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Shelby Cnty Judge of Probate, AL
09/03/2021 11:43:28 AM FILED/CERT



FAIR CAMPAIGN PRACT
STATE OF ALABAMA

MONTHLY & WEEKLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY

FILED IN OFFICE
PROBATE COURT

AUG 19 REC'D

JAMES P. NAFTEL, II
Judge of Probate
E.O.D.

Please Print in Ink or Type.

Name of Candidate or Elected Official	Political Party/Ballot Affiliation		
<u>Yancey Williams, Sr.</u>	<u>Democratic</u>		
Office Sought or Held (include district or circuit number, if applicable)			
<u>Birmingham Board of Education (District 6)</u>			
Address <input type="checkbox"/> Check box if reporting new address			
<u>820 Second Street Southwest</u>			
City	State	ZIP Code	Telephone Number
<u>Birmingham</u>	<u>Al.</u>	<u>35211</u>	<u>[REDACTED]</u>

Type of 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

August 16

6

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	<u>1,435.44</u>
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	<u>450.00</u>	
2b	Non-itemized cash contributions	2b	<u>0</u>	
2c	Total cash contributions (add lines 2a and 2b)	2c	<u>450.00</u>	<u>0.00</u>
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	<u>0</u>	
3b	Non-itemized in-kind contributions	3b	<u>0</u>	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<u>0</u>	<u>\$0.00</u>
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<u>0</u>	
4b	Non-itemized Receipts from Other Sources	4b	<u>0</u>	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<u>0</u>	<u>\$0.00</u>
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	<u>825.67</u>	
5b	Non-itemized expenditures	5b	<u>0</u>	
5c	Total expenditures (add lines 5a and 5b)	5c	<u>825.67</u>	<u>\$0.00</u>
Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a	<u>0</u>	
6b	Non-itemized expenditures	6b	<u>0</u>	
6c	Total expenditures on credit (add lines 6a and 6b)	6c	<u>0</u>	<u>\$0.00</u>
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	<u>1,059.77</u>	<u>\$0.00</u>

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

FORM REVISED 06.06.2017

Sworn to and subscribed before me this 19th day of August of the year 2021. My commission expires

the 22nd day of March of the year 2023.

Signature of Notary Public

Print Notary's Name

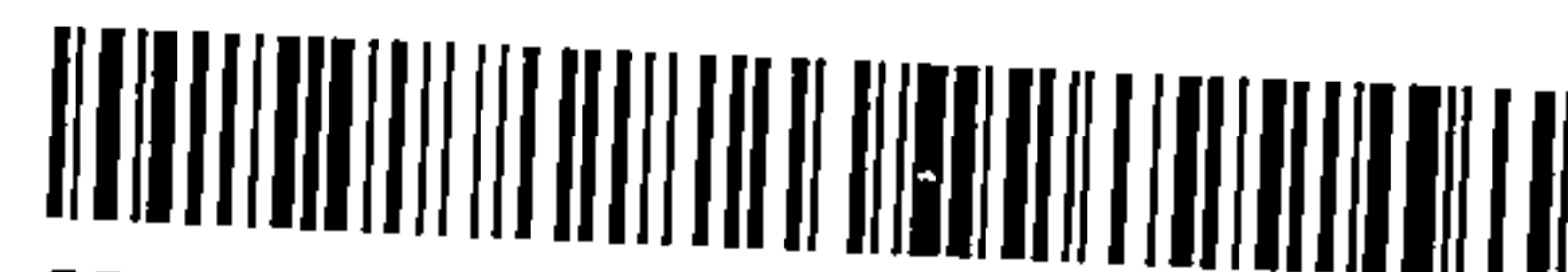
ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL



NAME OF CANDIDATE OR ELECTED OFFICIAL: Yancey Williams, Sr.

