



## Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20160909000327350 1/3 \$.00 Shelby Cnty Judge of Probate, AL 09/09/2016 11:23:05 AM FILED/CERT

Please Print in Ink or Type. Type of Report (check one) Name of Candidate or Elected Official Political Party/Ballot Affiliation Monthly Amended Monthly Weekly Amended Weekly Office Sought or Held (include district or circuit number, if applicable) Like of telham Leuncil - Mace L For Monthly Reports Month in which the Address Check box if reporting new address report is filed. 2749 Wellington i For Weekly Reports Date of Friday in the ZIP Code Telephone Number week in which the Alabama 35124 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) 2c **In-Kind Contributions** 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| Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) 4C Expenditures Itemized expenditures (total from Form 5) 5a Non-itemized expenditures Total expenditures (add lines 5a and 5b) 5c 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, Thereby Sworn to and subscribed before me this swear or affirm to the best of my knowledge and belief that the of the year 2010. My commission expires attached report(s) and the information contained herein are true and correct and that this information is a full and complete of the year 2016. day of Aori the statement of all contributions, expenditures, and other required information during the applicable period of time. Signature of Notary Public Signature of Candidate or Elected Official Daté

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Print Notary's Name

FAIR CAMPAIGN PRACTICES ACT CAMPAIGN FINANCE REPORT

Contibutions received by candidate or electe



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FORM REVISED 10.27.2011

CONTRIBUTIONS

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FAIR CAMPAIGN PRAC CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

## ORN 5. Expenditures by candidate or elected official

OF CANDIDATE OR ELECTED OFFICIAL:

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09/02/2016 02:52:27 PM FILED/CERT Shelby Cnty Judge PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) VISED 10.27.2011 9  $\infty$ S ADDRESS (ADDRESS SHOULD INCLUDE TREET OR P.O. BOX, CITY, STATE, AND ZIP) W Administrative Advertising Consultants/ Polling Charilable Contribution TOTAL PURPOSE OF EXPENDITURE (CHECK ONE) Food Fundraising. EXPENDITURES Loan Repayment Lodging Transportation \$06 OTHER GIVE BRIEF YANATION HIS PAGE DATE OF XPENDITURE 00 EXPENDITURE AMOUNT OF O

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