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Shelby Cnty Judge of Probate, AL
08/05/2020 08:50:57 AM FILED/CERT

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official Christopher R VanCleave		Political Party/Ballot Affiliation Republican	
Office Sought or Held (include district or circuit number, if applicable) Helena City Council - Place 2			
Address ☐ Check box if reporting new address 148 Appleford Rd			
City Helena	State AL	ZIP Code 35080	Telephone Number [REDACTED]

Type of Report (check one)

☒ Monthly☐ Amended Monthly☐ Weekly☐ Amended WeeklyFor Monthly Reports
Month for which the
report is filed.

June 2020

For Weekly Reports
Date of Friday in the
week for which the
report is filed.Total Number of
Pages in Report

6

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	\$0.00
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	\$440.00
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$440.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	\$75.00
3b	Non-itemized in-kind contributions	3b	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$75.00
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	\$500.00
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$500.00
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	\$497.20
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	\$497.20
Expenditures on Line of Credit			
6a	Itemized expenditures (total from Form 6)	6a	
6b	Non-itemized expenditures	6b	
6c	Total expenditures on credit (add lines 6a and 6b)	6c	\$0.00
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	\$442.80

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

Date

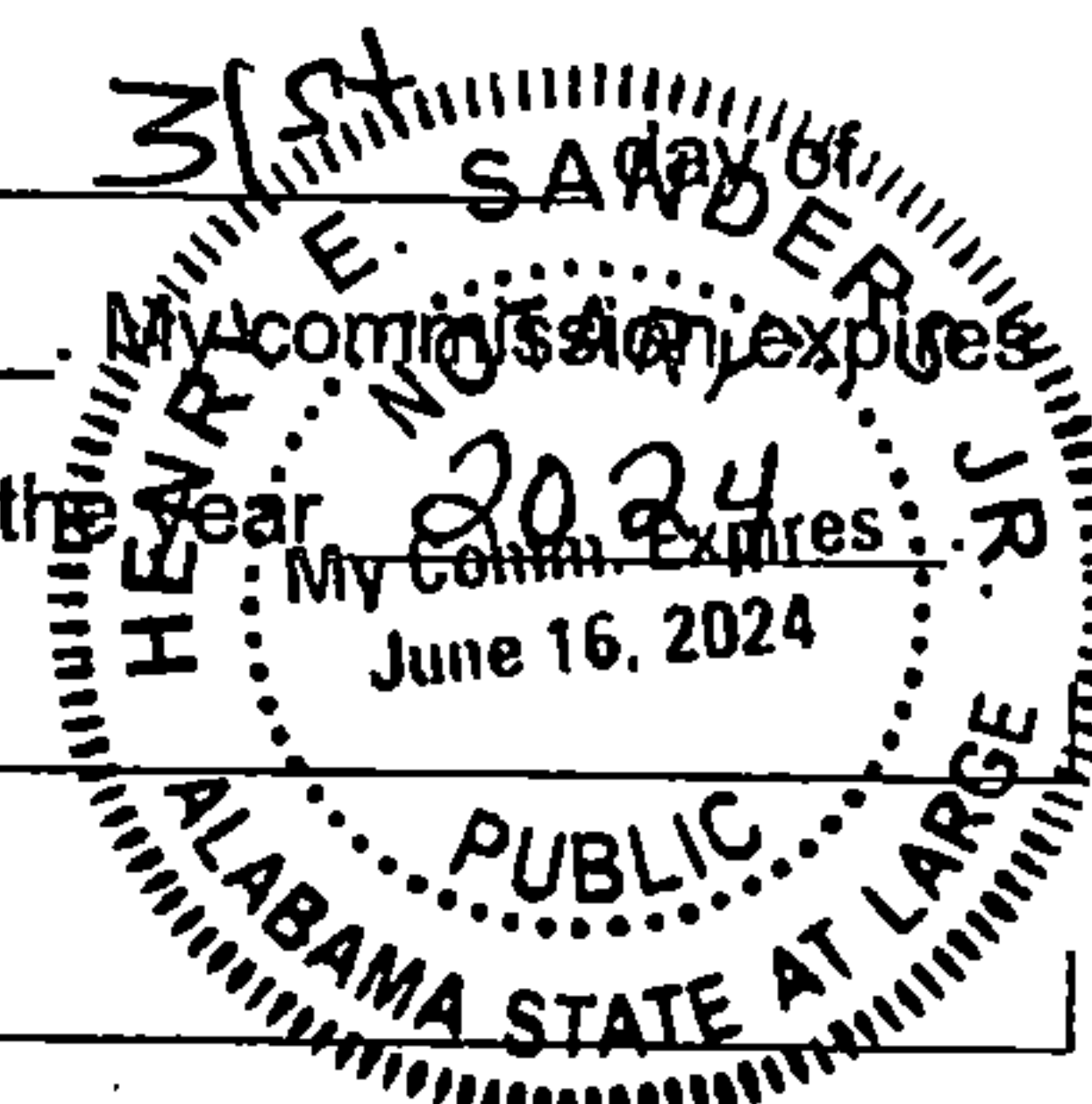
Sworn to and subscribed before me this

July of the year 2020

the 16th day of June

of the year 2024

Signature of Notary Public

Henry E Sanders Jr
Print Notary's Name

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Christopher R VanCleave



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 [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other			
Christopher R VanCleave	148 Appleford Rd Helena AL 35080		☒					☒				6/1/2020	\$500.00
TOTAL RECEIPTS THIS PAGE												\$500.00	



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Christopher R VanCleave

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
Southern Nameplate	1510 4th Ave N Bessemer AL 35020		✓									6/3/2020	\$248.60
Southern Nameplate	1510 4th Ave N Bessemer AL 35020		✓									6/10/2020	\$248.60
TOTAL EXPENDITURES THIS PAGE												\$497.20	



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