

MONTHLY &amp; WEEKLY


**FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA**

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

20160815000291540 1/4 \$.00  
Shelby Cnty Judge of Probate, AL  
08/15/2016 03:55:40 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official <b>Russell Nix</b>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <b>City Council District 1</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>686 Salem Rd</b>			
City <b>Montevallo</b>	State <b>AL</b>	ZIP Code <b>35115</b>	Telephone Number <b>[REDACTED]</b>

## Type of Report (check one)

- ☐ Monthly  
☒ Weekly  
☐ Amended Monthly  
☐ 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.

 Total Number of  
Pages in Report

[Empty box for Monthly Reports]  
**8-19-16**  
 [Empty box for Total Number of Pages in Report]

## Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<b>0</b>
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a	<b>320.46</b>
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	<b>320.46</b>
<b>In-Kind Contributions</b>			
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	
<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	
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a	<b>320.46</b>
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	<b>320.46</b>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<b>0</b>

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: **Russell Nix**  
 Date: **8-15-16**

Sworn to and subscribed before me this **15th** day of **Aug** of the year **2016**. My commission expires the **20th** day of **April** of the year **2018**.

Signature of Notary Public: **Jessica L. Holland**  
 Print Notary's Name: **Jessica L. Holland**

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: Russell Nix

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
Anna Nix	686 Salem Rd Montevallo AL 35115		<input checked="" type="checkbox"/>					\$100.00
Don Hughes	Neighbors St. Montevallo AL 35115		<input checked="" type="checkbox"/>					\$100.00
Russell Nix	686 Salem Rd Montevallo AL 35115		<input checked="" type="checkbox"/>					\$120.46
								\$320.46
TOTAL CASH CONTRIBUTIONS THIS PAGE								

FORM REVISED 9.2.2011

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

**FORM 5: Expenditures** by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: RUSSELL NIX



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	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
The Type Shop	616 Main St. <sup>35115</sup> Montevallo		<input checked="" type="checkbox"/>									8-1-16	\$320.46
TOTAL EXPENDITURES THIS PAGE													\$320.46

FORM REVISED 9.2.2011



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INVOICE #  
16352

**THE TYPE SHOP**  
DESIGN, PRINT and COPY

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!*



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