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Shelby Cnty Judge of Probate, AL  
06/09/2017 02:27:29 PM FILED/CERT

Print Form

THIS AREA FOR OFFICIAL USE ONLY

MONTHLY &amp; WEEKLY

FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMACandidate & Elected Official  
Campaign Finance Report  
SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official <b>Frank James Matthews III</b>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <b>Mayor of City of Birmingham</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>2524 38<sup>th</sup> Ave North</b>			
City <b>Birmingham</b>	State <b>AL</b>	ZIP Code <b>35207</b>	Telephone Number

## Type of Report (check one)

☒ Monthly ☐ Amended Monthly  
☐ Weekly ☐ Amended Weekly
For Monthly Reports  
Month in which the report is filed.**May 1st**For Weekly Reports  
Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

## Summary of activity since last filed report

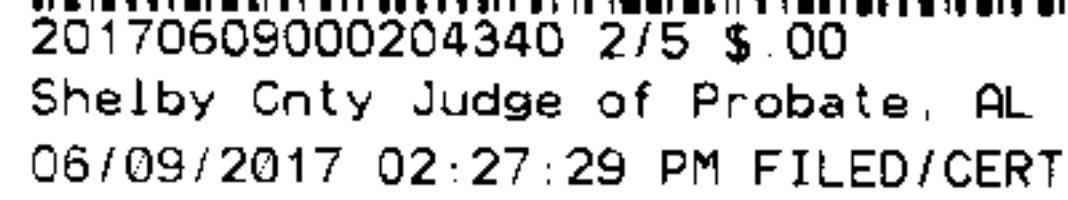
1	Beginning balance (ending balance from previous filing)		<b>13,150.66</b>
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	<b>2a</b>	<b>13,150.00</b>
2b	Non-itemized cash contributions	<b>2b</b>	<b>0.00</b>
2c	Total cash contributions (add lines 2a and 2b)	<b>2c</b>	<b>13,150.00</b>
<b>In-Kind Contributions</b>			
3a	Itemized in-kind contributions (total from Form 3)	<b>3a</b>	<b>0.00</b>
3b	Non-itemized in-kind contributions	<b>3b</b>	<b>0.00</b>
3c	Total in-kind contributions (add lines 3a and 3b)	<b>3c</b>	<b>0.00</b>
<b>Receipts from Other Sources</b>			
4a	Itemized Receipts from Other Sources (total from Form 4)	<b>4a</b>	<b>0.00</b>
4b	Non-itemized Receipts from Other Sources	<b>4b</b>	<b>0.00</b>
4c	Total receipts from other sources (add lines 4a and 4b)	<b>4c</b>	<b>0.00</b>
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	<b>5a</b>	<b>2158.00</b>
5b	Non-itemized expenditures	<b>5b</b>	<b>1038.00</b>
5c	Total expenditures (add lines 5a and 5b)	<b>5c</b>	<b>2158.00</b>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	<b>6</b>	<b>992.00</b>

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  
**Frank James Matthews III**Date  
**6-1-17**Sworn to and subscribed before me this **1st** day of**June** of the year **2017**. My commission expires the **8th** day of **August** of the year **2017**.Signature of Notary Public  
**Tawanna Morton**Print Notary's Name  
**TAWANNA MORTON**



**County Division Code: AL040 Inst. # 2017055200 Pages: 2 of 5**

## ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE &amp; ELECTED OFFICIAL

**FORM 2: Contributions** received by candidate or elected official

**NAME OF CANDIDATE OR ELECTED OFFICIAL:**

**When total contributions from a single source exceed \$100.00, the FCPA 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)						DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned			
Barbara J. Howard	195 Selem Rd Montevallo, AL 35115		X				May 30 2017	\$150.00	
DM Smitherman Enterprise LLC	35810 2519 Branco Circle Suite A Huntsville AL	X					May 30 2017	\$2000.00	
Roosevelt Powell	1648 Heritage Place Trandale, AL 35210		X				May 30 2017	\$1000.00	
TOTAL CASH CONTRIBUTIONS THIS PAGE									

FORM REVISED 10.27.2011

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

**FORM 3: In-Kind Contributions** received by candidate or elected official



NAME OF CANDIDATE OR ELECTED OFFICIAL: \_\_\_\_\_

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)										SOURCE (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consulting/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other					
NONE																		
		<b>TOTAL IN-KIND CONTRIBUTIONS THIS PAGE</b>																

FORM REVISED 10.27.2011



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ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

**FORM 4: Receipts from Other Sources** loans, interest, and other sources of income



NAME OF CANDIDATE OR ELECTED OFFICIAL: \_\_\_\_\_

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.

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  (FCPA 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			
N/A	N/A												
TOTAL RECEIPTS THIS PAGE													

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ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

**FORM 5: Expenditures by candidate or elected official**

NAME OF CANDIDATE OR ELECTED OFFICIAL: \_\_\_\_\_



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)											DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION			
Phoenix Theaters The Edge 12	Birmingham, AL 35201 2001 Crestwood Blvd		X								Theater Rental	May 31st 2017	\$ 1120.00	
Fast Signs	2023 6th Ave N Birmingham, AL 35201		X								Signs	May 31st 2017	\$ 1038.00	
TOTAL EXPENDITURES THIS PAGE													\$ 2158.00	

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