

## FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA Candidate & Elected Offic Campaign Finance Report SUMMARY FORM 1 Candidate & Elected Official



	Ple	ase Print in Ink	or Type.			2014 02:06:54 PM FILE	)/CERT		
Name of Candidate or Elected Official Political Par					Ballot Affiliat		•	k one)  Amended Monthly	
Don Armstrong			Republican		L	✓ Monthly			
Office Sought or Held (include district or circuit number, if applicable)						Wee		Amended Weekly	
	Shelby County Property Tax Commissioner					For Monthly R  Month in which	•	October	
Address Check box if reporting new address						report is filed.			
3066 Hwy 55						For Weekly Re Date of Friday	-		
1				1		week in which t			
V VII SOTI VIII C			200 000		report is filed.  Total Number	of		<u> </u>	
						Pages in Repo		1	
S	ummary of activity since	e last filed	report						
1 Beginning balance (ending balance from previous filing)						······································	1	\$6.68	8
	Cash Contributions					·.	<b>1</b>		
2a	2a Itemized cash contributions (total from Form 2)				2a	\$0.00			
2b	· · · · · · · · · · · · · · · · · · ·				2b	\$0.00			
<b>—</b>	2c Total cash contributions (add lines 2a and 2b)					······································	2c	\$0.00	
ļ	In-Kind Contributions			<u> </u>					$\exists$
3a	Itemized in-kind contributions (total from Form 3)				3a	\$0.00			
T 41	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					<b></b>		J		
4a	Itemized Receipts from Other Sources (total from Form 4)				4a	\$0.00			
4b	Non-itemized Receipts from Other Sources				4b	\$0.00			
4c Total receipts from other sources (add lines 4a and 4b)					<b></b>		4c	\$0.00	0
Expenditures							<b></b>		
5a	Itemized expenditures (to	tal from Fo	rm 5)	······································	5a	\$0.00			
5b	Non-itemized expenditure	<b>S</b>		·	5b	\$0.00	<b>d</b>		
5c	Total expenditures (add lin	nes 5a and	5b)				5c	\$0.0	0
6	Ending balance (add lines	1, 2c, & 4c,	then subtra	act line 5c)			6	\$6.68	8
Ca	ndidates for State Office: Fi	le this report	with the Off	ice of the Se	ecretary c	of State.			
	ndidates for County or Muni	•					ty in w	hich the office is sough	t.
Asre	equired by the Alabama Fair Car	npaign Practi	ces Act, I her	eby Swo	rn to and	subscribed before me	this	3rd day of	
swear or affirm to the best of my knowledge and belief that the Nov					vember	of the year		. My commission expire	) C
attached report(s) and the information contained herein are true and correct and that this information is a full and complete					9th	day of November		2016	;3
statement of all contributions, expenditures, and other required						day of^	of th	he year	
information during the applicable period of time.					مرور	orah A. J	)m	th	1
				ature of No	tary Public			!	
Signature of Candidate or Elected Official Date				Deborah	A. Smith			ı	

Print Notary's Name