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Shelby Cnty Judge of Probate, AL
09/03/2021 01:06:17 PM FILED/CERT

OR OFFICIAL USE ONLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

**Candidate & Elected Official
Campaign Finance Report
SUMMARY FORM 1**

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Barbara Files-Kennedy</i>	Political Party/Ballot Affiliation
Office Sought or Held (include district or circuit number, if applicable) <i>Birmingham City Council District 8</i>	
Address ☐ Check box if reporting new address <i>1136 16th Ave W</i>	
City <i>Birmingham</i>	State <i>AL</i>
ZIP Code <i>35204</i>	Telephone Number <i>[REDACTED]</i>

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

8/27/2021

3

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	<i>133.30</i>
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a		
2b	Non-itemized cash contributions	2b	<i>130.95</i>	
2c	Total cash contributions (add lines 2a and 2b)	2c	<i>130.95</i>	\$0.00
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	<i>260.40</i>	
3b	Non-itemized in-kind contributions	3b		
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<i>260.40</i>	\$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		<i>\$0.00</i>
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	<i>240.92</i>	
5b	Non-itemized expenditures	5b	<i>23.33</i>	
5c	Total expenditures (add lines 5a and 5b)	5c	<i>264.25</i>	\$0.00
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		<i>\$0.00</i>
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	<i>0</i>	<i>\$0.00</i>

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.

Barbara Files-Kennedy *8/30/21*
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this *30th* day of *August* of the year *2021*.
the *17th* day of *October* of the year *2023*.
My commission expires

Signature of Notary Public

Print Notary's Name

LOUIS JAMES WILLIE IV
Notary Public

Alabama State at Large
My Commission Expires Oct 17, 2023



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ALABAMA FAIR CAMPAIGN PRACTICES ACT

FORM 3: IN-KIND CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Barbara Files Kennedy PAGE 2 OF 3

The FCPA requires that those contributions greater than \$100 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					
Louis Willie	135 Cahaba Club Dr Helena AL 35080					X									8/23/2021	\$110.00		
Louis Willie	135 Cahaba Club Dr Helena AL 35080			X											8/23/2021	\$150.40		
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE															\$0.00	\$260.40		



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ALABAMA FAIR CAMPAIGN PRACTICES ACT

FORM 5: EXPENDITURES

BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTIONS TO OTHER CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES

NAME OF CANDIDATE / ELECTED OFFICIAL: Barbara Files Kennedy

PAGE 3 OF 3

The FCPA requires that expenditures over \$100 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		
LaChandra Files	701 Oneida Dr Birmingham AL 35214			X								8/24/2021	\$240.92
TOTAL EXPENDITURES THIS PAGE												240.92	\$0.00