

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



20130204000046070 1/16 \$ .00  
Shelby Cnty Judge of Probate AL  
02/04/2013 10:09:25 AM FILED/CERT

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JAN 31 2013

James W. Fuhrmeister  
Judge of Probate

Please Print in Ink or Type.

|                                                                                                     |                  |                                                   |                                |
|-----------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------|--------------------------------|
| Name of Candidate or Elected Official<br>Hicks, Robert Birrell                                      |                  | Political Party/Ballot Affiliation<br>Independent |                                |
| Office Sought or Held (include district or circuit number, if applicable)<br>Alabaster City Council |                  |                                                   |                                |
| Address <input type="checkbox"/> Check box if reporting new address<br>2117 King Charles Circle     |                  |                                                   |                                |
| City<br>Alabaster                                                                                   | State<br>Alabama | ZIP Code<br>35007                                 | Telephone Number<br>[REDACTED] |

Type of Report (check one)

- ☒ Annual Report for Year 2012  
☐ Termination Report  
☐ Amended Annual Report for Year \_\_\_\_\_

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

|                                    |                                                              |           |              |
|------------------------------------|--------------------------------------------------------------|-----------|--------------|
| <b>1</b>                           | Beginning balance (ending balance from previous filing)      | <b>1</b>  | (\$1,543.39) |
| <b>Cash Contributions</b>          |                                                              |           |              |
| <b>2a</b>                          | Itemized cash contributions (total from Form 2)              | <b>2a</b> |              |
| <b>2b</b>                          | Non-itemized cash contributions                              | <b>2b</b> |              |
| <b>2c</b>                          | Total cash contributions (add lines 2a and 2b)               | <b>2c</b> | \$0.00       |
| <b>In-Kind Contributions</b>       |                                                              |           |              |
| <b>3a</b>                          | Itemized in-kind contributions (total from Form 3)           | <b>3a</b> |              |
| <b>3b</b>                          | Non-itemized in-kind contributions                           | <b>3b</b> |              |
| <b>3c</b>                          | Total in-kind contributions (add lines 3a and 3b)            | <b>3c</b> | \$0.00       |
| <b>Receipts from Other Sources</b> |                                                              |           |              |
| <b>4</b>                           | Total receipts from other sources (total from Form 4)        | <b>4</b>  | \$0.00       |
| <b>Expenditures</b>                |                                                              |           |              |
| <b>5a</b>                          | Itemized expenditures (total from Form 5)                    | <b>5a</b> | \$283.80     |
| <b>5b</b>                          | Non-itemized expenditures                                    | <b>5b</b> |              |
| <b>5c</b>                          | Total expenditures (add lines 5a and 5b)                     | <b>5c</b> | \$283.80     |
| <b>6</b>                           | Ending balance (add lines 1, 2c, & 4, then subtract line 5c) | <b>6</b>  | (\$1,827.19) |

**SECTION II - Summary of activity for entire reporting year - January 1st through December 31st**

|           |                                                              |           |              |
|-----------|--------------------------------------------------------------|-----------|--------------|
| <b>7</b>  | Beginning balance (as of January 1 of reporting year)        | <b>7</b>  | (\$1,543.39) |
| <b>8</b>  | Total cash contributions for year                            | <b>8</b>  |              |
| <b>9</b>  | Total in-kind contributions for year                         | <b>9</b>  |              |
| <b>10</b> | Total receipts from other sources for year                   | <b>10</b> |              |
| <b>11</b> | Total expenditures for year                                  | <b>11</b> | \$283.80     |
| <b>12</b> | Ending balance (add lines 7, 8, & 10, then subtract line 11) | <b>12</b> | (\$1,827.19) |
| <b>13</b> | Total campaign debt (total debt owed as of December 31)      | <b>13</b> |              |

Sworn to and subscribed before me this 31<sup>st</sup> day of Jan of the year 2013. My commission expires the 27<sup>th</sup> day of Oct of the year 2013.

Signature of Notary Public

Kristen T. Arnold  
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.

