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



Shelby Chty Judge of Probate, AL 08/05/2016 03:56:46 PM FILED/CERT

Please Print in Ink or Type.			
Name of Candidate or Elected Official Political	Party/Ballot Affiliation	Type of Report (check	cone)  Amended Monthly
Face Nix		Monthly Weekly	Amended Weekly
Office Sought or Held (include district or circuit number, if applicable)			<u> </u>
Address Check box if reporting new address	<del></del>	For Monthly Reports  Month in which the	
$  a =   D_{-}  $		report is filed.	
City State ZIP Code Telepho	ne Number	For Weekly Reports  Date of Friday in the	C-r 11
Montevallo Al 37/5	AIR MOINDEL	week in which the report is filed.	8-2-16
TONICUAII) AI JAIJ		Total Number of	
		Pages in Report	
Summary of activity since last filed report			
1 Beginning balance (ending balance from previous filing	ng)	1	0
Cash Contributions			
2a Itemized cash contributions (total from Form 2)	2a 3	00,46	
2b Non-itemized cash contributions	2b		
2c Total cash contributions (add lines 2a and 2b)		2c	320 9
In-Kind Contributions		<del></del>	
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		
Receipts from Other Sources			
4a Itemized Receipts from Other Sources (total from Fore	m 4) 4a		
4b Non-itemized Receipts from Other Sources	4b		
4c Total receipts from other sources (add lines 4a and 4	b)	4c	
Expenditures		<u> </u>	
5a Itemized expenditures (total from Form 5)	5a 3	20.46	
5b Non-itemized expenditures	5b		
5c Total expenditures (add lines 5a and 5b)		5c	320,40
6 Ending balance (add lines 1, 2c, & 4c, then subtract line	e 5c)	6	0
Candidates for State Office: File this report with the Office of t	he Secretary of S	tate.	
Candidates for County or Municipal Office: File this report wi	•		hich the office is sought.
As required by the Alabama Fair Campaign Practices Act, Thereby	Sworn to and sul	oscribed before me this _	5H day of
swear or affirm to the best of my knowledge and belief that the		of the year 21/6	
attached report(s) and the information contained herein are true and correct and that this information is a full and complete	ing Deth	lay of Mark of the	10 year 21 21)
statement of all contributions, expenditures, and other required		ŕ	
information during the applicable period of time.	Les	Preh Lynn	Hritu
	Signature of Notary	Public	. 1
Signature of Candidate or Elected Official Date	Debor	ah LUND F	torton

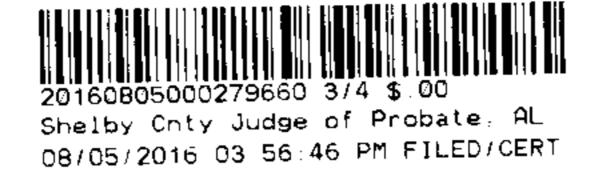
Print Notary's Name

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

# Contributions by candidate or elected official



IAME OF CANDIDATE OR ELECTE	ED OFFICIAL: RUSSE///N/X		
When total contributi DC	ons from a single source exceed \$100.00, the FCPA requires all con NOT LIST in-kind contributions or loans on this form. Use Forms 3	tributions from that source to be itemized. and 4 for those listings.	
(INCLUDE FULL NAME)	ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation Individual PAC Other Received (mo./day/yr.)	CONTRIBUTION
Anna Nix	686 Sale mild Marteiralle 38/13	7-30%	\$ 100,00
8	Meighors Strantend 11 35/15	17-30/6	\$ 100,00
Russell Nix	Remonder	9/-/-8	\$120,4
CERT			
Probate M FILED			
udge of 56 48 P			
80500027. y Cnty Jo /2016 03			
20160 Shelb 08:05			
ORM REVISED 10.27.2011	TOTAL CASH CON	CONTRIBUTIONS THIS PAGE	320, 46



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616 Main Street • Montevallo, Alabama 35115 Phone: 205-665-5818 • Fax: 205-665-0411 typeshopinc@aol.com

Date: August 1, 2016

Sold to: Russell Nix

### **DESCRIPTION OF WORK:**

500 doorhangers, 4/4, 14 ptBCT.....\$294.00

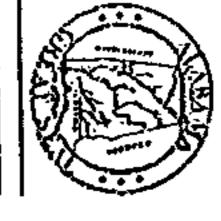
Sales Tax (9%): \$26.46 **TOTAL DUE: \$320.46** 

Thanks! Your Business is Appreciated!

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

## FORM ÇI Expenditures by candida) elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:



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that recipient be

itemiz

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PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) Shelby Chty Judge of Probate 46 PM FILED/CERT 08/05/2016 03:56 When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures 6/6, ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) Administrative **Advertising** Consultants/ Polling Charitable Contribution PURPOSE OF EXPENDITURE (CHECK ONE) TOTAL Food Fundraising EXPENDITURES Loan Repayment Lodging Transportation GIVE BRIEF EXPLANATION OTHER SIHT PAGE DATE OF EXPENDITURE (mo./day/yr.) di m EXPENDITURE AMOUNT OF

FORM REVISED 10.27.2011