



FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA Candidate & Elected Office Campaign Finance Report SUMMARY FORM 1 Candidate & Elected Official

		Shelby Cht 08/01/2016	9 Judge 6: Probate, RE 3 09:07:14 AM FILED/CERT
Please Print in ink or Type.			· (chack ana)
Name of Candidate or Elected Official Town PICK/PSide Col	olitical Party/Ballot A	Mont	thly Amended Monthly
Office Sought of Held (include district or circuit number, if applicable) MAY OK — CLUS Address Check box if reporting new address	Cost	For Monthly Romannia Month in which	eports
	elephone Number	report is filed. For Weekly Re Date of Friday is week in which the	n the
Chelsen Al 35043		report is filed. Total Number of Person in Person	
Summary of activity since last filed report		Pages in Repo	
1 Beginning balance (ending balance from previous	s filing)		15037,64
Cash Contributions			
2a Itemized cash contributions (total from Form 2)	2a	-0-	
2b Non-itemized cash contributions	2b	-0	
2c Total cash contributions (add lines 2a and 2b)			2c -0
In-Kind Contributions			
3a Itemized in-kind contributions (total from Form 3)	3a	4992.02	
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 ar	nd 4b)		4c
Expenditures			
5a Itemized expenditures (total from Form 5)	5a		
5b Non-itemized expenditures	5b		
5c Total expenditures (add lines 5a and 5b)			5c - 111
6 Ending balance (add lines 1, 2c, & 4c, then subtrac	t line 5c)		6 5037.64
Candidates for State Office: File this report with the Office Candidates for County or Municipal Office: File this report			in which the office is sought.
As required by the Alabama Fair Campaign Practices Act, I herebes 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 requires information during the applicable period of time. 237	e $\frac{54}{4}$ e the $\frac{27}{4}$	of the year 2016 Of the year 2016 Notary Public	
Signature of Candidate or Elected Official Date		,	

Print Notary's Name

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

In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

2016	HIS PAGE		SNC		RIBU		Š	Ö	X N D	Z		0		FORM REVISED 10.27.2011
08010002 by Cnty														
Judge Of														
Probate														
, AL														
										·				
				· · · · · · · · · · · · · · · · · · ·				<u> </u>		·	 			
x 0, 2 994	7/0/1						· 		<u> </u>				430 anichigueste Chicago Tic Gobil	Mexitous oc
CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Other	PAC	Corporation Individual	Business/	Other	Transportation	Rent	Food	Polling Equipment	Consultants/	Administrative Advertising	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	
		<u>m</u> ""	CK ONE)	SOUR (CHECK (·	2	I	NTRIB ONE)	Ö 8	RE OF	7	Z	······	
	e to be itemized.	source	that s gs.	listing	oris i	for the	2 4	2 and	S.W.	Fog	Use	orm.	DO NOT LIST cash or loans on this	

PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 5: Expen NAME OF CANDIDATE OR ELE nditures by candidate or elected official

LECTED OFFICIAL:



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

		AGE	URES THIS P	ND T	<u>iu</u>	EXP	A	TOTA					FORM REVISED 10.27.2011
	201608010 Shelby Co						 						
	000268900 nty Judge					 							
	0 3/3 \$.(≥ of Prob					 	<u> </u>	<u></u>					
	00 pate, AL												
								<u> </u>	<u></u>				
P	228.08	7/2//6	that							X		4614 his 35242	Styphes
4	70,00	13/16	Musel							X		Columbiant At 35051	Shewy Court
	AMOUNT OF EXPENDITURE	EXPENDITURE (mo./day/yr.)	OTHER GIVE BRIEF EXPLANATION	Transportation	Repayment Lodging	Fundraising Loan	Fundation	Charitable Contribution	Consultants/ Polling	Advertising	Administrative	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)
-			₹.	:) NDITU	K ONE)	CHECK	₹POS	Ę					