

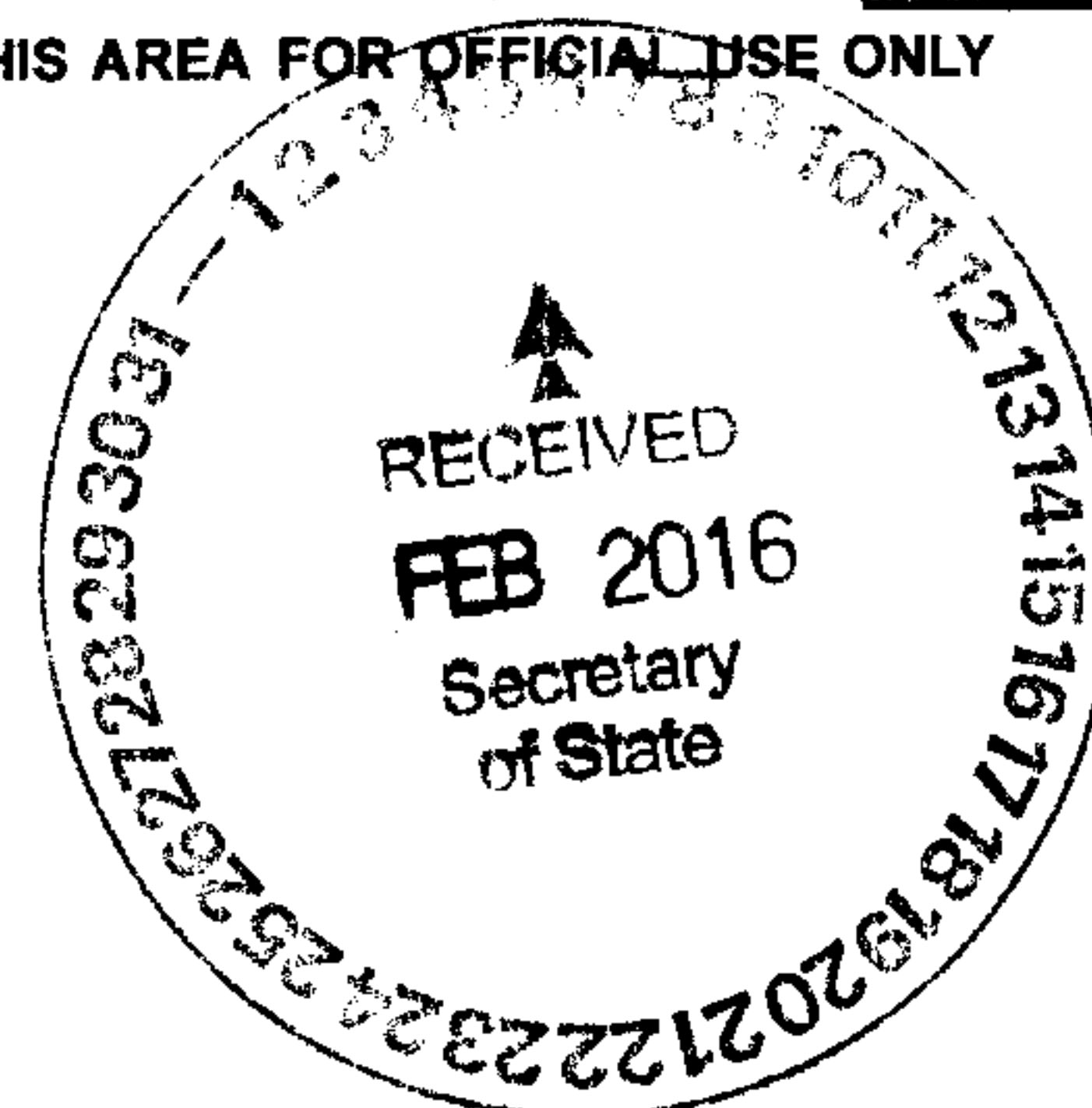
MONTHLY &amp; WEEKLY

FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

MAR 02 2016

James W. Fuhrmeister  
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Tony Picklesimer</i>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <i>City Council</i>			
Address <input type="checkbox"/> Check box if reporting new address <i>108 Lake Chelsea Drive</i>			
City <i>Chelsea</i>	State <i>AL</i>	ZIP Code <i>35043</i>	Telephone Number <i>[REDACTED]</i>

Type of Report (check one)

- ☒ Monthly      ☐ Amended Monthly  
☐ Weekly      ☐ Amended Weekly

For Monthly Reports  
Month in which the report is filed.For Weekly Reports  
Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		1 <i>3308.98</i>
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a	
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	<i>0</i>
<b>In-Kind Contributions</b>			
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)	3c	
<b>Receipts from Other Sources</b>			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<i>0</i>
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a	<i>375.96</i>
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	<i>375.96</i>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<i>2933.02</i>

Candidates for State Office: File this report with the Office of the Secretary of State.

Candidates for County or Municipal Office: File this report with the Judge of Probate of the county in which the office is sought.

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.

*Tony Picklesimer* *2-2-16*  
 Signature of Candidate or Elected Official      Date

Sworn to and subscribed before me this *22<sup>nd</sup>* day of *FEB* of the year *2016*. My commission expires the *22<sup>nd</sup>* day of *APRIL* of the year *2018*.

*Jan Wallace*  
 Signature of Notary Public

*JAN WALLACE*  
 Print Notary's Name





# FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: \_\_\_\_\_

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient 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	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation			OTHER GIVE BRIEF EXPLANATION
Chase Card Services	Po Box 94014 Prattville, AL		X									1-27/16	375.96
TOTAL EXPENDITURES THIS PAGE													

20160302000067130 2/2 \$.00  
Shelby Cnty Judge of Probate, AL  
03/02/2016 02:38:49 PM FILED/CERT