FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report Campaign Finance SUMMARY FORM 1

	Shelby	Cnty Judge o	of Probate, AL		
			PM FILED/CERT	ck o	ne)
1	hills Stanil Hardley	Ballot Allillation	Mont Weel	•	Amended Monthly Amended Weekly
Offic	e Sought or Held (include district or circuit number, if applicable)		For Monthly Re		
Add	ress Check box if reporting new address		Month in which	-	
Add	POBOL 828		report is filed.	.	
<u> </u>			For Wookly Re Date of Friday in	•	
City	State ZIP Code Telephone Number 3505	(IDC)	week in which the report is filed.	he	
			Total Number of Pages in Repo		
S	ummary of activity since last filed report				
1	Beginning balance (ending balance from previous filing)			1	<u></u>
	Cash Contributions		•	· · · · · · · · · · · · · · · · · · ·	
2a	Itemized cash contributions (total from Form 2)	2a 22	<u>ශ</u> *		
2b	Non-itemized cash contributions	2b			
2c	Total cash contributions (add lines 2a and 2b)			2c	2200
	n-Kind Contributions		<u>, </u>	ı	
3a	Itemized in-kind contributions (total from Form 3)	3a -			
3b	Non-itemized in-kind contributions	3b —			
3с	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	
	Expenditures	<u></u>			
5a	Itemized expenditures (total from Form 5)	5a	750		
5b	Non-itemized expenditures	5b		······	
5c	Total expenditures (add lines 5a and 5b)			5c	750
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	<u></u>		6	1450
Ca	ndidates for State Office: File this report with the Office of the Se	ecretary of Stat	e.		
Ca	ndidates for County or Municipal Office: File this report with the	Judge of Prot	pate of the count	y in whic	
swe attac true state infor	ar or affirm to the best of my knowledge and belief that the ched report(s) and the information contained herein are and correct and that this information is a full and complete ement of all contributions, expenditures, and other required mation during the applicable period of time.	ly_ of the	Mas	of the	day of ty commission expires year <u>3017</u> .
FORM	REVISED 10 27 2011	Notary's Name	1 V 1 US	<u> </u>	

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FORM REVISED PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE 10.27 Shen Shelby Cnty Judge of Probate, AL 2011 07/14/2016 02:44:12 PM FILED/CERT expenditures ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX. CITY, STATE, AND ZIP) ð single recipient 500 100.00, Mosex. Administrative Advertising Consultants/ Polling Charitable Contribution T requires OTAL URPOSE OF EXPENDITURE (CHECK ONE) Food Fundraising EXPENDITURES Loan expenditures Repayment Lodging Transportation GIVE BRIEF EXPLANATION OTHER that 50 S THS. recipient PAGE EXPENDITURE (mo./day/yr.) 8 itemize EXPENDITURE

0 O tions received by candidate or el 0 ected official

9 CANDIDATE ELECTED OFFICIAL: contributions from that source ਨੋ be itemized.

FORM REVISED (INCLUDE FULL NAME) ومرا \mathbb{C} N 2011 When total contributions from a single source exceed \$100.00, the FCPA requires DO NOT LIST in-kind contributions or loans on this form. Use Formation of the form of the form of the form of the form. Shelby Cnty Judge of Probate, AL 07/14/2016 02:44:12 PM FILED/CERT ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) TOTAL 0 ASH Forms CONTRIBUTIONS Business or Q T Corporation ਹੁੰ SOURCE CONTRIBUTION (CHECK ONE) Individual those listings PAC Other Returned RECEIVED PAGE CONTRIBUTION

OF TE/ELEC FOR REPORT ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINA

officia elected 9 candidate þq O receive Contributions In-Kind (N) FOR

NAME OF CANDIDATE OR ELECTED OFFICIAL:

CONTRIBUTION AMOUNT OF Shelby Cnty Judge of Probate, AL 07/14/2016 02:44:12 PM FILED/CERT itemized RECEIVED PAGE <u>e</u> S 2 source Other SOURCE (CHECK ONE) CONTRIBUTIONS PAC that O Individual from listin Corporation Businessi those ontributions Officer OF CONTRIBUTION (CHECK ONE) for Transportation 4 Rent σ <u>=</u> g IN-KIND Food requires 2 Forms Equipment Polling NATURE Use Consultants/ TOTA **Advertising** form the evilshzinimbA When total contributions from a single source exceed \$100.00 DO NOT LIST cash or loans on this ADDRESS SHOULD INCLUDE STREET OR P.O. BOX. CITY, STATE, AND ZIP) CONTRIBUTOR (INCLUDE FULL NAME) FORM REVISED 10.27.2011



ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIA

and other sour Sources loans, interest, Receipts from Other ジンという

NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source

DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

	DO NOI LIST Cash of in-Kil	kind cont	contributions		on this form. Use Forms 2 and 3 for those	e listings.			
		FO OF RE	FORM	1	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	RECEIPT SOURC	m		
(NCLUDE TULL NAME)	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX. CITY, STATE, AND ZIP)	Interest	Olher		GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending Institution PAC Individual Business	Jedio	DAIE RECEIVED (mo./day/yr.)	RECEIPT
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