

MONTHLY & WEEKLY


**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

20160815000289900 1/5 \$.00
Shelby Cnty Judge of Probate, AL
08/15/2016 11:25:10 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Rick Walters		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) Alabaster City Council - WARD 4			
Address ☐ Check box if reporting new address 109 Shalimar Trace			
City Alabaster	State AL	ZIP Code 35007	Telephone Number [REDACTED]

Type of Report (check one)

- ☐ Monthly ☐ Amended Monthly
☒ Weekly ☐ Amended Weekly

For Monthly Reports

Month in which the report is filed.

For Weekly Reports

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

8/8/16 to 8/14/16**Total Number of Pages in Report****5****Summary of activity since last filed report**

1	Beginning balance (ending balance from previous filing)	1	\$-464.75
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	\$0.00
2b	Non-itemized cash contributions	2b	\$0.00
2c	Total cash contributions (add lines 2a and 2b)	2c	\$0.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	\$0.00
3b	Non-itemized in-kind contributions	3b	\$0.00
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$0.00
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	\$877.55
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$877.55
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	\$412.80
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	\$412.80
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	\$0.00

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.


 Signature of Candidate or Elected Official Date **8-15-16**

Sworn to and subscribed before me this **15th** day of **Aug** of the year **2016**. My commission expires the **22nd** day of **April** of the year **2018**.


 Signature of Notary Public


 Print Notary's Name

Rick Walters

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.

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