

MONTHLY & WEEKLY

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

Print Form

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED
MAY 31 2016
JENNIS W. FUHRMEISTER
Judge of Probate

Please Print or Type

Name of Candidate or Elected Official Tracie Marcum		Political Party, Ballot Name Republican	
Office, Board, Committee, District, Precinct, or Position Chelsea City Council Place 4			
Address 169 Greenbriar Place			
City Chelsea	State AL	ZIP Code 35043	Telephone Number [REDACTED]

Type of Report (check one)

☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

For Monthly Reports

Month in which the report is filed

May

For Weekly Reports

Date of Friday in the week in which the report is filed

Total Number of Pages in Report

1

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	0
Cash Contributions			
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	0
In-Kind Contributions			
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	
Receipts from Other Sources			
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	0
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	
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 5c)	6	0

Candidates for State Office: Fill this report with the term in which you were elected.

Candidates for County or Municipal Office: Fill this report with the term in which you were elected.

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.

Tracie Marcum 5/31/16
Signature of Candidate or Elected Official
Tracie Marcum
Print Name

Sworn to and subscribed before me this **31st** day of **May** of the year **2016**. My commission expires the **2nd** day of **May** of the year **2020**.
Lisa J. Morgan
Signature of Notary Public
Lisa T. Morgan
Print Name



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Shelby Cnty Judge of Probate, AL
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