

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20160701000230250 1/3 \$.00
Shelby Cnty Judge of Probate, AL
07/01/2016 02:10:51 PM FILED/CERT

Please Print in Ink or Type.

RECEIVED

JUN 29 2016

James W. Fuhrmeister
Judge of Probate

AMENDED
COPY

Name of Candidate or Elected Official MARK R HAW	Political Party Ballot Affiliation Rep.	Type of Report (check one) ☒ Monthly ☐ Weekly	☒ Amended Monthly ☐ Amended Weekly
Office Sought or Held (include district or precinct number, if applicable) MAYOR		For Monthly Reports Month in which the report is filed JUNE MAY	
Address ☐ Check box if reporting new address 807 ST CHARLES LN		For Weekly Reports Date of Friday in the week in which the report is filed	
City HELENA	State AL	ZIP Code 35080	Telephone Number [REDACTED]
Total Number of Pages in Report			

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	5,016⁹⁶
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	Ø
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	N/A
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	Ø
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	880
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	880
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	4136⁰⁰

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 reportable period of time.

Signature of Candidate or Elected Official

5/31/16

Sworn to and subscribed before me this **31st** day of **May** of the year **2016**. My commission expires the **15th** day of **November** of the year **2016**.

Amanda C Traywick
Signature of Notary Public

Amanda C. Traywick
Print Notary's Name

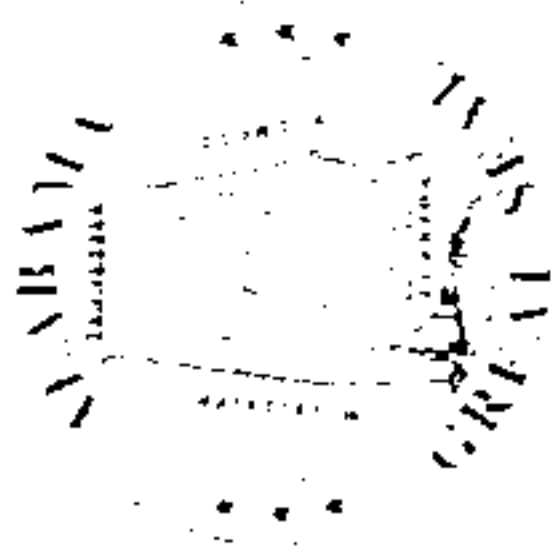
NAME OF CANDIDATE OR ELECTED OFFICIAL: WARRICK 1-24

DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

[illegible]

FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: MARIE R. HARRIS



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
		Advertising	Consultants	Political	Charitable Contribution	Tuition	Travel	Transportation	Telephone	Postage	Printing		
Helena Bellas	Helena, AL	✓			✓							5/6/16	500
Helena Police Expl.	Police, Expl. Golf Tennis City of Helena, AL	✓			✓							5/10/16	200
17143 Chioro ADS	Ave. Hillboro Poly. Helena	✓			✓							5/10/16	180
MARIE R. HARRIS												TOTAL EXPENDITURES THIS PAGE	
MARIE R. HARRIS												880	