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		
Theron & Clara Woods	1211 Center Street North Birmingham, Alabama 35204		<input checked="" type="checkbox"/>				8/10/21	100.00
Direna Harris	9 Springhaven Circle SW Birmingham, Alabama 35211		<input checked="" type="checkbox"/>				8/9/21	150.00
WA 3902 B'ham AAC	210 Summit Parkway Homewood, Alabama 36009			<input checked="" type="checkbox"/>			8/12/21	200.00
TOTAL CASH CONTRIBUTIONS THIS PAGE							450.00	\$0.00

FORM REVISED 10.27.2011



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

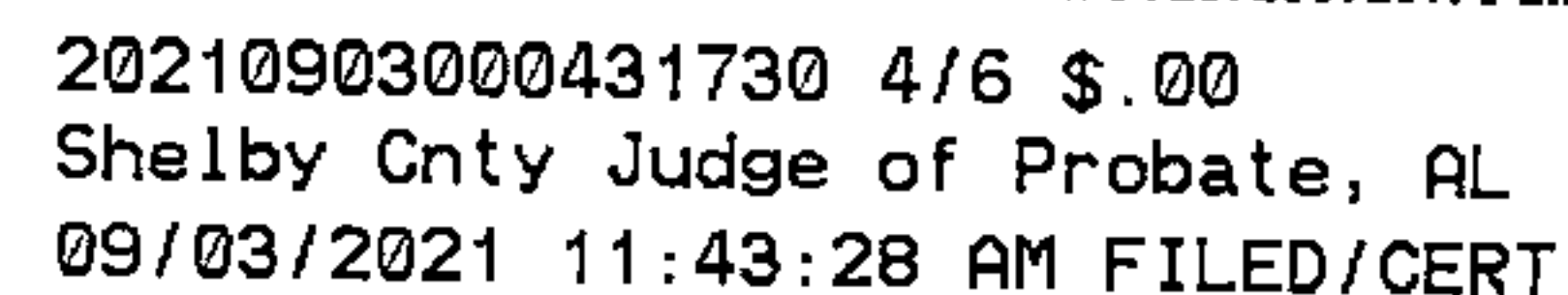
FORM 3: In-Kind Contributions received by candidate or elected official



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 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 REVISED 10.27.2011		TOTAL IN-KIND CONTRIBUTIONS THIS PAGE															\$0.00	



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



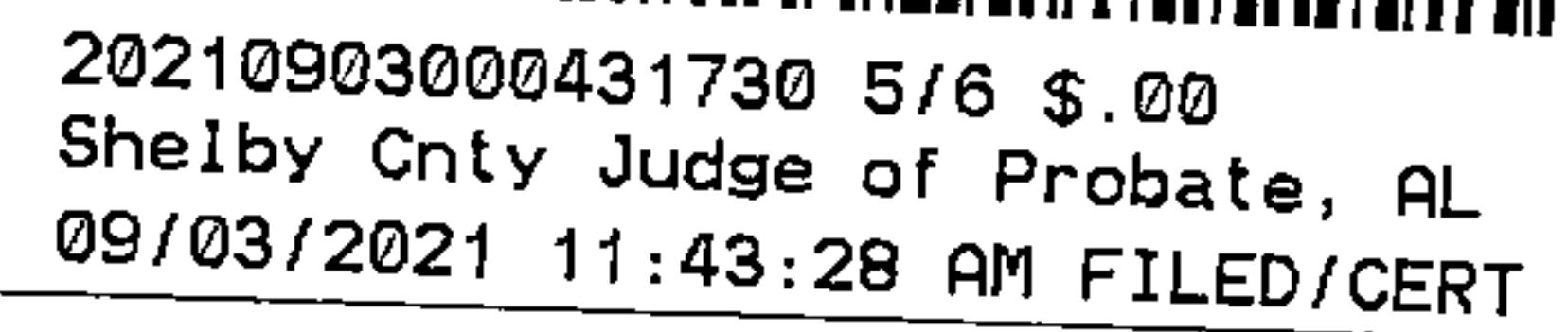
NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.
DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

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		
TOTAL RECEIPTS THIS PAGE												\$0.00

FORM REVISED 10.27.2011

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County Division Code: AL040 Inst. # 2021096653 Pages: 5 of 6

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: Yancey Williams Jr.

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	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
23 Design	115 David Green Road Suite A Bham, AL 35444		✓									8/12/21	825.67
TOTAL EXPENDITURES THIS PAGE												825.67	

FORM REVISED 10.27.2011

