County Division Code: AL040 Inst. # 2021096988 Pages: 1 of 7 I certify this instrument filed on: 8/20/2021 11:57 AM Doc: ELCAPRE Judge of Probate Jefferson County, AL

FAIR CAMPAIGN PRACTICES STATE OF ALABAMA
STATE OF ALABAMA

• Clerk; NICOLE

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AREA FOR OFFICIAL USE ONLY

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Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

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

Type of Report (check one)

Amended Monthly

	Please Print in	¬ Weekly	Amended Weekly		
Name of Candidate or Elected Of	ticial		Political Party/Ballot Affiliation	For Monthly Reports	
William A. Bell Sr.			NP	Month for which the	
Office Sought or Held (Include di	strict or circuit number,	if applicable)		report is filed.	<u></u>
Mayor of Birmingh	am	For Weekly Reports Date of Friday in the	0.400.4001		
Address				week for which the	8/20/2021
308- 10th Avenue	M			report is filed.	
City	State	ZIP Code	Telephone Number	Total Number of	
Birmingham	Alabama	35204		Pages in Report	
					

						\$20,419.62
Beginning balance (ending balance from previous filing)	•	•	•	11		\$20,419.62
Cash Contributions			· -	Į	•	•
Itellized cash continuations (total nom - on)	 		\$11,400.00			
Non-itemized cash contributions	2b			-	<u>.</u>	
Total cash contributions (add lines 2a and 2b)			• •	2c		\$11,400.00
		•	·	7		•
	3a			1		•
	3b			4	.•	•
Total in-kind contributions (add lines 3a and 3b)	3c		\$0.00		• • • • • • • • • • • • • • • • • • • •	* .
Receipts from Other Sources				1		•
Itemized Receipts from Other Sources (total from Form 4)	4a			1		
	4b			 		<u> </u>
	<u></u>			4c	· 	\$0.00
Expenditures	\ . ·		<u> </u>	7	•	•
	5a		\$22,832.0	<u></u>		•
	5b			1_		·
Total expenditures (add lines 5a and 5b)			3	5c	<u></u>	\$22,832.06
Expenditures on Line of Credit		<u> </u>		7		> *
Itemized expenditures (total from Form 6)	6a				•	
Non-itemized expenditures	6b			_	•	
	6c		\$0.0	0	 _	<u> </u>
Ending balance (add lines 1, 2c, & 4c, then subtract line 5c))	· 		<u> </u>		\$8,987.50
	Non-itemized cash contributions (total from Form 2) Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) In-Kind Contributions Itemized in-kind contributions (total from Form 3) Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Expenditures on Line of Credit Itemized expenditures (total from Form 6) Non-itemized expenditures Total expenditures on credit (add lines 6a and 6b)	Cash Contributions Itemized cash contributions (total from Form 2) Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) In-Kind Contributions Itemized in-kind contributions (total from Form 3) Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) Non-itemized Receipts from Other Sources Itemized Receipts from Other Sources Itemized Receipts from Other Sources Itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Expenditures on Line of Credit Itemized expenditures (total from Form 6) Non-itemized expenditures Total expenditures (total from Form 6) Non-itemized expenditures Total expenditures on credit (add lines 6a and 6b) Total expenditures on credit (add lines 6a and 6b)	Reginning balance (ending balance from previous filing) Cash Contributions Itemized cash contributions (total from Form 2) Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) In-Kind Contributions Itemized in-kind contributions (total from Form 3) Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) Non-itemized Receipts from Other Sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Expenditures on Line of Credit Itemized expenditures (total from Form 6) Non-itemized expenditures Total expenditures (total from Form 6) Non-itemized expenditures (total from Form 6) Total expenditures on credit (add lines 6a and 6b) Total expenditures on credit (add lines 6a and 6b)	Cash Contributions Itemized cash contributions (total from Form 2) Non-itemized cash contributions (add lines 2a and 2b) In-Kind Contributions Itemized Receipts from Other Sources Itemized Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) Non-itemized Receipts from Other Sources Itemized Receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Expenditures on Line of Credit Itemized expenditures (total from Form 6) Non-itemized expenditures Total expenditures (total from Form 6) Non-itemized expenditures Itemized expenditures (total from Form 6) Sources Itemized expenditures (add lines 5a and 5b) Expenditures on Line of Credit Itemized expenditures (total from Form 6) Non-itemized expenditures Total expenditures on credit (add lines 6a and 6b) Total expenditures on credit (add lines 6a and 6b)	Cash Contributions 1	Cash Contributions 1

As required by the Alabama Fair Campaign Practices Act, Thereby 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.

ignature of Candidate or Elected Official

Sworn to an	d subscribed b	efore me this _	10-	day of
Higust	of the year	_	. My comn	ijssion expire
the Atta	day of Hu		he year	ZOD CI
	Low Int	٠		
Signature of	totary Public		_ , -	33
	mes MDG	~ S.		
Print Notary's	-		`	

FORM REVISED 06.06.2017

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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: William A. Bell, Sr