Signature of Candidate or Elected Official

01-31-13  
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<br>(INCLUDE FULL NAME)        | ADDRESS<br><small>(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)</small> | SOURCE OF CONTRIBUTION<br>(CHECK ONE) |            |     |       |          | DATE CONTRIBUTION RECEIVED<br>(mo./day/yr.) | AMOUNT OF CONTRIBUTION |
|-------------------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------|------------|-----|-------|----------|---------------------------------------------|------------------------|
|                                           |                                                                                             | Business or Corporation               | Individual | PAC | Other | Returned |                                             |                        |
|                                           | 2117 King Charles Circle                                                                    |                                       |            |     |       |          |                                             |                        |
|                                           |                                                                                             |                                       |            |     |       |          |                                             |                        |
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| <b>TOTAL CASH CONTRIBUTIONS THIS PAGE</b> |                                                                                             |                                       |            |     |       |          |                                             | \$0.00                 |

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Shelby Cnty Judge of Probate, AL  
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**FORM 2: CONTRIBUTIONS** RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Hicks, Robert Birrell

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<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | SOURCE<br>OF CONTRIBUTION<br>(CHECK ONE) |            |     |       |          | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
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|                                    |                                                                                 | Business or<br>Corporation               | Individual | PAC | Other | Returned |                                                   |                              |
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# FORM 2: CONTRIBUTIONS

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<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | SOURCE<br>OF CONTRIBUTION<br>(CHECK ONE) |            |     |       |          | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
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|                                    |                                                                                 | Business or<br>Corporation               | Individual | PAC | Other | Returned |                                                   |                              |
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TOTAL CASH CONTRIBUTIONS THIS PAGE

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Shelby Cnty Judge of Probate, AL  
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**FORM 2: CONTRIBUTIONS** RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

| NAME OF CANDIDATE / ELECTED OFFICIAL: | Hicks, Robert Birrell |
|---------------------------------------|-----------------------|
| NAME OF CANDIDATE / 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<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | SOURCE<br>OF CONTRIBUTION<br>(CHECK ONE) |            |     |       |          | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
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|                                    |                                                                                 | Business or<br>Corporation               | Individual | PAC | Other | Returned |                                                   |                              |
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| TOTAL CASH CONTRIBUTIONS THIS PAGE |                                                                                 |                                          |            |     |       |          |                                                   | \$0.00                       |

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**FORM 2: CONTRIBUTIONS** RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

PAGE OF

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| CONTRIBUTOR<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | SOURCE<br>OF CONTRIBUTION<br>(CHECK ONE) |            |     |       |          | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
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|                                    |                                                                                 | Business or<br>Corporation               | Individual | PAC | Other | Returned |                                                   |                              |
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Shelby Cnty Judge of Probate

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**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.

| CONTRIBUTOR<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | NATURE OF CONTRIBUTION<br>(CHECK ONE) |             |                         |           |      |      |                |       |                          |            | SOURCE<br>(CHECK ONE) |       |  |  | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
|------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|-----------|------|------|----------------|-------|--------------------------|------------|-----------------------|-------|--|--|---------------------------------------------------|------------------------------|
|                                    |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Equipment | Food | Rent | Transportation | Other | Business/<br>Corporation | Individual | PAC                   | Other |  |  |                                                   |                              |
|                                    |                                                                                 |                                       |             |                         |           |      |      |                |       |                          |            |                       |       |  |  |                                                   |                              |
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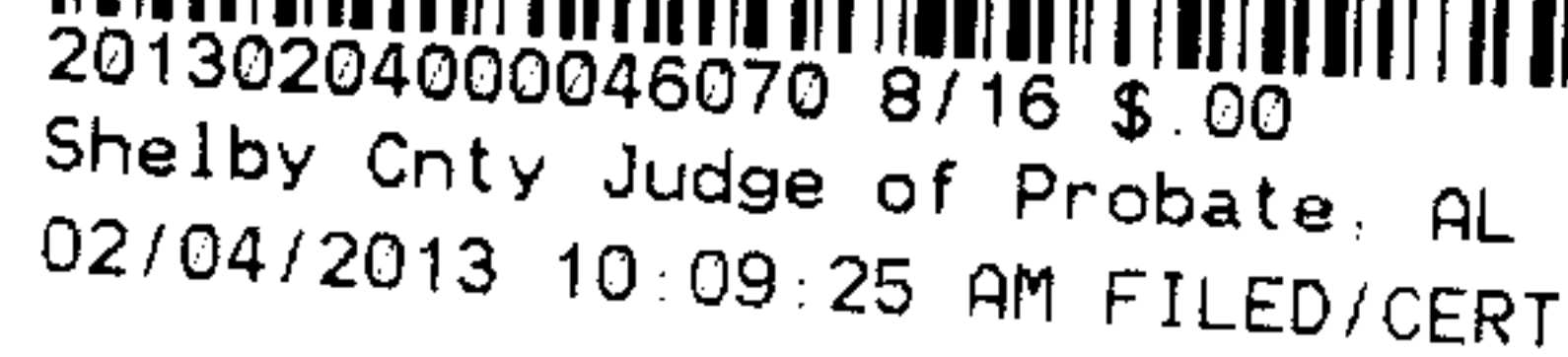
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**FORM 3: IN-KIND CONTRIBUTIONS** RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

