



# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20200817000354670 1/3 \$.00  
Shelby Cnty Judge of Probate, AL  
08/17/2020 01:09:27 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Laura Joseph		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) Helena City Council, Place 4			
Address <input type="checkbox"/> Check box if reporting new address 2225 Old Cahaba Pl.			
City Helena	State AL	ZIP Code 35080	Telephone Number [REDACTED]

Type of Report (check one)

☐ Monthly☐ Amended Monthly☒ Weekly☐ Amended Weekly

For Monthly Reports

Month for which the report is filed.

August

For Weekly Reports

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

8/7/2020

Total Number of Pages in Report

3

## Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	\$400.73
<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		\$325.00
4b	Non-itemized Receipts from Other Sources	4b		
4c	Total receipts from other sources (add lines 4a and 4b)	4c		\$325.00
<b>Expenditures</b>				
5a	Itemized expenditures (total from Form 5)	5a		\$130.18
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c		\$130.18
<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		\$595.55

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.

*Laura Joseph*  
Signature of Candidate or Elected Official

8-11-2020  
Date

Sworn to and subscribed before me this 11 day of August of the year 2020. My commission expires the 8 day of December of the year 2020.

*Amanda C Traywick*  
Signature of Notary Public

*Amanda C Traywick*  
Print Notary's Name

**NAME OF CANDIDATE OR ELECTED OFFICIAL:** Laura Joseph

**DO NOT LIST** cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

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**NAME OF CANDIDATE OR ELECTED OFFICIAL:** Laura Joseph

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

FORM REVISED 10.27.2011