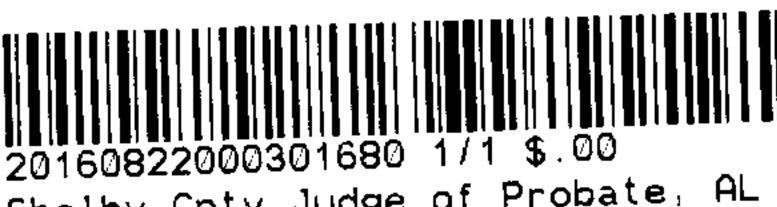




Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



Shelby Cnty Judge of Probate, AL 08/22/2016 11:19:26 AM FILED/CERT

-BONDED THRU MERCHANTS BONDING CO-MUTUAL)

Please Print in Ink or Type. Type of Report (check one) Political Party/Ballot Affiliation Name of Candidate or Elected Official Amended Monthly Monthly Amended Weekly Weekly Office Sought or Held (include districtor circuit number, if applicable) For Monthly Reports Month in which the report is filed. For Weekly Reports Date of Friday in the ZIP Code Telephone Number State City week in which the 202 277-720) report is filed. **Total Number of** Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) **Cash Contributions** Itemized cash contributions (total from Form 2) Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) **In-Kind Contributions** 3a Itemized in-kind contributions (total from Form 3) 3a Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) **Receipts from Other Sources** Itemized Receipts from Other Sources (total from Form 4) |4a| 4b Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) **Expenditures** 5a Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) 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 Sworn to and subscribed before me this MACHINETHARY PUBLIC STATE OF ALABAMA AT LARGE swear or affirm to the best of my knowledge and belief that the MY COMMISSION EXPIRES: Marcho, 2017 mission expires attached report(s) and the information contained herein are

the

Date

Signature of Notary Public

Print Notary's Name

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