County Division Code: AL040 Inst. # 2021097652 Pages: 1 of 3 I certify this instrument filed on: 8/23/2021 3:40 PM

Doc: ELCAPRE Judge of Probate Jefferson County, AL

Clerk: NICOLE

FAIR CAMPAIGN PRACTISTATE OF ALABAMA



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PROBATE COURT

AUG 23 RECTO

JAMES P. NAFTEL, II

E.O.D

Type of Report (check one)

20210903000432110 1/3 \$.00 Shelby Cnty Judge of Probate, AL 09/03/2021 01:06:22 PM FILED/CERT

Candidate & Elegandre 101:06:22 PM Campaign Finance Report SUMMARY FORM 1

Amended Monthly Monthly Please Print in Ink or Type. **Affeekly** Amended Weekly Name of Candidate or Elected Official Political Party/Ballot Affiliation DAAGHEITENOULUKS DEMOCRAT For Monthly Reports Month for which the Office Sought or Held (include district or circuit number, if applicable) report is filed. For Weekly Reports Date of Friday in the week for which the report is filed. State ZIP Code | Telephone Number **Total Number of** Pages in Report

S	ummary of activity since last filed report				
1	Beginning balance (ending balance from previous filing)			1	-2.00114
	Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a			
2b	Non-itemized cash contributions	2b			
2c	Total cash contributions (add lines 2a and 2b)			2c	\$0.00
	In-Kind Contributions .				
3a	Itemized in-kind contributions (total from Form 3)	За	494.04		
	Non-itemized in-kind contributions	3b	- 		
3с	Total in-kind contributions (add lines 3a and 3b)	3с	694.04 \$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			7.00	
5a	Itemized expenditures (total from Form 5)	5a	1139,18		
5b	Non-itemized expenditures	5b			
5c	Total expenditures (add lines 5a and 5b)			5c	1139.18 \$0.00
	Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a			
6b	Non-itemized expenditures	6b			
6с	Total expenditures on credit (add lines 6a and 6b)	6c	\$0.00		
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	-3,140.32 \$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 information during the applicable period of time.

Equiled III

Sworn to and subscribed before me this 23 day of Aug ust of the year 2021 My commission expite day of day of of the year 2022

Signature of Notary Public

Print Notary's Name

FORM REVISED 06.05.2017

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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

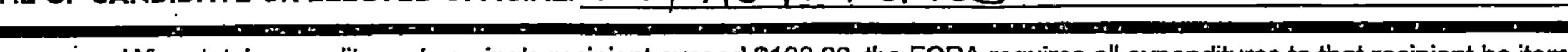
NAME OF CANDIDATE OR ELECTED OFFICIAL: DAAGYE HENDRIUCS When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings. NATURE OF CONTRIBUTION SOURCE (CHECK ONE) (CHECK ONE) **AMOUNT** DATE **ADDRESS** CONTRIBUTOR OF CONTRIBUTION (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) CONTRIBUTION RECEIVED STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) 300,00 GAWELL HENDRIUS 2201 155 Ave N. 97HPZ 8/16/2011 18/17/2021 394.04 97447 TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 9.2.2011

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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: DAAGYE HENDRIUS



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 ADDRESS PERSON/GROUP/BUSINESS OTHER EXPENDITURE OF (ADDRESS SHOULD INCLUDE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) **EXPENDITURE** GIVE (mo./day/yr.) (INCLUDE FULL NAME) BRIEF **EXPLANATION** JUN WEATT 20TH B1 HAM AZ 3523 SANCCUB CLARENCE TOTAL EXPENDITURES THIS PAGE FORM REVISED 9.2.2011