



# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY

20200803000326080 1/3 \$.00  
Shelby Cnty Judge of Probate, AL  
08/03/2020 11:35:03 AM FILED/CERT

Please Print in Ink or Type.

|                                                                                                      |             |                                    |                                |
|------------------------------------------------------------------------------------------------------|-------------|------------------------------------|--------------------------------|
| Name of Candidate or Elected Official<br>ARTHUR HERBERT                                              |             | Political Party/Ballot Affiliation |                                |
| Office Sought or Held (include district or circuit number, if applicable)<br>CITY COUNCIL DISTRICT 5 |             |                                    |                                |
| Address <input type="checkbox"/> Check box if reporting new address<br>165 MEADOW RD                 |             |                                    |                                |
| City<br>MONTEVALLO                                                                                   | State<br>AL | ZIP Code<br>35115                  | Telephone Number<br>[REDACTED] |

Type of Report (check one)

☒ Monthly ☐ Amended Monthly  
☐ Weekly ☐ Amended Weekly

For Monthly Reports  
Month for which the report is filed.

JULY

For Weekly Reports  
Date of Friday in the week for which the report is filed.

Total Number of Pages in Report

3

## Summary of activity since last filed report

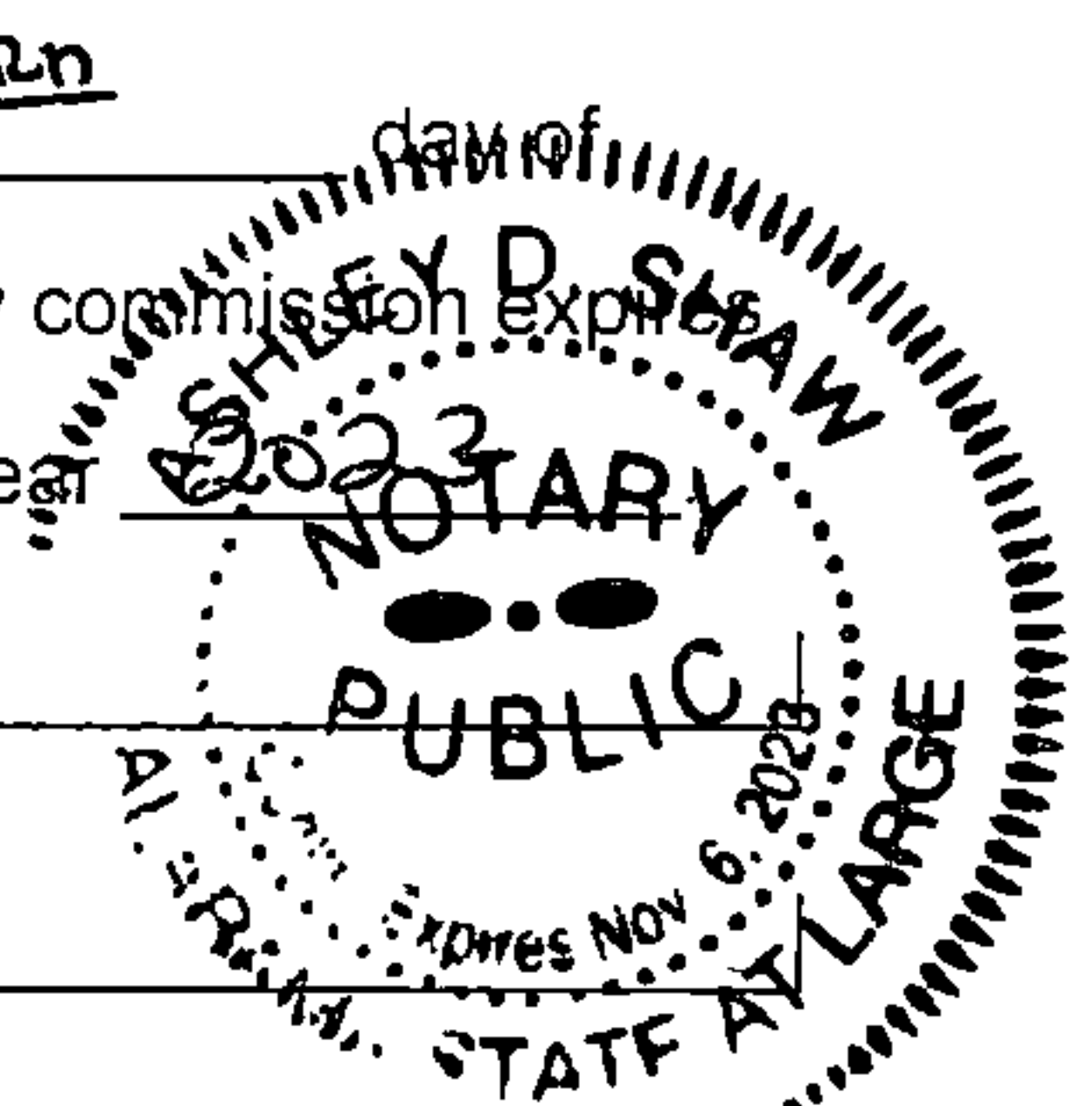
|                                       |                                                               |    |            |
|---------------------------------------|---------------------------------------------------------------|----|------------|
| 1                                     | Beginning balance (ending balance from previous filing)       | 1  | \$0.00     |
| <b>Cash Contributions</b>             |                                                               |    |            |
| 2a                                    | Itemized cash contributions (total from Form 2)               | 2a | \$0.00     |
| 2b                                    | Non-itemized cash contributions                               | 2b | \$0.00     |
| 2c                                    | Total cash contributions (add lines 2a and 2b)                | 2c | \$0.00     |
| <b>In-Kind Contributions</b>          |                                                               |    |            |
| 3a                                    | Itemized in-kind contributions (total from Form 3)            | 3a | \$0.00     |
| 3b                                    | Non-itemized in-kind contributions                            | 3b | \$0.00     |
| 3c                                    | Total in-kind contributions (add lines 3a and 3b)             | 3c | \$0.00     |
| <b>Receipts from Other Sources</b>    |                                                               |    |            |
| 4a                                    | Itemized Receipts from Other Sources (total from Form 4)      | 4a | \$200.00   |
| 4b                                    | Non-itemized Receipts from Other Sources                      | 4b | \$850.00   |
| 4c                                    | Total receipts from other sources (add lines 4a and 4b)       | 4c | \$1,050.00 |
| <b>Expenditures</b>                   |                                                               |    |            |
| 5a                                    | Itemized expenditures (total from Form 5)                     | 5a | \$0.00     |
| 5b                                    | Non-itemized expenditures                                     | 5b | \$137.90   |
| 5c                                    | Total expenditures (add lines 5a and 5b)                      | 5c | \$137.90   |
| <b>Expenditures on Line of Credit</b> |                                                               |    |            |
| 6a                                    | Itemized expenditures (total from Form 6)                     | 6a | \$709.50   |
| 6b                                    | Non-itemized expenditures                                     | 6b | \$11.00    |
| 6c                                    | Total expenditures on credit (add lines 6a and 6b)            | 6c | \$720.50   |
| 7                                     | Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) | 7  | \$912.10   |

