Other Sources	4b		
4c Total receipts from other sources (add lines 4a	a and 4b)	4c	15,000
Expenditures			
5a Itemized expenditures (total from Form 5)	5a 23	020.81	
5b Non-itemized expenditures	5b		
5c Total expenditures (add lines 5a and 5b)	-	5c (	23,020,81)
6 Ending balance (add lines 1, 2c, & 4c, then subt	tract line 5c)	6	22,588.47
Candidates for State Office: File this report with the O	office of the Secretary of S	tate.	
Candidates for County or Municipal Office: File this	report with the Judge of P	robate of the county in w	
As required by the Alabama Fair Campaign Practices Act, I he		bscribed before me this	day of
swear or affirm to the best of my knowledge and belief the attached report(s) and the information contained herein	n are		. My commission expires
true and correct and that this information is a full and com	iplete the 20 d	lay of Aegust of th	ne year <u>2004</u> .
statement of all contributions, expenditures, and other requires information during the applicable period of time.		ine Buch	
hotation land	Signature of Notary		
Signature of Candidate or Elected Official Date	dignature of Notary	nne Har	DRIENNE RUFFIN

Print Notary's Name

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STATE OF ALABAMA 7 COMM. EXP. 08-26-2024

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

#### FORM 2: Contributions received by candidate or elected official

	ions from a single source exceed \$100.00, the FCPA requires all contrib O NOT LIST in-kind contributions or loans on this form. Use Forms 3 an						
	ADDDECC		_		IOITU		A SECTIBLE
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)		Individual	PAC	Other	CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
Andmon Diveluping	P.O. Box 130415 Bihomi BL 35213		,	2		3/31/21	1,500;
Anthowy Thomasino	1071 Country Club Civele Bhomith 35244					3/20/21	500.
Theresa Wallace	4000 Diversee LANC		i			3/31/21	1,000.
Thomas Wallace	AUDDintingthe LANC Bhitaning 3527		ارا			3/31/21	1,000-
Robert Mc Kenns	29/18/14/19/01/19/		"	1		3/20/21	500
Michael Murry	402 OFFICE POPENE. 35223		i			4/1/21	5,000.
Charlie Rengan	P.O. BOX 59489 Barn, 17235259		2			3/31/21	11000
FORM REVISED 10.27.2011	TOTAL CASH CON	TRIE	JUT	10i	is T	HIS PAGE	



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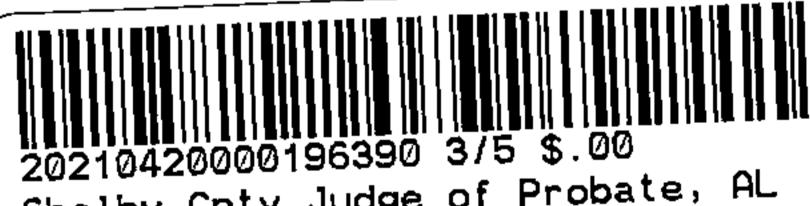
ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

## FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Chris Nools



When total	contributions from a single source exceed \$100.0  DO NOT LIST cash or loans on this	o, the	e FC m. U	Se F	orm	res a	all co and 4	intrib 4 for	utior thos	is fro e list	m th ings	at so	ource	e to be itemized.	
	4 DDEPOO		NATURE OF CONTRIBUTION (CHECK ONE)							SOURCE (CHECK ONE)					
	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	gig	Food	Rent	Transportation	Other	Business/ Corporation	Individuai	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
	2 x 2 = ===============================														
•												-			
# REVISED 10.27.2011		TC	) T/	\L	N-K	INE	) C	ON	TRI	BU'	ΓIO	NS	TH	IS PAGE	_



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NAME OF CANDIDATE OR ELECTED OFFICIAL:

FORM REVISED 10.27.2011

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

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. COMPLETE THIS BLOCK IF RECEIPT FORM RECEIPT SOURCE IS A LOAN OF RECEIPT (CHECK ONE) **ADDRESS** SOURCE OF RECEIPT DATE AMOUNT (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) **GUARANTORS** OF RECEIVED STREET OR P.O. BOX, Individual Business (mo./day/yr.) RECEIPT Lending Institution PAC [FCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) Other PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] Chris Woods 2000 SouTh Bidge Beuce Pethwin 3/19

20210420000196390 4/5 \$.00

TOTAL RECEIPTS THIS PAGE

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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: (1)115 NOVELS FOR MINE



**PURPOSE OF EXPENDITURE** (CHECK ONE) **AMOUNT ADDRESS** DATE OF PERSON/GROUP/BUSINESS OTHER (ADDRESS SHOULD INCLUDE EXPENDITURE RECEIVING EXPENDITURE OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) EXPENDITURE GIVE (INCLUDE FULL NAME) BRIEF **EXPLANATION** 500, SeciA MATCUS D'elt) PATEILA BELL ADEM 1,250: Merrow Androws 3/23/2 samone Nowoll 300. 200. TOTAL EXPENDITURES THIS PAGE \$ 23,020.81 FORM REVISED 10.27.2011

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



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