Signature of Candidate or Elected Official

Candidate & Elected Official Campaign Finance Repair SUMMARY FORM 1A

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Shelby Cnty Judge of Probate, AL 06/20/2016 03:04:10 PM FILED/CERT Please Print in Ink or Type. Calendar Year Political Party/Ballot Affiliation Name of Candidate or Elected Official covered by this report. Kepublican Office Sought or Held (Include district or circuit number, if applicable) Amended Annual Report Termination Report Address Check box if reporting new address Total Pages in Report Include this page in Telephone Number your count. SECTION I - Summary of activity from last filed report through December 31 of reporting year Beginning balance (ending balance from previous filing) Cash Contributions 2a Itemized cash contributions (total from Form 2) 2b | Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) In-Kind Contributions 3a Itemized in-kind contributions (total from Form 3) 3b Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources 4a | Total itemized receipts from other sources (total from Form 4) 4a Total non-itemized receipts from other sources Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) SECTION II - Summary of activity for entire reporting year - January 1st through December 31st Beginning balance (as of January 1 of reporting year) Total cash contributions for year Total in-kind contributions for year Total receipts from other sources for year Total expenditures for year Ending balance (add lines 7, 8, 2, 10, then selbiract line 11) Total campaign debt (total debt over assi December 8 Sworn to and subscribed before me this _____ As required by the Alabama Fair Campaign Practices Ata A hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and year >016. My commission expires the >3 day of 0cibe of the information contained herein are true and correct and that this information the year 2018 is a full and complete statement of all conflibrations, experior tures, and our er required information during the applicable period of time. ignature of Notary Public

Date

Print Notary's Name