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.

| CONTRIBUTOR<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | NATURE OF CONTRIBUTION<br>(CHECK ONE) |             |                         |           |      |      |                |       |                          |            | SOURCE<br>(CHECK ONE) |       |  |  | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
|------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|-----------|------|------|----------------|-------|--------------------------|------------|-----------------------|-------|--|--|---------------------------------------------------|------------------------------|
|                                    |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Equipment | Food | Rent | Transportation | Other | Business/<br>Corporation | Individual | PAC                   | Other |  |  |                                                   |                              |
|                                    |                                                                                 |                                       |             |                         |           |      |      |                |       |                          |            |                       |       |  |  |                                                   |                              |
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| FORM REVISED 10.29.99              |                                                                                 | TOTAL IN-KIND CONTRIBUTIONS THIS PAGE |             |                         |           |      |      |                |       |                          |            |                       |       |  |  | \$0.00                                            |                              |



# FORM 4: RECEIPTS FROM OTHER SOURCES

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

NAME OF CANDIDATE / ELECTED OFFICIAL: Hicks, Robert Birrell

PAGE OF

The FCPA requires that those contributions greater than \$100 be itemized. **DO NOT LIST** cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

| SOURCE OF RECEIPT<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | FORM OF RECEIPT |      |       | COMPLETE THIS BLOCK IF RECEIPT IS A LOAN<br><br>GUARANTORS<br>[FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEERING LOAN] | RECEIPT SOURCE (CHECK ONE) |     |            |          |       | DATE RECEIVED<br>(mo./day/yr.) | AMOUNT OF RECEIPT |        |
|------------------------------------------|------------------------------------------------------------------------------|-----------------|------|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-----|------------|----------|-------|--------------------------------|-------------------|--------|
|                                          |                                                                              | Interest        | Loan | Other |                                                                                                                                                               | Lending Institution        | PAC | Individual | Business | Other |                                |                   |        |
|                                          |                                                                              |                 |      |       |                                                                                                                                                               |                            |     |            |          |       |                                |                   |        |
|                                          |                                                                              |                 |      |       |                                                                                                                                                               |                            |     |            |          |       |                                |                   |        |
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Shelby Cnty Judge of Probate

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ALABAMA FAIR CAMPAIGN PRACTICES ACT

FORM 5: EXPENDITURES

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

NAME OF CANDIDATE / ELECTED OFFICIAL: Hicks, Robert Birrell

PAGE OF

The FCPA requires that expenditures over \$100 be itemized.

