

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official
Campaign Finance Report
SUMMARY FORM 1

RECEIVED IN OFFICE
PROBATE COURT THIS AREA FOR OFFICIAL USE ONLY

AUG 02 2021

County Division Code: AL040
Inst. # 2021088726 Pages: 1 of 6
I certify this instrument filed on
8/2/2021 11:41 AM Doc: ELCAPRE
Judge of Probate
Jefferson County, AL.

Clerk: HENLEYT



20210810000389060 1/6 \$.00
Shelby Cnty Judge of Probate, AL
08/10/2021 02:10:58 PM FILED/CERT

Report (check one)

☐ Monthly ☐ Amended Monthly
☒ Weekly ☐ Amended Weekly

For Monthly Reports
Month for which the
report is filed.

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

Total Number of
Pages in Report

7/30/21
6

Please Print in Ink or Type.

Name of Candidate or Elected Official
William Parker

Office Sought or Held (include district or circuit number, if applicable)
Birmingham City Council Dist 4

Address ☐ Check box if reporting new address
3116 33rd Place North

City **Birmingham** State **AL** ZIP Code **35207** Telephone Number **[REDACTED]**

Political Party **Democrat**

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	0.00
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	4000
2b	Non-itemized cash contributions	2b	100
2c	Total cash contributions (add lines 2a and 2b)	2c	4000
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
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
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	0
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
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	4100.00

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.

William Parker 8/2/21
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this 2 day of August of the year 2021. My commission expires the 1 day of Dec of the year 2021.

Willie J. Osborne
Signature of Notary Public
Willie J. OSBORNE
Print Notary's Name

**FORM 2: Contributions** received by candidate or elected officialNAME OF CANDIDATE OR ELECTED OFFICIAL: William Parker

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		
LT Benefield	72228 Fairwoods Place Montgomery, AL 36117		<input checked="" type="checkbox"/>				7/20/21	1000
Pride PAC II	PO Box 2663 Tuscaloosa, AL 35403			<input checked="" type="checkbox"/>			7/20/21	1500
Cash PAC	PO Box 2663 Tuscaloosa, AL 35403			<input checked="" type="checkbox"/>			7/20/21	1500
TOTAL CASH CONTRIBUTIONS THIS PAGE								4000


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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			
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																0

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FORM REVISED 10.27.2011

NAME OF CANDIDATE OR ELECTED OFFICIAL: William Parker

DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other		
<div> <div> <div>20210810000389060 4/6 \$.00</div> <div>Shelby Cnty Judge of Probate, AL</div> <div>08/10/2021 02:10:58 PM FILED/CERT</div> </div>  </div>												
TOTAL RECEIPTS THIS PAGE												0

FORM REVISED 10.27.2011



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

[illegible]


NAME OF CANDIDATE OR ELECTED OFFICIAL: William Parker

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	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION		
TOTAL EXPENDITURES THIS PAGE													

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FORM REVISED 5.19.2017

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