

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA Candidate & Elected Official Campaign Finance Report

SUMMARY FORM 1		201611010003994 201611010003994 Shelby Cnty Jud Shelby Cnty Jud	50 1/1 \$.00 Ige of Probate, AL 37:44 AM FILED/CERT
Please Print in Ink or Type.		11101,20	
	//Ballot Affiliation	Type of Report (che Monthly	ck one) Amended Monthly
William Thomas Februards Repu	rblican		
Office Sought or Held (include district or circuit number, if applicable)	^	Weekly	Amended Weekly
Shelly (ounty Commission Dist	<u>ــــــــــــــــــــــــــــــــــــ</u>	For Monthly Report Month in which the	is 1
Address Check box if reporting new address		report is filed.	B Xepr
568 Souther-Hills D1		For Weekly Reports	1
City State ZIP Code Telephone N	umber	Date of Friday in the week in which the	
Calera 35040 (· · · · · · · · · · · · · · · · ·	report is filed.	
		Total Number of Pages in Report	
Summary of activity since last filed report			
1 Beginning balance (ending balance from previous filing)		1	316.24
Cash Contributions			
2a Itemized cash contributions (total from Form 2)	2a		
2b Non-itemized cash contributions	2b		
2c Total cash contributions (add lines 2a and 2b)		2c	
In-Kind Contributions		<u> </u>	· · · · · · · · · · · · · · · · · · ·
3a Itemized in-kind contributions (total from Form 3)	3a		
3b Non-itemized in-kind contributions	3b		
3c Total in-kind contributions (add lines 3a and 3b)	3c		
Receipts from Other Sources		<u> </u>	
4a Itemized Receipts from Other Sources (total from Form 4)) 4a		
4b Non-itemized Receipts from Other Sources	4b		
4c Total receipts from other sources (add lines 4a and 4b)		4c	
Expenditures		<u>t </u>	
5a Itemized expenditures (total from Form 5)	5a		
5b Non-itemized expenditures	5b		
5c Total expenditures (add lines 5a and 5b)		5c	
6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c	()	6	316.24
Candidates for State Office: File this report with the Office of the S	Secretary of Sta	ite.	
Candidates for County or Municipal Office: File this report with the			which the office is sought.
As required by the Alabama Fair Campaign Practices Act, I hereby Sw swear or affirm to the best of my knowledge and belief that the	72.1	scribed before me this	St day of
attached report(s) and the information contained herein are		the year <u>OU</u>	My commission expires
true and correct and that this information is a full and complete the statement of all contributions, expenditures, and other required	De De day of April of the year 2018		
information during the applicable period of time.	Remin R. Molland.		
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Signature of Candidate or Elected Official Date	Signature of Notary Public OF CLA L. HOLLINA		
	nt Notary's Name	of the Contraction of the Contra	
FORM REVISED 9.2.2011	A TOLLING		