| PERSON/GROUP/BUSINESS<br>RECEIVING EXPENDITURE<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PURPOSE OF EXPENDITURE<br>(CHECK ONE) |             |                         |              |      |             |                   |         |                |                                       | DATE OF<br>EXPENDITURE<br>(mo./day/yr.) | AMOUNT<br>OF<br>EXPENDITURE |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|--------------|------|-------------|-------------------|---------|----------------|---------------------------------------|-----------------------------------------|-----------------------------|
|                                                                       |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Contribution | Food | Fundraising | Loan<br>Repayment | Lodging | Transportation | OTHER<br>GIVE<br>BRIEF<br>EXPLANATION |                                         |                             |
| Southern Nameplate and Graphics                                       | 1510 Fourth Avenue North<br>Bessemer, Alabama 35020                             |                                       | ✓           |                         |              |      |             |                   |         |                |                                       | 7/18/2012                               | \$141.90                    |
| Southern Nameplate and Graphics                                       | 1510 Fourth Avenue North<br>Bessemer, Alabama 35020                             |                                       | ✓           |                         |              |      |             |                   |         |                |                                       | 7/25/2012                               | \$141.90                    |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
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|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
| TOTAL EXPENDITURES THIS PAGE                                          |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       | \$283.80                                |                             |

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Shelby Cnty Judge of Probate, AL  
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**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<br>RECEIVING EXPENDITURE<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PURPOSE OF EXPENDITURE<br>(CHECK ONE) |             |                         |              |      |             |      |           |         |                | DATE OF<br>EXPENDITURE<br>(mo./day/yr.) | AMOUNT<br>OF<br>EXPENDITURE |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|--------------|------|-------------|------|-----------|---------|----------------|-----------------------------------------|-----------------------------|
|                                                                       |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Contribution | Food | Fundraising | Loan | Repayment | Lodging | Transportation |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                |                                         |                             |
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|                                                                       |                                                                                 |                                       |             |                         |              |      |             |      |           |         |                |                                         |                             |
|                                                                       |                                                                                 | TOTAL EXPENDITURES THIS PAGE          |             |                         |              |      |             |      |           |         |                | \$0.00                                  |                             |

20130204000046070 11/16 \$.00  
Shelby Cnty Judge of Probate, AL  
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**BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTIONS TO OTHER CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES**

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| PERSON/GROUP/BUSINESS<br>RECEIVING EXPENDITURE<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PURPOSE OF EXPENDITURE<br>(CHECK ONE) |             |                         |              |      |             |                   |         |                |                                       | DATE OF<br>EXPENDITURE<br>(mo./day/yr.) | AMOUNT<br>OF<br>EXPENDITURE |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|--------------|------|-------------|-------------------|---------|----------------|---------------------------------------|-----------------------------------------|-----------------------------|
|                                                                       |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Contribution | Food | Fundraising | Loan<br>Repayment | Lodging | Transportation | OTHER<br>GIVE<br>BRIEF<br>EXPLANATION |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
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|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
| TOTAL EXPENDITURES THIS PAGE                                          |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       | \$0.00                                  |                             |

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<br>RECEIVING EXPENDITURE<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PURPOSE OF EXPENDITURE<br>(CHECK ONE) |             |                         |              |      |             |                   |         |                |                                       | DATE OF<br>EXPENDITURE<br>(mo./day/yr.) | AMOUNT<br>OF<br>EXPENDITURE |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|--------------|------|-------------|-------------------|---------|----------------|---------------------------------------|-----------------------------------------|-----------------------------|
|                                                                       |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Contribution | Food | Fundraising | Loan<br>Repayment | Lodging | Transportation | OTHER<br>GIVE<br>BRIEF<br>EXPLANATION |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
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| TOTAL EXPENDITURES THIS PAGE                                          |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       | \$0.00                                  |                             |

FORM REVISED 10.29.99

20130204000046070 13/16 \$.00  
Shelby Cnty Judge of Probate, AL  
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**ALABAMA FAIR CAMPAIGN PRACTICES ACT**  
**FORM 5: EXPENDITURES**