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) CONTRIBUTOR **ADDRESS** DATE **AMOUNT** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) Returned RECEIVED CONTRIBUTION (mo./day/yr.) 2221 Vestavia Dr Michael Gilroy 08/12/2021 Vestavia Hills, AL 35216 \$ 500.00 P.O. Box 12345 Thomas Ross Neely Birmingham AL 35202 08/11/21 \$ 500.00 P.O. Box 2401 Rachel Gaston Birmingham AL 35201 08/09/21 \$ 200.00 305 Inglemook Ln Ronald Sims Sylacauga AL 35151 08/11/21 \$ 700.00 1707 Twelve Oaks Dr Prenrice Dixon 08/01/21 Birmingham AL 35215 \$ 100.00 7209 Crown Ridge DR Patricia McCullum Birmingham AL 35173 08/09/21 \$ 100.00 2220 Finley Blvd Teuckworx Inc Birmingham AL 35234 08/11/21 \$ 2,500.00 2616 North 20th Street Star Truck Parts Birmingham AL 35234 08/11/21 \$ 1,500.00 Monty Ballard 3870 Grants Ln Birmingham AL 35210 08/11/21 \$ 100.00 TOTAL CASH CONTRIBUTIONS THIS PAGE \$ 6,200.00 FORM REVISED 9,2,2011



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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: William A. Bell Sr

When total contribut	ons from a single source exceed \$100.00, the FCPA requires all contri O NOT LIST in-kind contributions or loans on this form. Use Forms 3 at	butioned 4 f	ns fro or th	om th ose l	iat so	ource js.	e to be itemized.		
			s co	OUR	CE BUTI			AMOUNT	
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation	Individual	PAC	Other	Returned	CONTRIBUTION RECEIVED (mo./day/yr.)		
Alabamaians for Economic Devel	15 Office Park Circle Birmingham AL 35223			V			08/16/2021	\$ 5,000.00	
Thomas Scott	808 Crown Circle Birmingham AL 35242		1				08/11/21	\$ 100.00	
Ms. Laura Johnston	1040 2nd Street West Birmingham AL 35204		1				08/14/21	\$ 100.00	
								•	
FORM REVISED 9.2.2011	TOTAL CASH CON	ITRI	BU	TIC	NS	TH	IS PAGE	\$ 5,200.00	



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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: William A. Bell, Sr



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 (ADDRESS SHOULD INCLUDE OF EXPENDITURE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) EXPENDITURE GIVE (INCLUDE FULL NAME) BRIEF EXPLANATION 6897 G&H Road Lester Reasor 08/04/2021 \$ 3,840.00 McCalla AL 35111 920- 6th Street S Lamar Advertising 08/12/2021 \$ 2,000.00 Birmingham AL 35205 1510- 4th Avenue N SNG 08/12/2021 \$ 1,042.06 Bessemer AL 35020 Canvasing 873 Dennison Ave Campaign Workers (Cash) neighborhoods 08/13/2021 \$ 2,500.00 Birmingham AL 35211 List of Names on File 912 E 12th Street Suite B #316 Yosemite Consulting \$ 5,000.00 08/14/2021 Los Angeles CA90021 Chris Barrineau 08/14/2021 \$ 2,000.00 Kwani Dickerson 08/17/2021 \$ 250.00 912 E 12th Street Yosemite Consulting 08/19/2021 \$ 5,000.00 Los Angeles CA 90021 Team 7 PAC \$ 1,200.00 08/19/2021 TOTAL EXPENDITURES THIS PAGE \$ 22,832.06 FORM REVISED 9.2.2011



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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: William A. Bell Sr.

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. NATURE OF CONTRIBUTION SOURCE (CHECK ONE) (CHECK ONE) DATE AMOUNT **ADDRESS** CONTRIBUTOR OF (ADDRESS SHOULD INCLUDE |CONTRIBUTION| (INCLUDE FULL NAME) Other Business/ Corporation Individual STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION (mo./day/yr.) TOTAL IN-KIND CONTRIBUTIONS THIS PAGE \$0.00 FORM REVISED 10.27.2011



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

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



NAME OF CANDIDATE OR ELECTED OFFICIAL: William A. Bell Sr.

When tota	al contributions from a single source DO NOT LIST cash or in-ki	nd c	eea a ontrib	oution	00, the FCPA requires all contributions from the son this form. Use Forms 2 and 3 for those	se lis	tings	3.			T T	
SOURCE OF RECEIPT (INCLUDE FULL NAME)			FORM OF RECEIPT		COMPLETE THIS BLOCK IF RECEIPT IS A LOAN			PT S			DATE	AMOUNT
	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Interest	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending Institution	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)	OF RECEIPT
•												
•				-								
									-			
				-								
ORM REVISED 10.27.2011		<u> </u>	<u>!</u>	<u>l</u>	TOTAL REC	ElP.	TS	THI	S F	AG	E	\$0.0



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

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: William A. Bell Sr.



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 **ADDRESS** DATE OF PERSON/GROUP/BUSINESS OTHER OF (ADDRESS SHOULD INCLUDE EXPENDITURE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) **EXPENDITURE** GIVE (INCLUDE FULL NAME) BRIEF EXPLANATION TOTAL EXPENDITURES THIS PAGE \$ 0.00 FORM REVISED 5.19.2017