

MONTHLY &amp; WEEKLY

FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

20160801000268900 1/3 \$ .00  
Shelby Cnty Judge of Probate, AL  
08/01/2016 09:07:14 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Tony Picklesimer</i>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <i>MAYOR - Chelsea</i>			
Address <input type="checkbox"/> Check box if reporting new address <i>108 Lake Chelsea Drive</i>			
City <i>Chelsea</i>	State <i>AL</i>	ZIP Code <i>35043</i>	Telephone Number <i>205-221-1234</i>

## Type of Report (check one)

☐ Monthly☐ Amended Monthly☒ Weekly☐ Amended WeeklyFor Monthly Reports  
Month in which the  
report is filed.For Weekly Reports  
Date of Friday in the  
week in which the  
report is filed.Total Number of  
Pages in Report

<i>7/29/16</i>

## Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<i>5037.64</i>
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a	<i>0</i>
2b	Non-itemized cash contributions	2b	<i>0</i>
2c	Total cash contributions (add lines 2a and 2b)	2c	<i>0</i>
<b>In-Kind Contributions</b>			
3a	Itemized in-kind contributions (total from Form 3)	3a	<i>4992.02</i>
3b	Non-itemized in-kind contributions	3b	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	
<b>Receipts from Other Sources</b>			
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	<i>0</i>
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a	
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	<i>0</i>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<i>5037.64</i>

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 applicable period of time.

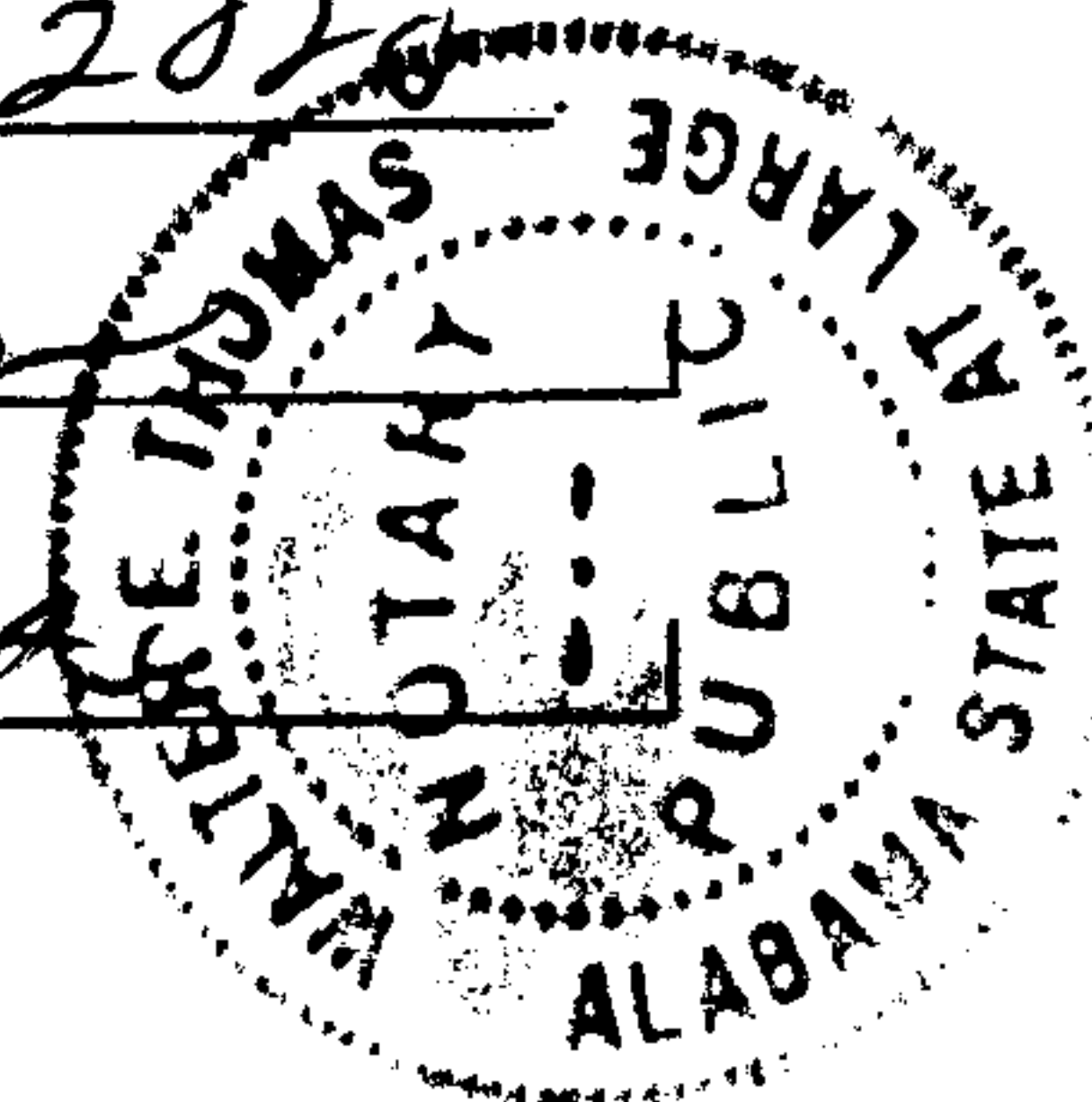
*Tony Picklesimer*  
Signature of Candidate or Elected Official

*2/31/16*  
Date

Sworn to and subscribed before me this *31* day of *July* of the year *2016*. My commission expires the *27<sup>th</sup>* day of *May* of the year *2018*.

*Walter E Thomas*  
Signature of Notary Public

*Walter E Thomas*  
Print Notary's Name





## NAME OF CANDIDATE OR ELECTED OFFICIAL:

**DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.**

FORM REVISED 10 27 2011

TOTAL IN-KIND CONTRIBUTIONS THIS PAGE



20160801000268900 2/3 \$.00  
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## NAME OF CANDIDATE OR ELECTED OFFICIAL:

**PURPOSE OF EXPENDITURE  
(CHECK ONE)**[illegible]