Name of Candidate or Elected Official



Office Sought or Held (include district or circuit number, if applicable)

attached report(s) and the information contained herein are

statement of all contributions, expenditures, and other required

information during the applicable period of time.

Signature of Candidate of Elected Official

FORM REVISED 06.06.2017

true and correct and that this information is a full and complete the quantity day of ____

Check box if reporting new address

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

ZHIS	AREA	FOR	OFFICIAL	116=	OMI '
1 1112	MUEW	FUR	OFFICIAL	USE	UNL



Shelby Cnty Judge of Probate, AL 01/11/2021 03:07:26 PM FILED/CERT

Amended Monthly

Amended Weekly

Type of Report (check one)

Monthly

Weekly

For Monthly Reports

Month for which the

For Weekly Reports

Date of Friday in the

 $\frac{3a}{2}$ of the year $\frac{202}{}$. My commission expires

Signature of Notary Public

Print Notary's Name

Feb_ of the year 202

VICKI MARTINA

Notary Public, Alabama State At Large

My Commission Expires 2/9/2021

report is filed.

	P.O. Box 485			week for which report is filed.	the	1-8-21
City	POND State ZIP Code Telephone Nu	mber	_	Total Number		
	1 011001			Pages in Rep	ort	
S	ummary of activity since last filed report					
1	Beginning balance (ending balance from previous filing)		· · · · · · · · · · · · · · · · · · ·		1	4
	Cash Contributions					
2a	Itemized cash contributions (total from Form 2)	2a				
2b	Non-itemized cash contributions	2b	(200-	-	
2c	Total cash contributions (add lines 2a and 2b)				2c	20(3066)
	In-Kind Contributions					
3a	Itemized in-kind contributions (total from Form 3)	3a	<u> </u>]-	
3b	Non-itemized in-kind contributions	3b			 	
3c	Total in-kind contributions (add lines 3a and 3b)	3с		\$0.00	3	
	Receipts from Other Sources				.	
4a	Itemized Receipts from Other Sources (total from Form 4)	4a		<u> </u>		
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		200-].	
5b	Non-itemized expenditures	5b				
5c	Total expenditures (add lines 5a and 5b)				5c	200,68
	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	
	equired by the Alabama Fair Campaign Practices Act, I hereby ar or affirm to the best of my knowledge and belief that the	rn to	and subscr	ibed before me	this	ء ا ما ام

Political Party/Ballot Affiliation

& ELECT ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE

or elected official Expenditures by candidate FORM 5:

NAME OF CANDIDATE OR ELECTED OFFICIAL:

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

		PURPOSE OF EXPENDITURE (CHECK ONE)		
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Advertising Consultants/ Polling Contribution Food Food Fundraising Loan Loan Loan Exprant	R EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
Becky Beall	asse Datton Br Pelham Al 35124		128-1	\$200°
Shel 01/1				
01110000 by Cnty 1/2021 03				
Judge of 3:07:26 P				
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AL				
FORM REVISED 9.2.2011		TOTAL EXPENDITURES T	HIS PAGE	a Halling