**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<br>RECEIVING EXPENDITURE<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PURPOSE OF EXPENDITURE<br>(CHECK ONE) |             |                         |              |      |             |                   |         |                |                                       | DATE OF<br>EXPENDITURE<br>(mo./day/yr.) | AMOUNT<br>OF<br>EXPENDITURE |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|--------------|------|-------------|-------------------|---------|----------------|---------------------------------------|-----------------------------------------|-----------------------------|
|                                                                       |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Contribution | Food | Fundraising | Loan<br>Repayment | Lodging | Transportation | OTHER<br>GIVE<br>BRIEF<br>EXPLANATION |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
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|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
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|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
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|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |                                         |                             |
|                                                                       |                                                                                 | TOTAL EXPENDITURES THIS PAGE          |             |                         |              |      |             |                   |         |                |                                       | \$0.00                                  |                             |



20130204000046070 14/16 \$.00  
Shelby Cnty Judge of Probate, AL  
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FORM REVISED 10.29.99



**Southern Nameplate & Graphics**  
 1510 4th Ave North  
 Bessemer, AL 35020  
 205.426.0181

## SNG Signs

1510 4th Avenue North  
 Bessemer, AL 35020  
 Ph: (205) 426- 0181  
 FAX: (205) 426- 0182  
 Email: sales@sngsigns.com  
 Web: www.sngsigns.com



**Invoice #: 10499**

Order Created: 7/18/2012 12:10:15PM

Sale Date: 7/25/2012 2:24:04PM

Page 1 of 2

Sale Date: 7/25/2012 2:24:04PM

**Billed To:** Bob Hicks Campaign  
**Contact:** Bob Hicks  
**Address:** 2117 King Charles Circle  
 Alabaster, AL 35007

**Created Date:** 7/18/2012 12:10:15PM  
**Salesperson:** House Account  
**Email:** N/A  
**Phone:** N/A  
**Fax:** N/A

**Email:** wforded74@aol.com  
**Office Phone:** (205) 901-6066  
**Office Fax:** (205) -

**Description:** 18"x24" Campaign Yard Signs

|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Quantity | Unit Price | Subtotal |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------|----------|
| 1 | <b>Product:</b> Screenprinting Coro 4 Mill Only<br><b>Description:</b> Screenprint Signs (Clone)<br>VERTICAL<br><ul style="list-style-type: none"> <li>• 50- 18 in x 24 in Double Sided Screen Print(s) made from Coro - 4 mil White 24 x 18 stock material</li> <li>• 1800 UV Screen Ink- Fire Red Background with White Lettering,</li> <li>• Text: COPY AS FOLLOWS:<br/>             Elect bob<br/>             Hicks<br/>             City Council!<br/>             (Disclaimer)</li> <li>• Custom Finishing</li> </ul> | 50.00    | \$5.16     | \$258.00 |



20130204000046070 15/16 \$.00  
 Shelby Cnty Judge of Probate, AL  
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Print Date: 7/25/2012

Tax ID:



Southern Nameplate & Graphics  
1510 4th Ave North  
Bessemer, AL 35020  
205.426.0181

## SNG Signs

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Ph: (205) 426- 0181  
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Page 2 of 2

### Payments for Order

| Date      | Method | Tracking Number | Amount |
|-----------|--------|-----------------|--------|
| 7/18/2012 | Visa   |                 | 141.90 |
| 7/25/2012 | Visa   |                 | 141.90 |

Order Subtotal: ~~\$258.00~~

Total Taxes: \$25.80

Total: \$283.80

Total Payments: \$283.80

Order Balance: \$0.00

Payment Terms: Payment Due Upon Receipt

Date/Time Completed: \_\_\_\_\_

Technician: \_\_\_\_\_

Follow Up: ☐ YES ☐ NO

Reason: \_\_\_\_\_

Accepted: \_\_\_\_\_

Date: \_\_\_\_\_

20130204000046070 16/16 \$ .00  
Shelby Cnty Judge of Probate, AL  
02/04/2013 10:09:25 AM FILED/CERT

x

If paying by credit card: (Cardholder's Signature).  
I agree to pay the above total amount according to  
the card issuer agreement.

Date

Print Date: 7/25/2012

Tax ID: