

Signature of Candidate or Elected Official

FORM REVISED 10.27.2011

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



Shelby Cnty Judge of Probate, AL 10/03/2016 09:32:39 AM FILED/CERT

Please Print in Ink or Type. Type of Report (check one) Name of Candidate or Elected Official Political Party/Ballot Affiliation Amended Monthly Monthly Weekly Amended Weekly Office Sought or Held (include district or circuit number, if applicable) For Monthly Reports Month in which the ☐ Check box freporting new address Address report is filed. 108 LARE Chelsen Drive State ZIP Code Telephone Number 456, Chelsen Al 35043 For Weekly Reports Date of Friday in the 9-30-16 week in which the 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) 2a 2/00,00 Non-itemized cash contributions 2b Total cash contributions (add lines 2a and 2b) 20 2100.00 **In-Kind Contributions** Itemized in-kind contributions (total from Form 3) |3a Non-itemized in-kind contributions 3b 3c Total in-kind contributions (add lines 3a and 3b) 3c Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) 4a Non-itemized Receipts from Other Sources 4b Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) **5a** Non-itemized expenditures 5b 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. Sworn to and subscribed before me this 373As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the of the year _. My commission expires attached report(s) and the information contained herein are 2018 day of he year true and correct and that this information is a full and complete the 1 statement of all contributions, expenditures, and other required information during the applicable peried of time. Signature of Notary Public

Date

Print Notary's Name

Shelby Coty Judge of Probate, AL contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. ibutions received by candidate or ECTED OFFICIAL:

RACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

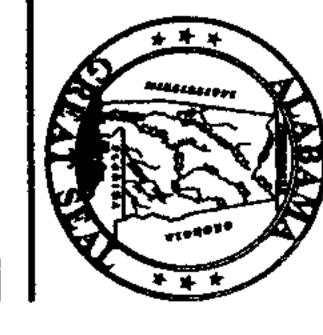
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AMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

CANDIDATE Expenditures by candidate or ECTED OFFICIAL: 2000 electgd official



When total expend itures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be

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