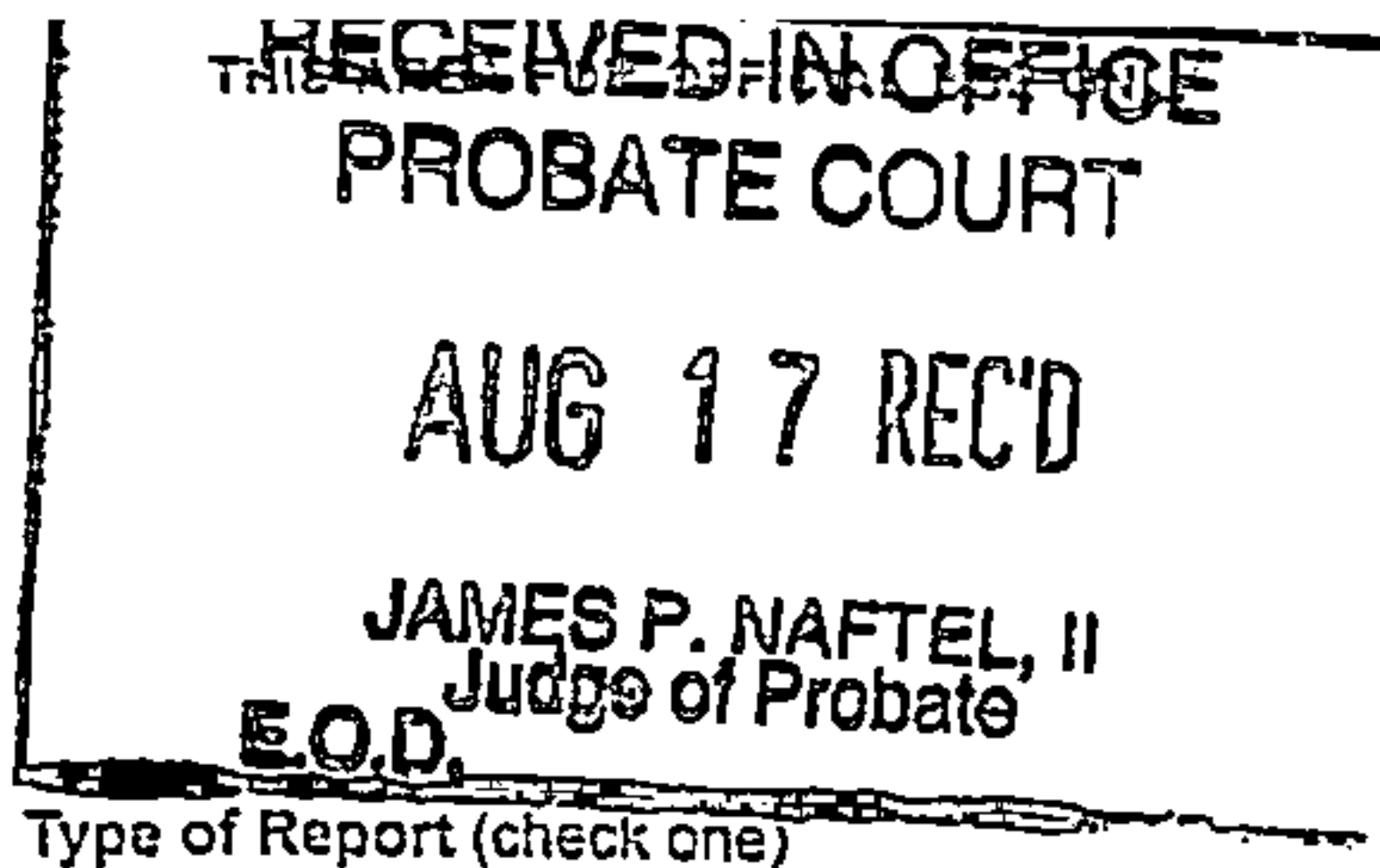


MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official
Campaign Finance Report
SUMMARY FORM 1



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

Please Print in Ink or Type.

