

MONTHLY & WEEKLY


**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1


 20161011000372530 1/3 \$.00
 Shelby Cnty Judge of Probate, AL
 10/11/2016 10:27:00 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official THOMAS DALE NEUENDORF		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) MAYOR OF CHELSEA			
Address <input type="checkbox"/> Check box if reporting new address P.O. BOX 293 HOME 51 CROSSBROOK CIRCLE			
City CHELSEA	State AL	ZIP Code 35043	Telephone Number [REDACTED]

Type of Report (check one)

☐ Monthly ☐ Amended Monthly
☒ Weekly ☐ Amended Weekly

For Monthly Reports

Month in which the report is filed.

For Weekly Reports

Date of Friday in the week in which the report is filed.

10-7-2016

Total Number of Pages in Report

3

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	1575.61
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	1000.00
2b	Non-itemized cash contributions	2b	—
2c	Total cash contributions (add lines 2a and 2b)	2c	1000.00
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	Itemized Receipts from Other Sources (total from Form 4)	4a	- 0 -
4b	Non-itemized Receipts from Other Sources	4b	- 0 -
4c	Total receipts from other sources (add lines 4a and 4b)	4c	- 0 -
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	603.73
5b	Non-itemized expenditures	5b	29.50
5c	Total expenditures (add lines 5a and 5b)	5c	633.23
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	1942.38

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 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.

Signature of Candidate or Elected Official **Thomas Dale Neuendorf** Date **10-6-16**

Sworn to and subscribed before me this **10** day of **Oct** of the year **2016**. My commission expires the **9** day of **July** of the year **2017**.

Signature of Notary Public **Kendrick Luther**
 Print Notary's Name **Kendrick Luther**



NAME OF CANDIDATE OR ELECTED OFFICIAL: THOMAS DALE NEWBOLD

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]

20161011000372530 2/3 \$.00
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FORM REVISED 10.27.2011

TOTAL RECEIPTS THIS PAGE

1000.00

NAME OF CANDIDATE OR ELECTED OFFICIAL: THOMAS DALE NEUBERT

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FORM REVISED 10.27.2011