

ALABAMA FAIR CAMPAIGN PRACTICES ACT
CANDIDATE / ELECTED OFFICIAL
PRE-ELECTION REPORT
SUMMARY FORM 1



20100528000169760 1/5 \$.00
 Shelby Cnty Judge of Probate, AL
 05/28/2010 10:29:23 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Aubrey S. Miller		Political Party/Ballot Affiliation REPUBLICAN	
Office Sought or Held (include district or circuit number, if applicable) SHELBY COUNTY Board of Education			
Address ☐ Check box if reporting new address P.O. BOX 380421			
City Birmingham	State AL	ZIP Code 35238	Telephone Number 205-515-3939

Type of Election
(check one)

- ☒ Primary Election
☐ Primary Runoff
☐ General Election
☐ Special Election
☐ Municipal Election
☐ Municipal Runoff Election

Election Date

JUNE 1, 2010

Type of Report (check one)

- ☒ 10-5 Day Pre-Election Report
☐ 50-45 Day Pre-Election Report
☐ Amended Pre-Election Report

CHECK ONE OF THE ABOVE BOXES TO INDICATE WHICH TYPE OF REPORT IS BEING AMENDED

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	(349.68) 0
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	50.00
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	50.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	0
3b	Non-itemized in-kind contributions	3b	0
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0
Receipts from Other Sources			
4	Total receipts from other sources (total from Form 4)	4	0
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	3379.81
5b	Non-itemized expenditures	5b	-
5c	Total expenditures (add lines 5a and 5b)	5c	3379.81
6	Ending balance (add lines 1, 2c, & 4; subtract line 5c)	6	(3,679.49)

Sworn to and subscribed before me this 27th day of May of the year 2010. My commission expires the 25th day of August of the year 2013.

Naomi Absker

Signature of Notary Public

Naomi Absker

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.

Aubrey S. Miller

Signature of Candidate or Elected Official

5/27/10

Date

FORM 2: CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

PAGE _____ OF _____

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		
PEGGY HILL								
PEGGY HILL	114 Arlington St. Columbia, AL 35051		✓				5/21/10	50.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								50.00

FORM REVISED 10.29.99

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05/28/2010 10:29:23 AM FILED/CERT

FORM 3: IN-KIND CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

PAGE OF

The FCPA requires that those contributions greater than \$100 be itemized. DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.

[illegible]

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Shelby Cnty Judge of Probate, AL
05/28/2010 10:29:23 AM FILED/CERT

LOANS/INTEREST/OTHER SOURCES OF INCOME TO CANDIDATE OR ELECTED OFFICIAL

PAGE OF

SOURCE OF RECEIPT
(INCLUDE FULL NAME)

ADDRESS
(ADDRESS SHOULD INCLUDE
STREET OR P.O. BOX,
CITY, STATE, AND ZIP)

**COMPLETE THIS BLOCK IF RECEIPT
IS A LOAN**

GUARANTORS

[FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]

**RECEIPT SOURCE
(CHECK ONE)**

1

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1/d

1

1

1

1

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1

10

1

10

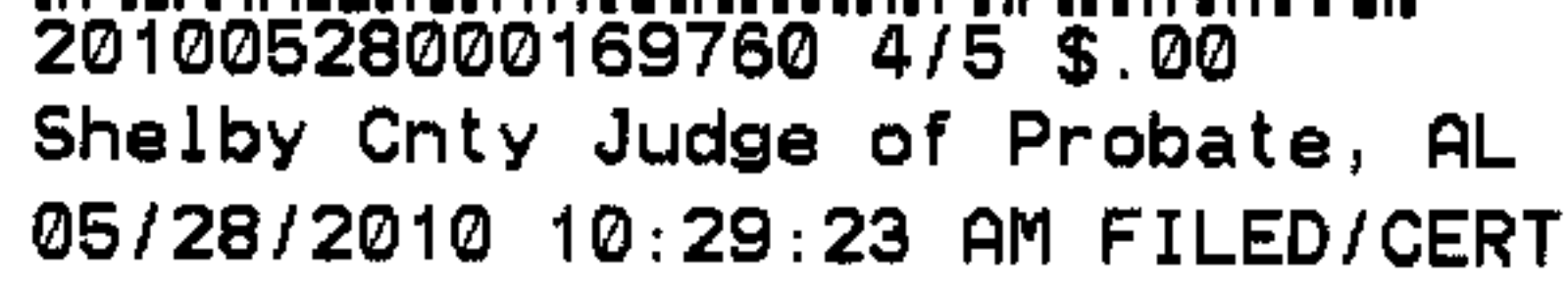
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1

TOTAL RECEIPTS THIS PAGE

FORM REVISED 10.29.99



BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTIONS TO OTHER CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES

PAGE _____ OF _____

The FCPA requires that expenditures over \$100 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 (mo./day/yr.)	AMOUNT OF EXPENDITURE
				Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
Office Max		Suite 101 B'ham, AL 35242			✓									4/08/10	9.90
Fed Ex office		117 Resource Center B'ham, AL 35242			✓									4/19/10	14.80
Fed Ex office		" " "			✓									4/20/10	162.40
PETE'S		1903 Hoover Court Hoover, AL 35226			✓										3,192.71
FORM REVISED 10.29.99		TOTAL EXPENDITURES THIS PAGE												3,879.81	



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