

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY



20200814000353070 1/2 \$.00  
Shelby Cnty Judge of Probate, AL  
08/14/2020 04:06:07 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official <b>Bridgette Jordan Smith</b>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <b>Mayor</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>PO BOX 171</b>			
City <b>Vincent</b>	State <b>AL</b>	ZIP Code <b>35778</b>	Telephone Number <b>[REDACTED]</b>

Type of Report (check one)

- ☐ Monthly ☐ Amended Monthly  
☒ Weekly ☐ Amended Weekly

For Monthly Reports  
Month for which the report is filed.

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

Total Number of Pages in Report

**2**

## Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	<b>3775.00</b>
<b>Cash Contributions</b>				
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		\$0.00
<b>In-Kind Contributions</b>				
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		\$0.00
<b>Receipts from Other Sources</b>				
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		\$0.00
<b>Expenditures</b>				
5a	Itemized expenditures (total from Form 5)	5a	<b>304.94</b>	
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c		\$0.00
<b>Expenditures on Line of Credit</b>				
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	<b>3470.06</b>	<b>3775.00</b>

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 **14<sup>th</sup>** day of **Aug** of the year **2020**. My commission expires the **17<sup>th</sup>** day of **March** of the year **2024**.

Signature of Notary Public

Print Notary's Name

## NAME OF POLITICAL ACTION COMMITTEE:

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	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
Mcconn Enterprises	Vincent AL	<input checked="" type="checkbox"/>										7/31/2020	200
Wal Mart	Pell city, al	<input checked="" type="checkbox"/>										7/25/2020	104.99
													304.99



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**TOTAL EXPENDITURES THIS PAGE**

**FORM REVISED 9.2.2011**



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