County Division Code: AL040 Inst. # 2021097463 Pages: 1 of 3 I certify this instrument filed on: 8/23/2021 11:37 AM

Doc: ELCAPRE Judge of Probate Jefferson County, AL

Clerk: NICOLE



Shelby Cnty Judge of Probate, AL 09/03/2021 11:43:23 AM FILED/CERT

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FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report

FILED IN OFFICE PROBATE COURT

AUG 23 REC'D

JAMES P. NAFTEL, II
Judge of Probate

	The at taket by the	
BE SUMMARI FURNI	Monthly	Amended Monthly
Please Print in Ink or Type. Name of Candidate or Elected Official Political Party/Ballot Affiliation	Weekly	Amended Weekly
Barbara Files - Kenneby NA Office Sought or Held (include district or circuit number, if applicable)	For Monthly Reports Month for which the report is filed.	
Bicminghom City Council, District 8 Address Checkbox if reporting new address 1136 16th Are W	For Weekly Reports Date of Friday in the week for which the	8/20/2021
City State ZIP Code Telephone Number	report is filed.	
Birminghom AL 35204	Total Number of Pages in Report	3
Summary of activity since last filed report		
1 Beginning balance (ending balance from previous filing)	1	1063.30
Cash Contributions		
2a Itemized cash contributions (total from Form 2) 2a 5 6		
 		

1	Beginning balance (ending balance from previous filing)			1	1063.	30
	Cash Contributions					
2a	Itemized cash contributions (total from Form 2)	2ạ	50			
2b·	Non-itemized cash contributions	2b	20	Q.		
2c	Total cash contributions (add lines 2a and 2b)			2c	70	\$0.00
	In-Kind Contributions					
За	Itemized in-kind contributions (total from Form 3)	3a				
3b	Non-itemized in-kind contributions	3b				
3с	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	1000			
5b	Non-itemized expenditures	5b				
5c	Total expenditures (add lines 5a and 5b)			5c	1000	~ \$0.0 0
	Expenditures on Line of Credit					
6a	Itemized expenditures (total from Form 6)	6a				
6b	Non-itemized expenditures	6b				
6c		6с				
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	133.3	() -\$0-00

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
infamation during the applicable period of time.

Signature of Candidate or Elected Official

Sworn to and subscribed before me this

day of _

LOUIS AMES WILLIE LY Notary Public -

· Alabama State at Large My Commission Expires Oct 17, 2023

Print Notary's Name

Date

Signature of Notary Public

FORM REVISED 06.06.2017



20210903000431680 2/3 \$.00 Shelby Cnty Judge of Probate, AL 09/03/2021 11:43:23 AM FILED/CERT

County Division Code: AL040 Inst. # 2021097463 Pages: 2 of 3

ALABAMA FAIR CAMPAIGN PRACTICES ACT:- CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 5: Expenditures 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. PURPOSE OF EXPENDITURE (CHECK ONE) **AMOUNT** DATE OF PERSON/GROUP/BUSINESS ADDRESS OTHER EXPENDITURE (ADDRESS SHOULD INCLUDE RECEIVING EXPENDITURE EXPENDITURE (mo./day/yr.) STREET OR P.O. BOX, CITY, STATE, AND ZIP) GIVE (INCLUDE FULL NAME) BRIEF EXPLANATION Con Cultura LIC 8/20/2021 # 1000 TOTAL EXPENDITURES THIS PAGE FORM REVISED 10.27.2011



20210903000431680 3/3 \$.00 Shelby Cnty Judge of Probate, AL 09/03/2021 11:43:23 AM FILED/CERT

County Division Code: AL040 Inst. # 2021097463 Pages: 3 of 3

ALABAMA FAIR CAMPAIGN PRACTICES, ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 2: Contributions received by candidate or elected official



NAME OF CANDIDATE OR ELECTED OFFICIAL: 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. SOURCE OF CONTRIBUTION (CHECK ONE) DATE . AMOUNT CONTRIBUTOR **ADDRESS** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED (mo./day/yr.) Dobra Files 4724 Terrace 5 Birminghan AL 35208 TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011 ·