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] 8/3/2020  
Signature of Candidate or Elected Official Date

FORM REVISED 06.06.2017

Sworn to and subscribed before me this 3rd day of August of the year 2020. My commission expires 2023  
the 6th day of November of the year 2020  
Ashley D Shaw  
Signature of Notary Public  
Ashley D Shaw  
Print Notary's Name



# FORM 2: Contributions received by candidate or elected official

**DO NOT LIST** in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

| CONTRIBUTOR<br><small>(INCLUDE FULL NAME)</small> | ADDRESS<br><small>(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)</small> | SOURCE OF CONTRIBUTION<br><small>(CHECK ONE)</small> |                           |                    |                      |                         | DATE CONTRIBUTION RECEIVED<br><small>(mo./day/yr.)</small> | AMOUNT OF CONTRIBUTION |
|---------------------------------------------------|---------------------------------------------------------------------------------------------|------------------------------------------------------|---------------------------|--------------------|----------------------|-------------------------|------------------------------------------------------------|------------------------|
|                                                   |                                                                                             | <small>Business or Corporation</small>               | <small>Individual</small> | <small>PAC</small> | <small>Other</small> | <small>Returned</small> |                                                            |                        |
| SUSAN CAPILOW                                     | 165 MEADOW RD, MONTEVALLLO, AL 35115                                                        |                                                      | ✓                         |                    |                      |                         | 7/1/2020                                                   | \$200.00               |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
|                                                   |                                                                                             |                                                      |                           |                    |                      |                         |                                                            |                        |
| <b>TOTAL CASH CONTRIBUTIONS THIS PAGE</b>         |                                                                                             |                                                      |                           |                    |                      |                         |                                                            | \$200.00               |



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# FORM 6: Expenditures On Line of Credit by candidate or elected official

**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**

616 MAIN STREET, MONTEVALLO, AL  
35115

|                         |
|-------------------------|
| Administrative          |
| Advertising             |
| Consultants/<br>Polling |
| Contribution            |
| Food                    |
| Fundraising             |
| Lodging                 |
| Transportation          |
| Interest                |

7/7/2020.

\$ 561.00

616 MAIN STREET, MONTEVALLO, AL  
35115

7/13/2020

\$ 148.50

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TOTAL EXPENDITURES THIS PAGE

\$ 709.50