Name of Candidate or Elected Official <u>David Miller</u>	Political Party/Ballot Affiliation
Office Sought or Held (include district or circuit number, if applicable) <u>Mayor</u>	
Address ☐ Check box if reporting new address <u>1036 Diane St</u>	
City <u>Leeds</u> State <u>AL</u> ZIP Code <u>35094</u> Telephone Number <u>205</u>	

Month for which the report is filed.
Date of Friday in the week for which the report is filed. <u>8-14-20</u>
Total Number of Pages in Report <u>6</u>

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		1 <u>0.00</u>
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a <u>3330.00</u>	
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c <u>3330.00</u>	
In-Kind Contributions			
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 <u>0.00</u>	
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a <u>900.00</u>	
4b	Non-itemized Receipts from Other Sources	4b <u>50.00</u>	
4c	Total receipts from other sources (add lines 4a and 4b)	4c <u>950.00</u>	
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a <u>150.00</u>	
5b	Non-itemized expenditures	5b <u>316.58</u>	
5c	Total expenditures (add lines 5a and 5b)	5c <u>466.58</u>	
Expenditures on Line of Credit			
6a	Itemized expenditures (total from Form 6)	6a <u>0</u>	
6b	Non-itemized expenditures	6b <u>0</u>	
6c	Total expenditures on credit (add lines 6a and 6b)	6c <u>0</u>	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7 <u>3713.42</u>	

County Division Code: AL040
Inst. # 2020089343 Pages: 1 of 6
I certify this instrument filed on
8/18/2020 8:24 AM Doc: ELCAPRE
Judge of Probate
Jefferson County, AL.

