STATE OF ALABAMA

Signature of Candidate or Elected Official

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



		20160329000100250 Shelby Cnty Judge	of Probate: AL	
	Please Print in Ink or Type.	03/29/2016 11:44:	08 AM FILED/CERT	
;	ne of Candidate or Elected Official Political Paral Ce Sought or Held (include district or circuit number, if applicable)	arty/Ballot Affiliation	Type of Report (checking) Monthly Weekly	ck one) Character Amended Monthly Character Amended Weekly
Ado	Shelby County Commission #	Republica	For Monthly Reports Month in which the report is filed.	5
	225 Summer Stook Lane		For Weekly Reports	
City	Alasaster Alasaster Alasaster Alasaster	Number	Date of Friday in the week in which the report is filed.	3/25/2016
			Total Number of Pages in Report	5
S	ummary of activity since last filed report			
1	Beginning balance (ending balance from previous filing		1	556210
	Cash Contributions		<u>t</u>	
2a	Itemized cash contributions (total from Form 2)	2a \$ 50	0.00	
	Non-itemized cash contributions	2b 3 > 3	. 00	
2c	Total cash contributions (add lines 2a and 2b)		2c	\$ 575.00
	In-Kind Contributions		• <u> </u>	
За	Itemized in-kind contributions (total from Form 3)	3a	5_	
	Non-itemized in-kind contributions	3b	<u></u>	
	Total in-kind contributions (add lines 3a and 3b)	3c	-	
	Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form	4) 4a -	-	
	Non-itemized Receipts from Other Sources	4b _<	- 	
	Total receipts from other sources (add lines 4a and 4b)		4c	0
	Expenditures		<u> </u>	
5a	Itemized expenditures (total from Form 5)	5a	7	
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)		5c	0
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5	5c)	6	1/37,10
	ndidates for State Office: File this report with the Office of the ndidates for County or Municipal Office: File this report with	the Judge of Prob	ate of the county in v	
swe atta true state	ear or affirm to the best of my knowledge and belief that the ched report(s) and the information contained herein are	lasch of the	4	day of My commission expires the year

Signature of Notary Public

MPAIGN PRACTICES ACT CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

ontributions received Яd candidate or elected official

ANDIDATE OR ELECTED OFFICIAL: utions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. **DO NOT LIST** in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings. 1919 11/1/au

When total contribu



\$500.00	IIS PAGE		SNO		RIBL	TOTAL CASH CONTI	FORM REVISED 9.2.2011
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							Probate;
							ALCERT
		· · · · · · · · · · · · · · · · · · ·					
8500 a	3/23//6					1223 South Cove Lane Birmingham AC 35216	m. Alton Vother
CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Returned	Other	PAC	Corporation Individual	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) sine sine sine sine sine sine sine sine	(INCLUDE FULL NAME)
		NOI	CE BUT	NOUR ECK	OF CC		

IPAIGN TICES ACT CAMPAIGN FINANCE REPOR 꾸 FOR POLITICAL ACTION COMMIT

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Shelby Cnty Judge of Probate, AL 03/29/2016 11:44:08 AM FILED/CERT When total contributions from a single ACTION CO RET DO NOT LIST cash or in-kind contributions on this form. MMITTEE: ADDRESS SHOULD INCLUDE source STATE, AND ZIP) exceed \$100.00, Administrative the FCPA requires NATUR Advertising Consultants/ П Polling (CHECK ONE) Use Equipment Forms Food <u>a</u> Rent contributions and Transportation Other Business/ those from Corporation SOURCE (CHECK ONE) Individual that listings. PAC source Other ţ DATE RECEIVED (mo./day/yr.) be itemi ized.

FORM

201

TOTAL

N-KIND

CONTRIBUTIONS

SIHT

PAGE



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MPAIGN PRA CTICES ACT CAMPAIGN FINANCE REPO Ž T FOR POLITICAL ACTION COMMITTEE

Recei 5 ron D S ans, interest, and other sources income

ᄋᆍ POL ACTION COMMITTEE:

When total contributions from a single

source

exceed

\$100.00, the FCPA requires

all contributions

from that

source

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be

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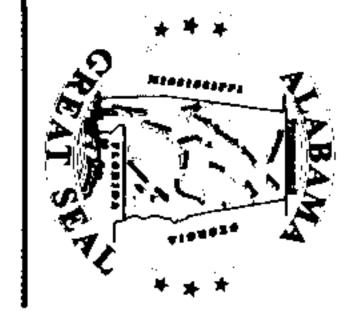
nized.

FORM REVISED SOURCE Shelby Cnty Judge of Probate, AL 03/29/2016 11:44:08 AM FILED/CERT 9.2 2011 RECEIPT LL NAME) (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) DO NOT LIST cash or in-kind contributions on this fo OF RECEIPT Interest Loan Other [FCPA REQUIRES FULL NAME AND COM-PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] COMPLETE m. **GUARANTORS** IS A LOAN Use Forms TOTAL and 3 for those listings. RECEIPT RECEIPTS Lending Institution RECEIPT SOURCE (CHECK ONE) PAC SIHI Individual **Business** PAG Other П (mo./day/yr.) RECEIVED DATE RECEIPT AMOUNT

ALABAMA FAIR CAMPAIGN PRA CTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

Expend itures by political ical action committee

NAME OF POLITICAL ACTION COMMITTEE:



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

FORM REVISED 9.2.2011			Shelby (900010025 Cnty Judg	e of Prob	bate, AL		PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	
								ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	
		A.T. 1 '	<u> </u>					Administrative	
								Advertising	
								Consultants/ Polling	
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EXPEND								Loan Repayment	OF EX
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DIT								Transportation	XPENDITURE ONE)
URES THIS								OTHER GIVE BRIEF EXPLANATION	RE
PAGE								EXPENDITURE (mo./day/yr.)	
								AMOUNT OF EXPENDITURE	