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07/28/2020 09:04:36 AM FILED/CERT

Candidate & Elected Official Campaign Finance Report

	SUMMARY FORM 1				1-110	PAIE COURT		
<u>.</u>	Please Print in Ink or Type.				jU	L 02 2020		
Nar	ne of Candidate or Elected Official	rty/Ballo	Affiliation	7	A	I ΔNI I - KINO		_
	Ina municial Kepi	J) Ci	Can	Date Cdv	ered by Ret E.O.D.	dge of Probate		
Offi	ce Sought or Held (include district or circuit number, if applicable)			F-sc.		The residence of the second se		
Add	ress Check box if reporting new address		·	_		Amended Da	ily Dono	_ <u>_</u>
l	520 11 W W - 0 W - C 1	M -	-150			<u> </u>	iily itepo	11
City	CAMINE CONTRACTOR CONTRACTOR	Number		in Report	nber of Pag	as .		7
•	HOOVER AL 35244							
S	ummary of activity since last filed report							
1	Beginning balance (ending balance from previous filing)	•		1			
	Cash Contributions	,				•		
2a	Itemized cash contributions (total from Form 2)	2a	17	00.00		-		
2b	Non-itemized cash contributions	2b				,		
2c	Total cash contributions (add lines 2a and 2b)		_	·	2c	1700,00	\$0.0	
•	In-Kind Contributions		_					1
3a	Itemized in-kind contributions (total from Form 3)	3a			Count	y Division Code: AL	040	
3b	Non-itemized in-kind contributions	3b		·	! certif	2020069207 Page fy this instrument file	ed on	
3c	Total in-kind contributions (add lines 3a and 3b)	3c		\$1		20 11:46 AM Doc: It of Probate	ELANN	
_	Receipts from Other Sources		<u> </u>	<u>.</u>	Jeffer	son County, AL.		
4a	Itemized Receipts from Other Sources (total from Form	4) 4a		<u> </u>	Clerk	: SMITHMO		
4b	Non-itemized Receipts from Other Sources	4b						1
4c	Total receipts from other sources (add lines 4a and 4b)		;	;÷	4c		\$0.00	
	Expenditures				· · · · · · · · · · · · · · · · · · ·			٦
5 <u>a</u>	Itemized expenditures (total from Form 5)	5a		0				
5b	Non-itemized expenditures	5b		0		- ·	•	
5c	Total expenditures (add lines 5a and 5b)	,		'1	5c		\$0.00	7
	Expenditures on Line of Credit							1
6a	Itemized expenditures on line of credit (total from Form	6) 6a						
6b	Non-itemized expenditures on line of credit	6b						
6c	Total expenditures on line of credit (add lines 6a and 6b) 6c		\$(0.00	•	· 	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5	c)	,		7	1700.0	\$0.00	,
swe atta- rue state nfor	ar or affirm to the best of my knowledge and belief that the ched report(s) and the information contained herein are and correct and that this information is a full and complete thement of all contributions, expenditures, and other required mation during the applicable period of time.	o d	e of	ay of Octo		My commission le year	•	_]·
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FORM	# REVISED 5.22.2017	rint Nota	ry's Name					