MONTHLY & WEEKLY

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

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20201130000545780 1/1 \$.00 Shelby Cnty Judge of Probate, AL 11/30/2020 03:46:09 PM FILED/CERT

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				Monthly	Amended Monthly
	Please Print in I	nk or Type.		V-7/10/00-14/4	
Name of Candidate or Elected Official			Political Party/Ballot Affiliation	Weekly	Amended Weekly
BECKY BE	=ALL			For Monthly Reports Month for which the	
Office Sought or Held (include district or	circuit number, if	applicable)		report is filed.	
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Pelham,	ピデナリ	Con	ver/ Place 4	For Weekly Reports	
Address Check box if reporting new	· · · · · · · · · · · · · · · · · · ·			Date of Friday in the	
P. O. Box	485			week for which the report is filed.	11-27-20
City 🛆 🔥	State	ZIP Code	Telephone Number	Total Number of	<u></u>
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	,_/1			Pages in Report	L
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S	ummary of activity since last filed report				
1 Beginning balance (ending balance from previous filing)				1	504.17
	Cash Contributions			_ 133	
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
	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	\$0.00		
	Receipts from Other Sources	44, 5			
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)	4 / T		4c	\$0.00
	Expenditures				
5a	Itemized expenditures (total from Form 5)	5a		-	
5b	Non-itemized expenditures	5b			
5c	Total expenditures (add lines 5a and 5b)		Sav Ca	5c	\$0.00
	Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a			
6b	Non-itemized expenditures	6b	~~~~~	3	
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	8045020

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 Carwindate or Elected Official Date

Date

Vickina Vickina

Sworn to and subscribed before me this 304

 $\underline{\hspace{0.5cm}}$ of the year $\underline{\hspace{0.5cm}}$

Signature of Notary Public

Print Notary's Name

VICKI MARTINA

_. My commission expires

Notary Public, Alabama State At Large My Commission Expires 2/9/2021

FORM REVISED 06.06.2017