


**FAIR CAMPAIGN PRACTICES ACT**  
**STATE OF ALABAMA**

 County Division Code: AL040  
 Inst. # 2021077059 Pages: 1 of 6  
 I certify this instrument filed on  
 7/2/2021 2:42 PM Doc: ELCAPRE  
 Judge of Probate  
 Jefferson County, AL.

Clerk: SMITHMO

AREA FOR OFFICIAL USE ONLY

**RECEIVED IN OFFICE**  
**PROBATE COURT**

JUL 02 2021

 JAMES P. NAFTEL, II  
 Judge of Probate

E.O.D.

# Candidate & Elector

## Campaign Finance Report

### SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official <b>DAAGUE HENDRICKS</b>		Political Party/Ballot Affiliation <b>DEMOCRAT</b>	
Office Sought or Held (include district or circuit number, if applicable) <b>BIRMINGHAM BOARD OF EDUCATION</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>3410 NORWOOD BLVD</b>			
City <b>BIRMINGHAM</b>	State <b>AL</b>	ZIP Code <b>35234</b>	Telephone Number <b>205-587-2910</b>

Type of Report (check one)

- ☒ Monthly ☐ Amended Monthly  
☐ Weekly ☐ Amended Weekly

 For Monthly Reports  
 Month for which the  
 report is filed.

JUNE 2021

 For Weekly Reports  
 Date of Friday in the  
 week for which the  
 report is filed.

 Total Number of  
 Pages in Report

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**Summary of activity since last filed report**

1	Beginning balance (ending balance from previous filing)	1	<b>0</b>
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a	<b>0</b>
2b	Non-itemized cash contributions	2b	<b>200.00</b>
2c	Total cash contributions (add lines 2a and 2b)	2c	<b>200.00</b>
<b>In-Kind Contributions</b>			
3a	Itemized in-kind contributions (total from Form 3)	3a	<b>0</b>
3b	Non-itemized in-kind contributions	3b	<b>0</b>
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<b>0.00</b>
<b>Receipts from Other Sources</b>			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<b>0</b>
4b	Non-itemized Receipts from Other Sources	4b	<b>0</b>
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<b>0.00</b>
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a	<b>0</b>
5b	Non-itemized expenditures	5b	<b>0</b>
5c	Total expenditures (add lines 5a and 5b)	5c	<b>0.00</b>
<b>Expenditures on Line of Credit</b>			
6a	Itemized expenditures (total from Form 6)	6a	<b>0</b>
6b	Non-itemized expenditures	6b	<b>0</b>
6c	Total expenditures on credit (add lines 6a and 6b)	6c	<b>0.00</b>
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	<b>200.00</b>

 20210709000334290 1/6 \$0.00  
 Shelby Cnty Judge of Probate, AL  
 07/09/2021 02:10:26 PM FILED/CER

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

Date

 Sworn to and subscribed before me this 2nd day of July of the year 2021. My commission expires the 27th day of September of the year 2022.

Signature of Notary Public

Print Notary's Name



NAME OF CANDIDATE OR ELECTED OFFICIAL: 7/11/15 1720 DICK

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.

[illegible]

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



NAME OF CANDIDATE OR ELECTED OFFICIAL: DARLENE HENDRICKS

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



NAME OF CANDIDATE OR ELECTED OFFICIAL: DAVE HEDRICK

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.

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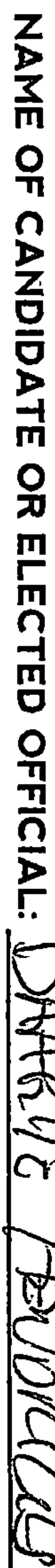


# FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: DANIEL HADLOCK

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	Loan Repayment	Lodging			Transportation
<p>20210709000334290 5/6 \$.00 Shelby Cnty Judge of Probate, AL 07/09/2021 02:10:26 PM FILED/CERT</p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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TOTAL EXPENDITURES THIS PAGE											\$ 0.00	



**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**

202107090000334290 6/6 \$.00  
Shelby Cnty Judge of Probate, AL  
07/09/2021 02:10:26 PM FILED/CERT

Administrative
Advertising
Consultants/ Polling
Contribution
Food
Fundraising
Lodging
Transportation
Interest

**OTHER**  
**GIVE**  
**BRIEF**  
**EXPLANATION**

TOTAL EXPENDITURES THIS PAGE