



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

20160906000323630 1/6 \$.00
Shelby Cnty Judge of Probate, AL
09/06/2016 03:45:31 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official THOMAS C. HOLCOMBE		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) CHELSEA, AL CITY COUNCIL, PLACE 5			
Address <input type="checkbox"/> Check box if reporting new address 11450 CHELSEA RD, CHEL			
City CHELSEA,	State AL	ZIP Code 35043	Telephone Number [REDACTED]

Calendar Year
covered by this report.
2016☐ Amended Annual Report☒ Termination Report
Total Pages in Report
Include this page in
your count.

SECTION I - Summary of activity from last filed report through December 31 of reporting year

1	Beginning balance (ending balance from previous filing)		1	- 0 -
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$ 100.00	
2b	Non-itemized cash contributions	2b	- 0 -	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$ 100.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	- 0 -	
3b	Non-itemized in-kind contributions	3b	- 0 -	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	- 0 -	
Receipts from Other Sources				
4a	Total itemized receipts from other sources (total from Form 4)	4a	\$ 1,161.83	
4b	Total non-itemized receipts from other sources	4b	- 0 -	
4c	Total itemized receipts from other sources (add lines 4a and 4b)	4c	\$ 1,161.83	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	\$ 1,161.83	
5b	Non-itemized expenditures	5b	- 0 -	
5c	Total expenditures (add lines 5a and 5b)	5c	\$ 1,161.83	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	- 0 -	

SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

7	Beginning balance (as of January 1 of reporting year)	7	- 0 -
8	Total cash contributions for year	8	\$ 100.00
9	Total in-kind contributions for year	9	- 0 -
10	Total receipts from other sources for year	10	\$ 1,161.83
11	Total expenditures for year	11	\$ 1,161.83
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)	12	- 0 -
13	Total campaign debt (total debt owed as of December 31)	13	- 0 -

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.

Thomas C. Holcombe SEP 6, 2016
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this 6th day of Sept of the year 2016. My commission expires the 28th day of March of the year 2020.

Deborah Lynn Horton
Signature of Notary Public
Deborah Lynn Horton
Print Notary's Name

FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

THOMAS C. HOLCOMBE (Tom Holcombe)



When total contributions from a single source exceed \$100.00, the FCRA 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)

Business or Corporation	Individual	PAC	Other	Returned
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DATE
CONTRIBUTION
RECEIVED
(mo./day/yr.)AMOUNT
OF
CONTRIBUTION

KATIE L. GRIFFITH

1450 CHELSEA, AL 35043

✓

7/19/2016

\$100.00

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TOTAL CASH CONTRIBUTIONS THIS PAGE



THOMAS P. HOKOMBE (Tom Hokombe)

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.

[illegible]

FORM 4: Receipts from Other Sources loans, interest, and other sources of incomeNAME OF CANDIDATE OR ELECTED OFFICIAL: THOMAS E. HOLCOMBE(TOM HOLCOMBE)When total contributions from a single source exceed \$100.00, the FCRA requires all contributions from that source to be itemized.
DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

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SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS (FCRA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN)	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other		
THOMAS E. HOLCOMBE	11450 CHELSEA RD, CHELSEA, AL 35043		✓		THOMAS E. HOLCOMBE			✓			7/13/2016	\$50.00
THOMAS E. HOLCOMBE	11450 CHELSEA RD CHELSEA, AL 35043		✓		THOMAS E. HOLCOMBE			✓			7/15/2016	\$200.00
KATIE L. GRIFFITH	11450 CHELSEA RD CHELSEA, AL 35043			✓	N/A			✓			7/19/2016	100.00
REMSANT BANK	16623 HWY 380 CHELSEA, AL 35043		✓		N/A			✓			7/21/2016	.04
THOMAS E. HOLCOMBE	11450 CHELSEA RD CHELSEA, AL 35043		✓		THOMAS E. HOLCOMBE			✓			8/1/2016	201.00
THOMAS E. HOLCOMBE	11450 CHELSEA RD CHELSEA, AL 35043		✓		THOMAS E. HOLCOMBE			✓			8/1/2016	100.00
THOMAS E. HOLCOMBE	11450 CHELSEA RD CHELSEA, AL 35043		✓		THOMAS E. HOLCOMBE			✓			8/12/2016	325.00
REMSANT BANK	16623 HWY 380 CHELSEA, AL 35043		✓		N/A			✓			8/18/2016	.09
THOMAS E. HOLCOMBE	11450 CHELSEA RD CHELSEA, AL 35043		✓		THOMAS E. HOLCOMBE			✓			8/24/2016	178.20
TOTAL RECEIPTS THIS PAGE												\$1,154.33

FORM REVISED 9.2.2011



NAME OF CANDIDATE OR ELECTED OFFICIAL:

THOMAS C. HOKCOMBE (TOM HOKCOMBE)

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.

DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings

[illegible]

FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

THOMAS C. HOKCOMBE (Tom Hokcombe)

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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)								OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE	
		Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Loan Repayment	Lodging				Transportation
HARLAND CHARRKE OK ORDER 160720	15955 LA CANTERA SAN ANTONIO, TX 78256	<input checked="" type="checkbox"/>										7/20/2016	\$ 26.90
Post NET	60 CHELSEA CORNERS CHELSEA, AL 35043	<input checked="" type="checkbox"/>										7/25/2016	181.00
Post Net	60 CHELSEA CORNERS CHELSEA, AL 35043	<input checked="" type="checkbox"/>										8/11/2016	392.40
Post NET	60 CHELSEA CORNERS CHELSEA AL 35043	<input checked="" type="checkbox"/>										8/12/2016	291.55
RENASANT BANK	16623 HWY 280 CHELSEA, AL 35043	<input checked="" type="checkbox"/>										8/18/2016	7.50
FOOTWEARXS Custom Photography	635 MAIN ST MONTICELLO, AL 35115	<input checked="" type="checkbox"/>										8/17/2016	75.00
Post NET	60 CHELSEA CORNERS CHELSEA, AL 35043	<input checked="" type="checkbox"/>										8/24/2016	187.48
TOTAL EXPENDITURES THIS PAGE												\$ 1,161.83	