Shelby Cnty Judge of Probate, AL

Type of Report (check one)

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FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Conservation of activities aim as look file of wars and

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

| | | Monthly | Amended Monthly |
|---|------------------------------------|--------------------------------------|-------------------|
| Please Print in Ink or Ty | | | ☐ Amondod \Mookky |
| Name of Candidate or Elected Official | Political Party/Ballot Affiliation | i ₩eekly | Amended Weekly |
| FICK WASH | | For Monthly Reports | ~ |
| Office Sought or Held (include district or circuit number, if applica | ble) | Month for which the report is filed. | |
| PELHAM CITY Lowe | | For Weekly Reports | |
| Address | | Date of Friday in the | |
| 106 INDIAL LANDING R | | week for which the report is filed. | 9-25-2026 |
| | ZIP Code Telephone Number | Total Number of | |
| PELHAM AL 351 | 24/ | Pages in Report | |
| | | | |

| 3 | ummary of activity since last med report | | | | |
|----|---|----|--------|----|----------------|
| 1 | Beginning balance (ending balance from previous filing) | | | 1 | 1,17500 |
| | Cash Contributions | | | | |
| 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 | 753. 00 |
| | In-Kind Contributions | | | | |
| 3a | Itemized in-kind contributions (total from Form 3) | 3a | | | |
| 3b | Non-itemized in-kind contributions | 3b | | | |
| 3с | Total in-kind contributions (add lines 3a and 3b) | 3с | \$0.00 | | |
| | Receipts from Other Sources | | | | |
| 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 | • \$ |
| | Expenditures | | | | |
| 5a | Itemized expenditures (total from Form 5) | 5a | 2000 | | |
| 5b | Non-itemized expenditures | 5b | | | |
| 5с | Total expenditures (add lines 5a and 5b) | | | 5c | 2000 |
| | 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) | 6с | \$0.00 | | |
| 7 | Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) | | | 7 | 1155\$ |

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.

| Sworn to and subscribed before me this 24 day of | |
|--|---|
| (September 1000). My commission expire | e |
| the 22 day of 90 of the year 900 | |
| Ressua L. Hollant | |
| Cianda Alabara Dublia | |
| Signature of Notary Public Signature of Notary Public CSICA C. Holland | |

Print Notary's Name

Signature of Candidate or Elected Official

Alabama Fair Campaign Practices Act

| \$0.00 | S PAGE | SIHT | SNO. | T O | | ONTRIB | TOTAL CASH CO | |
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| CONTRIBUTION | CONTRIBUTION RECEIVED (mo./day/yr.) | Returned | Other | PAC | Individual | Business or Corporation | (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | (INCLUDE FULL NAME) |
| | | N | SE SE | NTRICK C | (C C C S | QF | 0 | 7 |
| r those listings. | Forms 3 and 4 for | . Use | form. | this | s on | or loan | n \$100 be itemized. DO NOT LIST in-kind contributions | The FCPA requires that those contributions greater |
| 2 OF 8 | PAGE | | | | | | Rick dellash | NAME OF CANDIDATE / ELECTED OFFICIAL: |

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ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

In-Kind Contributions received by candidate or elected official

CANDIDATE OR ELECTED OFFICIAL:

NAME OF



| PO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings. MATURE OF CONTRIBUTION ADDRESS SHOULD INCLUDE (ADDRESS SHOULD INCLUDE ACTION FO. BOX, CITY, STRIEL, AND ZIP) STREET OR PO. BOX, CITY, STRIEL, AND ZIP) Add wettlating in the plant of | \$0.00 | IIS PAGE | 4 | S | TIO | IBU: | I R | O Z | ၂ | | Z | AL I | 10 | <u>-</u> | | FORM REVISED 10.27.2011 |
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| nen total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemiz DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings. | | ł | E) | RCE | SOU HEC | <u> </u> | | NOIL | <u>B</u> | ON ON | 아드 C 가든C | URE | NAT | | | |
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ALABAMA FAIR CAMPAIGN PRACT **ICES** ACT CAMPAIGN FINANCE REPORT OR R ANDID ATE/ELECTED OFFICIAL

Receipts 9 est, and other S ources of income

NAME OF CANDIDATE OR ELECTE D OFFICIAL:

FORM REVISED 9.2.2011 SOURCE OF RECEIPT (INCLUDE FULL NAME) When total contributions ADDRESS SHOULD IF STREET OR P.O F DO NOT LIST from P.O. BOX, E, AND ZIP) മ single cash or in-kind source (D exceed 유 Interest contributions FORM Loan ₩ 00.00 Other on this [FCPA REQUIRES F PLETE ADDRESS (DORSING OR GU the COMPLETE form. GUARANTORS equir. Use S FULL NAME AND COM-SS OF INDIVIDUAL(S) EN-GUARANTEEING LOAN] Þ BLOCK es orms <u>a</u> TOTAL ontributions N Ŧ and RECEIPT ယ ਠ੍ਹਾਂ RECEIPTS those from Lending that listings. RECEIPT (CHEC Institution source PAC SIHT Individual XONE) ರ Business PAGE be 0 Other itemized. $\widehat{\Xi}$ 刀 Õ ECEIVED ./day/уг.) AMOUNT OF RECEIPT Ş 0 00

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Alabama Fair Campaign Practices

NAME OF CANDIDATE / ELECTED OFFICIAL:

BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUT CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES

The FCPA requires that expenditures over \$100 be itemized.

| TO OSA | AGE | URES THIS P | | PEN | EX | Æ | 0 | | | | | FORM REVISED 10.29.99 |
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| # 2002 | 22/60 | | | , | | | , | | | | 111/80102 | RACK BOOK |
| AMOUNT OF EXPENDITURE | EXPENDITURE (mo./day/yr.) | OTHER GIVE BRIEF EXPLANATION | Transportation | Repayment Lodging | Loan | Food Fundraising | Contribution | Polling | Advertising Consultants/ | Advantation | ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) |
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ABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

NAME OF CANDIDATE OR ELECTED OFFICIAL: Expendi itures On Credit MSA by candidate or elected official



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

| \$ 0.00 | AGE | TURES THIS P | | PEN | EX | 2 | E O | | | | | | FORM REVISED 5.19.2017 |
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| AMOUNT OF EXPENDITURE | EXPENDITURE (mo./day/yr.) | OTHER GIVE BRIEF EXPLANATION | Interest | Transportation | Lodging | Fundraising | Food | Contribution | Consultants/ Polling | Advertising | Administrative | ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) |
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