

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20160801000270680 1/5 \$.00
Shelby Cnty Judge of Probate, AL
08/01/2016 02:44:37 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Christopher Cody Summers		Political Party/Ballot Affiliation NA	
Office Sought or Held (include district or circuit number, if applicable) Chelsea City Council Place #1			
Address ☐ Check box if reporting new address P.O. Box 102			
City Chelsea	State Alabama	ZIP Code 35043	Telephone Number (205) 968-1111

Type of Report (check one)

- ☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

For Monthly Reports

Month in which the report is filed.

July 2016

For Weekly Reports

Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	494.09
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	0	
3b	Non-itemized in-kind contributions	3b	0	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	0	
4b	Non-itemized Receipts from Other Sources	4b	0	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	0	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	\$173.98	
5b	Non-itemized expenditures	5b	0	
5c	Total expenditures (add lines 5a and 5b)	5c	\$173.98	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	\$320.11	

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.

Christopher Cody Summers
Signature of Candidate or Elected Official
8/1/16
Date

Sworn to and subscribed before me this **1st** day of **August** of the year **2016**
NOTARY PUBLIC, STATE OF ALABAMA AT LARGE
MY COMMISSION EXPIRES: March 6, 2017
the **1st** day of **August** 2016, at **Shelby County, Alabama**
BONDED THRU MERCHANTS BONDING CO. (MUTUAL)

Becky C. Landers
Signature of Notary Public
Becky C. Landers
Print Notary's Name

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



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Christopher Cudy Summers

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

[illegible]

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Shelby Cnty Judge of Probate, AL
08/01/2016 02:44:37 PM FILED/CERT

NAME OF CANDIDATE OR ELECTED OFFICIAL: Christopher Cady Sumners

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

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

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)	SOURCE (CHECK ONE)	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Individual		
		Advertising	Other		
		Consultants/ Polling	Other		
		Equipment	Other		
		Food	Other		
		Rent	Other		
		Transportation	Other		
		Business/ Corporation	Other		
		Individual	Other		
		PAC	Other		
		Other	Other		

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FORM REVISED 10.27.2011

TOTAL IN-KIND CONTRIBUTIONS THIS PAGE

0



FORM 4: Receipts from Other Sources loans, interest, and other sources of income

NAME OF CANDIDATE OR ELECTED OFFICIAL:

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

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

[illegible]



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Christopher Cody Summers

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	
		Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation			OTHER GIVE BRIEF EXPLANATION
City of Chebea		X									Qual. fying Fee	7/5/2016	\$ 10 ⁰⁰
Lowe's Home Centers	5291 Hwy 280 Birmingham, AL 35242	X										7/26/16	\$ 163 ⁹⁸