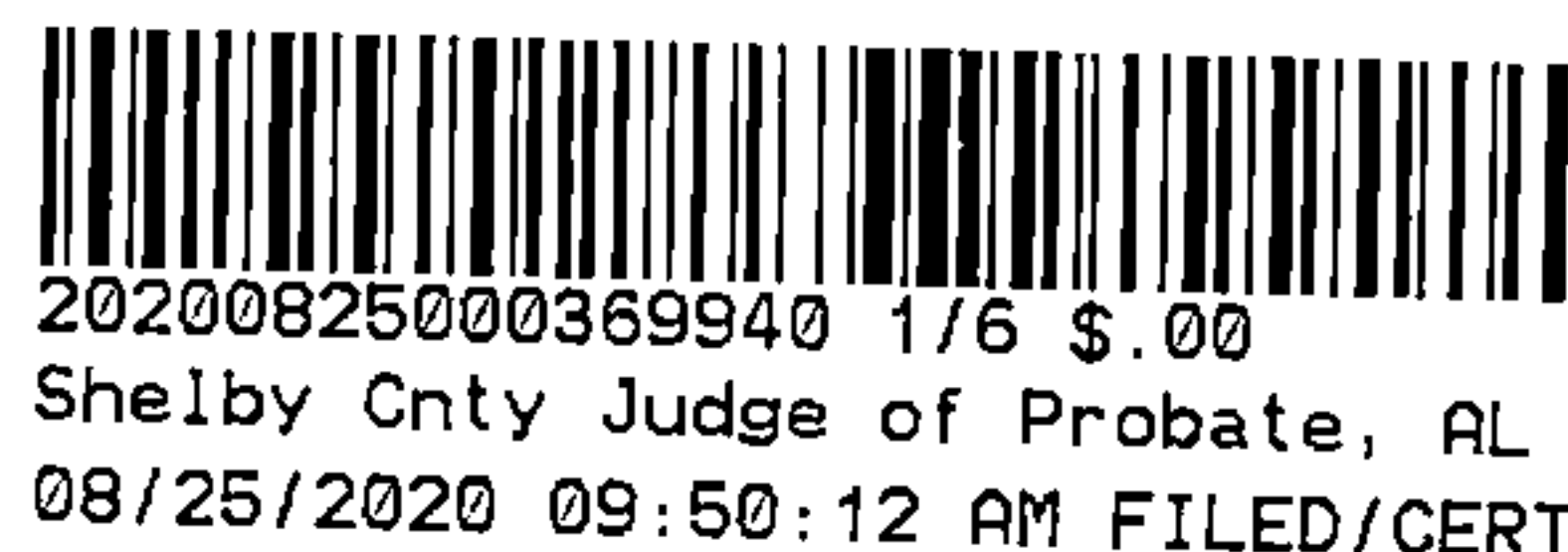
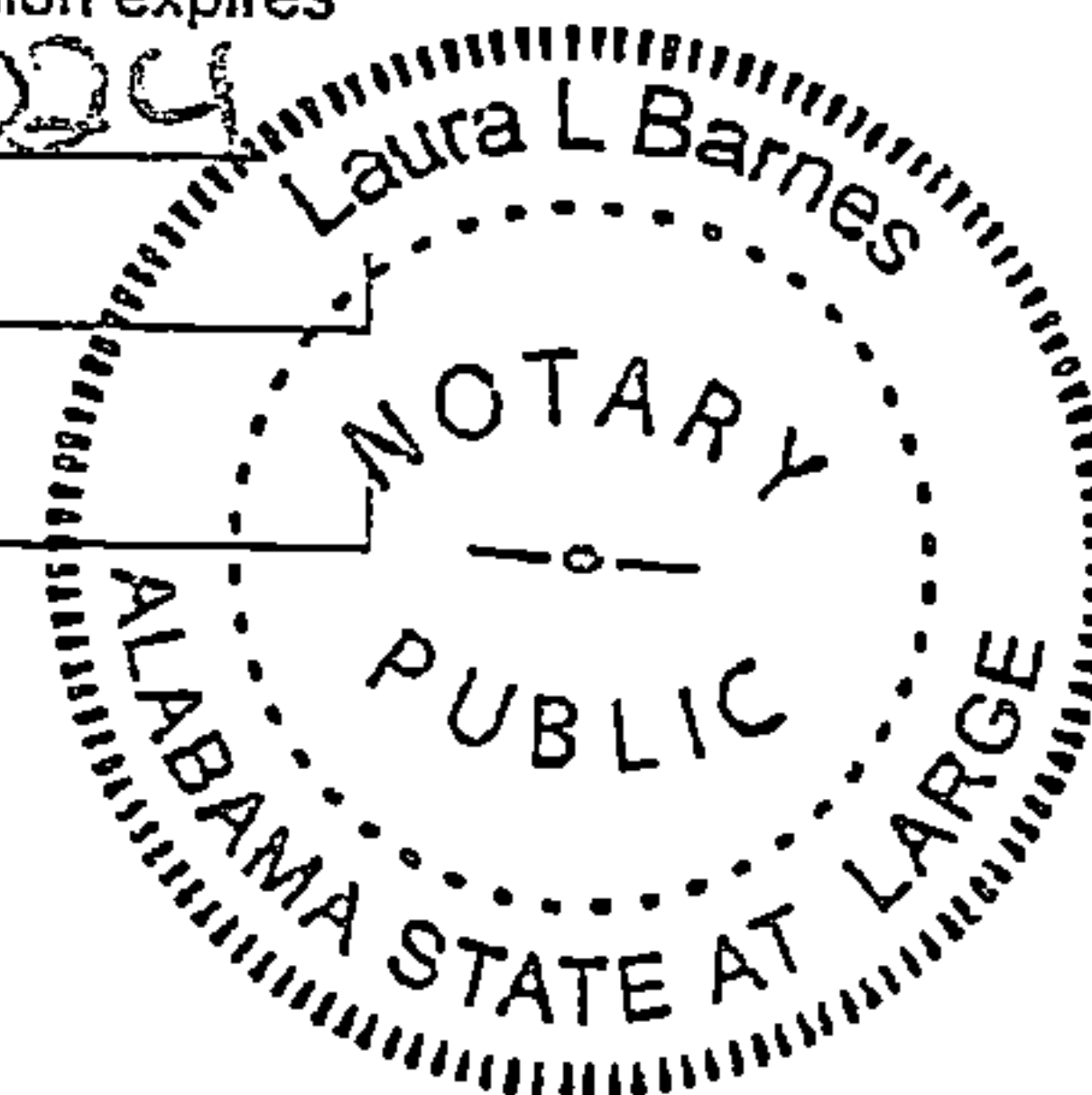
Clerk: SMITHMO

