

MONTHLY &amp; WEEKLY



FAIR CAMPAIGN PRACTICES  
STATE OF ALABAMA



20210903000432260 1/6 \$.00  
Shelby Cnty Judge of Probate, AL  
09/03/2021 01:38:48 PM FILED/CERT

THIS AREA FOR OFFICIAL USE ONLY

County Division Code: AL040  
Inst. # 2021095710 Pages: 1 of 6  
I certify this instrument filed on  
8/17/2021 3:47 PM Doc: ELPCPRE  
Judge of Probate  
Jefferson County, AL.

Clerk: WORTHYV

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED IN OFFICE  
PROBATE COURT

AUG 17 2021

Please Print in Ink or Type.

|                                                                                                                     |                    |                                                                                               |                                       |
|---------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------------------------------------------------------|---------------------------------------|
| Name of Candidate or Elected Official<br><u>Terri Michal (Teresa)</u>                                               |                    | Political Party/Belt Affiliation<br><u>JAMES P. NAYTEL, JR.</u><br>Judge of Probate<br>E.O.D. |                                       |
| Office Sought or Held (include district or circuit number, if applicable)<br><u>Birmingham BOE District 2</u>       |                    |                                                                                               |                                       |
| Address <input type="checkbox"/> Check box if reporting new address<br><u>PO Box 611384, 9150 Parkway E STE 200</u> |                    |                                                                                               |                                       |
| City<br><u>Birmingham</u>                                                                                           | State<br><u>AL</u> | ZIP Code<br><u>35206-1578</u>                                                                 | Telephone Number<br><u>[REDACTED]</u> |

Type of Report (check one)

☒ Monthly ☐ Amended Monthly  
☐ Weekly ☐ Amended Weekly

For Monthly Reports  
Month for which the  
report is filed.

July

For Weekly Reports  
Date of Friday in the  
week for which the  
report is filed.

Total Number of  
Pages in Report

6

## Summary of activity since last filed report

|                                       |                                                               |    |                      |
|---------------------------------------|---------------------------------------------------------------|----|----------------------|
| 1                                     | Beginning balance (ending balance from previous filing)       | 1  | <u>840.07</u>        |
| <b>Cash Contributions</b>             |                                                               |    |                      |
| 2a                                    | Itemized cash contributions (total from Form 2)               | 2a | <u>350</u>           |
| 2b                                    | Non-itemized cash contributions                               | 2b | <u>10.5</u>          |
| 2c                                    | Total cash contributions (add lines 2a and 2b)                | 2c | <u>455</u> \$0.00    |
| <b>In-Kind Contributions</b>          |                                                               |    |                      |
| 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> \$0.00      |
| <b>Receipts from Other Sources</b>    |                                                               |    |                      |
| 4a                                    | Itemized Receipts from Other Sources (total from Form 4)      | 4a | <u>49</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>49</u> \$0.00     |
| <b>Expenditures</b>                   |                                                               |    |                      |
| 5a                                    | Itemized expenditures (total from Form 5)                     | 5a | <u>932.45</u>        |
| 5b                                    | Non-itemized expenditures                                     | 5b |                      |
| 5c                                    | Total expenditures (add lines 5a and 5b)                      | 5c | <u>932.45</u> \$0.00 |
| <b>Expenditures on Line of Credit</b> |                                                               |    |                      |
| 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> \$0.00      |
| 7                                     | Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) | 7  | <u>411.62</u> \$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.

Teresa Michal  
Signature of Candidate or Elected Official

Date

8/17/21

Sworn to and subscribed before me this 17th day of August of the year 2021. My commission expires the 14th day of March of the year 2024.

Signature of Notary Public

Print Notary's Name

Shelby A. Rice  
Shelby A. Rice

# 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.

| CONTRIBUTOR<br>(INCLUDE FULL NAME)               | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | SOURCE<br>OF CONTRIBUTION<br>(CHECK ONE) |                                     |     |                                     |          | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
|--------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------|-------------------------------------|-----|-------------------------------------|----------|---------------------------------------------------|------------------------------|
|                                                  |                                                                                 | Business or<br>Corporation               | Individual                          | PAC | Other                               | Returned |                                                   |                              |
| Marla Kilfoyle                                   | 5491 Bednarik Place<br>The Villages, FL 32162                                   |                                          | <input checked="" type="checkbox"/> |     |                                     |          | 7/1/21                                            | 100                          |
| Birmingham<br>American Federation<br>of Teachers | <del>1900 20th Ave</del><br><del>Washington, DC</del><br>Birmingham, AL 35209   |                                          |                                     |     | <input checked="" type="checkbox"/> |          | 7/2/21                                            | 250                          |
|                                                  |                                                                                 |                                          |                                     |     |                                     |          |                                                   |                              |
|                                                  |                                                                                 |                                          |                                     |     |                                     |          |                                                   |                              |
|                                                  |                                                                                 |                                          |                                     |     |                                     |          |                                                   |                              |
|                                                  |                                                                                 |                                          |                                     |     |                                     |          |                                                   |                              |
|                                                  |                                                                                 |                                          |                                     |     |                                     |          |                                                   |                              |
|                                                  |                                                                                 |                                          |                                     |     |                                     |          |                                                   |                              |
|                                                  |                                                                                 |                                          |                                     |     |                                     |          |                                                   |                              |
|                                                  |                                                                                 |                                          |                                     |     |                                     |          |                                                   |                              |
| TOTAL CASH CONTRIBUTIONS THIS PAGE               |                                                                                 |                                          |                                     |     |                                     |          | 350                                               | \$0.00                       |



# CONTROL

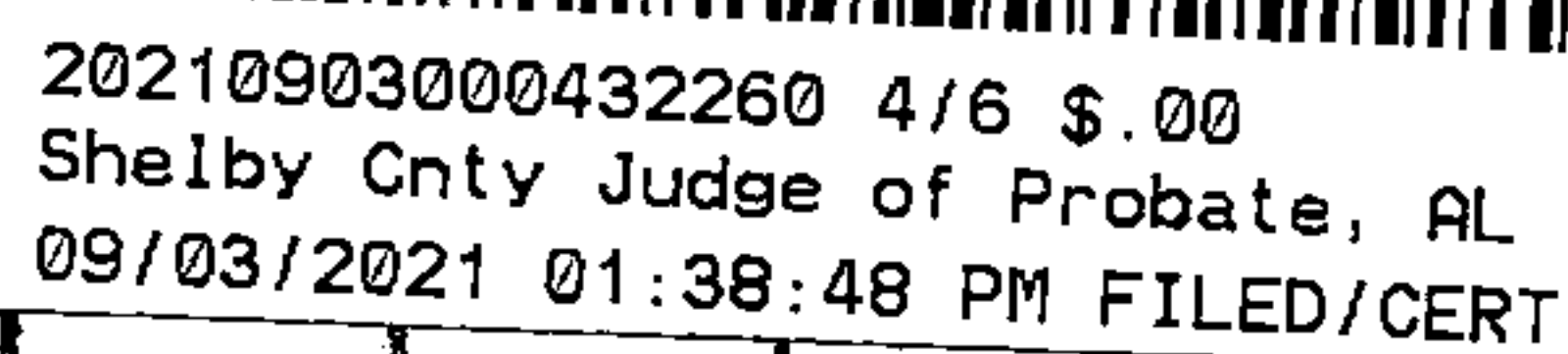
NAME OF CANDIDATE OR ELECTED OFFICIAL: Terri Michael

When

\_\_\_\_\_

**TOTAL RECEIPTS THIS PAGE**

49





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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Terr: Michael



When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

[illegible]