



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY

20210104000001480 1/6 \$.00
Shelby Cnty Judge of Probate, AL
01/04/2021 11:28:13 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Michael Mehlhoff		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) Alabaster City Council, Ward 5			
Address ☐ Check box if reporting new address 108 Kentwood Trail Circle			
City Alabaster	State Alabama	ZIP Code 35007	Telephone Number [REDACTED]

Type of Report (check one)

☒ Monthly☐ Amended Monthly☐ Weekly☐ Amended WeeklyFor Monthly Reports
Month for which the
report is filed.**October 2020**For Weekly Reports
Date of Friday in the
week for which the
report is filed.Total Number of
Pages in Report

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	\$277.46
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	\$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			
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
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	\$7.00
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	\$7.00
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)	6c	\$0.00
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	\$270.46

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]
Signature of Candidate or Elected Official

12/30/20
Date

Sworn to and subscribed before me this 30th day of December of the year 2020. My commission expires the 11th day of March of the year 2022.

[Signature]
Signature of Notary Public

Heather Holmes
Print Notary's Name

NAME OF CANDIDATE OR ELECTED OFFICIAL: Michael Mehlhoff

[illegible]

\$0.00



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FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Michael Mehlhoff

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	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation			OTHER GIVE BRIEF EXPLANATION
Regions Bank	33 Kentstone Way Alabaster, AL 35007	✓										10/30/2020	\$7.00
TOTAL EXPENDITURES THIS PAGE												\$7.00	

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NAME OF CANDIDATE OR ELECTED OFFICIAL: Michael Mehlhoff

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		Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION		
TOTAL EXPENDITURES THIS PAGE												\$ 0.00	



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FORM REVISED 5.19.2017

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