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 [Signature] Date 8-14-20

Sworn to and subscribed before me this 14th day of Aug of the year 2020. My commission expires the 4th day of Feb of the year 2024.

Signature of Notary Public [Signature]
Print Notary's Name Laura L. Barnes



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: David Miller

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.
DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)						DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned			
John R. Frawley Sr	7208 CANAWBA LN Leeds AL 35094		☒					7-30-20	230.00
Virgil Hankford	1413 Ashville Rd Leeds AL 35094		☒					8-3-20	100.00
Ragerco LLC	1025 MONTGOMERY HWY VESTALIA HILLS AL 35216	☒						8-7-20	3000.00
TOTAL CASH CONTRIBUTIONS THIS PAGE									3330.00

FORM REVISED 10.27.2011



20200825000369940 2/6 \$.00
Shelby Cnty Judge of Probate, AL
08/25/2020 09:50:12 AM FILED/CERT

FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: David Miller

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 loans on this form. Use Forms 2 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)										SOURCE (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other					
FORM REVISED 10.27.2011		TOTAL IN-KIND CONTRIBUTIONS THIS PAGE														\$0.00		

NONE



20200825000369940 3/6 \$.00
Shelby Cnty Judge of Probate, AL
08/25/2020 09:50:12 AM FILED/CERT

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: David Miller

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 GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)						DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other			
DAVID Miller	1036 Dime St Leeds AL 35094		☒		DAVID Miller 5036 Dime St Leeds			☒				7-8-20 7-9-20	50.00
DAVID Miller	1036 Dime St Leeds AL 35094		☒		DAVID Miller 1036 Dime St Leeds AL 35094			☒				7-15-20	900.00
FORM REVISED 10.27.2011												TOTAL RECEIPTS THIS PAGE	950.00



20200825000369940 4/6 \$.00
Shelby Cnty Judge of Probate, AL
08/25/2020 09:50:12 AM FILED/CERT

David Miller



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		
CITY OF Leeds	1400 9TH ST Leeds AL 35094	☒									Dual Fee	7-8/20	50.00
Will Brunson	PARKWAY DR Leeds AL 35094		☒								SEPA LABOR	8-17-20	100.00
David Miller	1036 DIXIE ST Leeds AL 35094						☒				Reimburse	8-19-30	150.00
LEEDS QB Club	Parkway DR Leeds AL 35094		☒									8-11-30	50.00
Leeds Church	BETHVILLE RD Leeds AL 35094								☒	Fuel	8-13-30	18.71	
STAPLOS INC. 5 Edwards Lake Rd	1905 EDWARDS LAKE RD	☒								Supplies	8-13-30	97.87	
TOTAL EXPENDITURES THIS PAGE												466.58	

FORM REVISED 10.27.2011

TOTAL EXPENDITURES THIS PAGE

466.58
375.12



20200825000369940 5/6 \$.00
Shelby Cnty Judge of Probate, AL
08/25/2020 09:50:12 AM FILED/CERT

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: David Miller



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	Contribution	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION		
TOTAL EXPENDITURES THIS PAGE												\$0.00	

FORM REVISED 5.19.2017

NONE



20200825000369940 6/6 \$.00
Shelby Cnty Judge of Probate, AL
08/25/2020 09:50:12 AM FILED/CERT