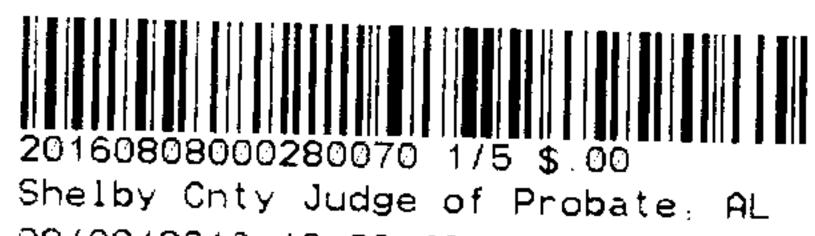


Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



08/08/2016 10:09:49 AM FILED/CERT

Please Print in Ink or Ty	pe.		
Name of Candidate or Elected Official (TREGORY FARNE!	Political Party/Ballot Affiliation	Date Covered by Repor	t 8/1/6
Office Sought or Held (include district or circuit number, if applicable)			8/7//
Address Check box if reporting new address	ans 4		Amended Daily Report
161 STERLING Gate DR		Total Number of Pages in Report	5
	Code Telephone Number		
Alabusten Al 3500	17		
Summary of activity since last filed repo	rt		
1 Beginning balance (ending balance from p		1 /	360,30
Cash Contributions			الما الما الما الما الما الما الما الما
2a Itemized cash contributions (total from For	m 2) 2a 15	000	
2b Non-itemized cash contributions	2b		
2c Total cash contributions (add lines 2a and		2c	1500
In-Kind Contributions			
3a Itemized in-kind contributions (total from Fo	orm 3) 3a -		
3b Non-itemized in-kind contributions	3b 4	<u> </u>	
3c Total in-kind contributions (add lines 3a and			
Receipts from Other Sources			
4a Itemized Receipts from Other Sources (total	al from Form 4) 4a	200	
4b Non-itemized Receipts from Other Sources		<u> </u>	
4c Total receipts from other sources (add lines		4c _	500 00
Expenditures			
5a Itemized expenditures (total from Form 5)	5a 1,69	70.79	
5b Non-itemized expenditures	5b ·	6	
5c Total expenditures (add lines 5a and 5b)		5c /	690.79
6 Ending balance (add lines 1, 2c, & 4c, then s	subtract line 5c)	6	319.51
			
Candidates for State Office and State Elected Off		,	
Candidates for County or Municipal Office and Candidates of the county in which the office is sought.	ounty and Municipal Elected	Officials: File this report	with the Judge of
			QU
As required by the Alabama Fair Campaign Practices Act swear or affirm to the best of my knowledge and belief		scribed before me this	
attached report(s) and the information contained he	rein are	the year 2/2. N	ly commission expires
rue and correct and that this information is a full and obtained and contributions, expenditures, and other	required the ADT da	y of Much of the	year <u>22.</u>
nformation during the applicable period of time.	•	Mule Sime	1/22
1/ 1/ 18	Signature of Notary P	· / 1	TIVUN
Signature of Sandidate or Elected Official Date	e 1	1 3	11.
FORM REVISED 9.2.2011	Print Notary's Name	IMN LYNN	TUTTON

TICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

tions received by candidate or elected official

AME OF CANDIDATE OR ELECTED OFFICIAL:
692E6012
4 Farence 11



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.

		OF CONTRIBUTION (CHECK ONE)	
(INCLUDE FULL NAME)	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation Individual PAC Other Returned (mo./day/yr.)	CONTRIBUTION
et & Temater	153 STERLANG Gate De Alabustu, A1 35007	3/18/ 8/8/	150
ALERT			
\$.00 Probate,			
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y Cnty J			
Shelb			
RM REVISED 9.2.2011	TOTAL CASH CON	TRIBUTIONS THIS PAGE	15000

ICES ACT CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

ontributions received Яd candidate 9 0 ficial

ANDIDATE O OFFICIAL: Silleony

When total contributions from a single source exceed by the source of th exceed \$100.00, the FCPA requires on this form. Use For and all contributions listings from that source to be itemized.

(INCLUDE FULL NAME) Shelby Cnty Judge of Probate, AL 08/08/2016 10:09:49 AM FILED/CERT 201 ADDRESS (ADDRESS SHOULD INCLUDE ET OR P.O. BOX, CITY, STATE, AND ZIP) Administrative TOTAL IN NATURE OF CONTRIBUTION (CHECK ONE) Advertising Consultants/ Polling Equipment XIND Food Rent CONTRIBUTIONS Transportation Other Business/ Corporation SOURCE (CHECK ONE) Individual PAC SIHT Other RECEIVED (mo./day/yr.) PAGE



AMPAIGN PRACT ICES ACT CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

Receipts rom her Sources loans, erest and other sources of

P ANDIDATE When total contributions from a single source exceed \$100.00, the FCPA requires

DO NOT LIST cash or in-kind contributions on this form. Use Fc ELECTE O OFFICIAL: CTRE Gon <u>a</u> contributions from that source to be itemized.

and 3 for those

Shelby Cnty Judge of Probate, AL SOURCE (INCLUDE 08/08/2016 10:09:49 AM FILED/CERT FULL NAME) ADDRESS
(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) 37E 345 3500 37.6 유 Interest FORM RECEIPT Loan Other FCPA REQUIRES FUL COMPLETE THIS BLOCK IF DORSING OR basto GU **ARANTORS** S FULL NAME AND COM-S OF INDIVIDUAL(S) EN-GUARANTEEING LOAN] Forms TOTAL RECEIPT RECEIPTS Lending listings. Institution RECEIPT SOURCE (CHECK ONE) PAC THIS Individual Business PAGE Other \propto (mo./day/yr.) RECEIVED DATE 8 0 유 00

FORM

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AMPAIGN PRACT TICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

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

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1241.51	1/18/8	and							~		es chicago, IL, 60677-9004	Avenican Bolvtrows for Busin	
106.56	3/12/18	Gan Magnets Ganvasen							X		45 Stayden AM 02421-7942	Vista Preint	ħ
AMOUNT OF EXPENDITURE	EXPENDITURE (mo./day/yr.)	OTHER GIVE BRIEF EXPLANATION	Transportation	Repayment Lodging	Fundraising Loan	Food	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)	1
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