



County Division Code: AL040
Inst. # 2021076272 Pages: 1 of 6
I certify this instrument filed on
7/1/2021 3:47 PM Doc: ELCAPRE
Judge of Probate
Jefferson County, AL.

Clerk: PEEPLESC

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official Valerie A. Abbott		Political Party/Ballot Affiliation NA	
Office Sought or Held (include district or circuit number, if applicable) City Council - District 3			
Address ☐ Check box if reporting new address 15 Glen Iris Park S.			
City Birmingham	State AL	ZIP Code 35205	Telephone Number [REDACTED]

Type of Report (check one)

- ☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

For Monthly Reports
Month for which the
report is filed.

June '21

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	\$ 7,242.36
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$ 2250.00	
2b	Non-itemized cash contributions	2b	0.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$ 2250.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	0.00	
3b	Non-itemized in-kind contributions	3b	0.00	
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	0.00	
4b	Non-itemized Receipts from Other Sources	4b	0.00	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$0.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	6057.00	
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c	\$ 6057.00	
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	3435.36	

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.

Valerie A. Abbott **7-1-21**
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this **1st** day of **July** of the year **2021**. My commission expires the **4th** day of **June** of the year **2023**.

Elizabeth Lynn Hutchins
Signature of Notary Public

Elizabeth Lynn Hutchins
Print Notary's Name



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Valerie A. Abbott

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
Larry Ward	4460 Clairmont Ave., Bham 35222	☐	☒	☐	☐	☐	6/1/21	\$ 1000.00
Millenium PAC	2117 2ND Ave. N, Bham 35203	☐	☐	☒	☐	☐	6/16/21	\$ 250.00
Larry Ward	4460 Clairmont Ave., Bham 35222	☐	☒	☐	☐	☐	6/20/21	\$ 1000.00
		☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐		
								\$ 2250.00

TOTAL CASH CONTRIBUTIONS THIS PAGE



20210709000334680 2/6 \$.00
Shelby Cnty Judge of Probate, AL
07/09/2021 02:39:45 PM FILED/CERT



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Valerie A. Abbott

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
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other			
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐		
		☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐ </				



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Valesie A. Abbott

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			OTHER GIVE BRIEF EXPLANATION
Starnes Media	P.O. Box 530341, Bham 35253	☐	☒	☐	☐	☐	☐	☐	☐	☐	—	6/1/21	\$4,358.00
Starnes Media	P.O. Box 530341, Bham 35253	☐	☒	☐	☐	☐	☐	☐	☐	☐		6/30/21	\$1,699.00
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
		☐	☐	☐	☐	☐	☐	☐	☐	☐			
TOTAL EXPENDITURES THIS PAGE												\$6,057.00	

20210709000334680 5/6 \$.00
Shelby Cnty Judge of Probate, AL
07/09/2021 02:39:45 PM FILED/CERT



FORM 6: Expenditures On Line of Credit by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

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

[illegible]