Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



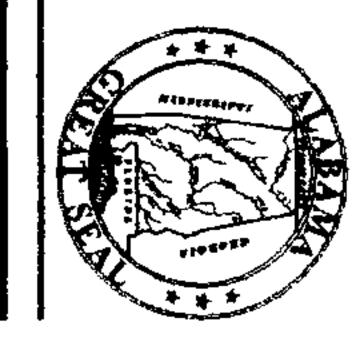
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		08/22/2016 07:59:32 AM FILED/CERT									
	Please Print in Ink or Type.										
Of	fice Sought or Held (include district/or circuit number, if applicable) dress Check box if reporting new address	y/Ballot Affiliation			Date Covered by Report			Am	8/2/16 Amended Daily Report		
Cit	State ZIP Code Telephone No Chelson AL 35043	ımber				i Numbe eport	r of Page	S	2		
S	ummary of activity since last filed report										
1	Beginning balance (ending balance from previous filing)						1	10	14/2	_	
	Cash Contributions						• •				
 	Itemized cash contributions (total from Form 2)	2a			······································	_		· · · · · · · · ·	·		
2b	Non-itemized cash contributions	2b		21)	0	0		•			
2c	Total cash contributions (add lines 2a and 2b)		e più se e				2c <	30	9.00		
	In-Kind Contributions										
3a	Itemized in-kind contributions (total from Form 3)	3a		·		<u> </u>					
3b	Non-itemized in-kind contributions	3b			·			. · ·			
3c	Total in-kind contributions (add lines 3a and 3b)	3c				···			· · · ·		
	Receipts from Other Sources	1	 -			· · · · · · · · · · · · · · · · · · ·	.				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a		 		<u>·</u>					
4b	Non-itemized Receipts from Other Sources	4b							·.		
4c	Total receipts from other sources (add lines 4a and 4b)						4c	· 	* 		
	Expenditures										
5a	Itemized expenditures (total from Form 5)	5a		124	- 71	1		•			
5b	Non-itemized expenditures	5b	-	2 	1.6	/					
5с	Total expenditures (add lines 5a and 5b)				4-6	<i></i>	5c	29	190		
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			· · · ·			6	X / /	7. 7. 2	>	
	ndidates for State Office and State Elected Officials: File this re			- II- a ()	EC - C		<u></u>	/ / <u>×</u>	· · · · ·		
Car	ndidates for County or Municipal Office and County and Municipale of the county in which the office is sought.	cipal	Ele	i ine ∪ cted Ο	fficials	: File th	retary of his repor	State. t with th	e Judge	of	
attac rue state	thed report(s) and the information contained herein are and complete and complete and contributions, expenditures, and other required the characteristic during the policable period of time.	(18) (1)	H.		year of In	fore me	N		nission ex	pires	
•		Notary	's Na	bes a	h L	y nr) }	vrte	3N)		

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

FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:



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

FORM REVISED 10.27.2011	SI	helby Cni	00300420 y Judge 5 07:59:3	of Proba	te, AL		Stables	SHADINGS	PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	RSON/GROUP/			
								46/4 Hay 280 B/m	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)				
TOTAL EXPENDITURES THIS PA									Administrative Advertising Consultants/ Polling Charitable Contribution Food Fundraising Loan Repayment Lodging Transportation EXPLANATION	PURPOSE OF EXPENDITURE (CHECK ONE)			
AGE							9/22/18	82/11	EXPENDITURE (mo./day/yr.)				
Harrian Resident	2019						66.66	225, 24	AMOUNT OF EXPENDITURE				