County Division Code: AL040 Inst. # 2021106338 Pages: 1 of 6 I certify this instrument filed on: 9/14/2021 11:42 AM

Doc: ELCAPRE Judge of Probate Jefferson County, AL

Clerk: SMITHMO



Shelby Cnty Judge of Probate, AL 10/04/2021 11:02:06 AM FILED/CERT

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FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official

エナス	Campaign Finance Repo	rt	•		,		•
Σ	SUMMARY FORM 1			•	Type of Repor	-	eck one) Amended Monthly
Na	Please Print In Ink or Type. me of Candidate or Elected Official Party/	Ballo	t Affiliatio	n]	Wee	kly	Amended Weekly
Off	Office Sought or Held (include district or circuit number, if applicable)			_	For Monthly R Month for which report is filed.	_	
	Birminaham City Cancel-Dist	iu	<u>- + = </u>	3	For Weekly Re	Bort	s ————————————————————————————————————
	Address Check box if reporting new address 15 Clen Jris Pork				Date of Friday week for which report is filed.	in the	
City	B'ham, AL 35205 ZiP Code Telephone Number 1975			27	Total Number Pages in Repo		6
S	ummary of activity since last filed report						
1	Beginning balance (ending balance from previous filing)	第				1	\$ 9826.93
	Cash Contributions						
2a	Itemized cash contributions (total from Form 2)	2a		4	500,00		
2b	Non-itemized cash contributions	2b					
2c	Total cash contributions (add lines 2a and 2b)					2c	\$ 500,00
	In-Kind Contributions						
3a	Itemized in-kind contributions (total from Form 3)	3a			. 0		
<u>3</u> b	Non-itemized in-kind contributions	3b		-	h		
3c	Total in-kind contributions (add lines 3a and 3b)	3c			\$0.00		
	Receipts from Other Sources						
4a	Itemized Receipts from Other Sources (total from Form 4)	4a			O		
4b	Non-itemized Receipts from Other Sources	4b			0		
4c	Total receipts from other sources (add lines 4a and 4b)					4c	\$0.00
 -	Expenditures	ST ST				ing.	
5a	Itemized expenditures (total from Form 5)	5a		The second second second			
5b	Non-itemized expenditures	5b	, 				
5c	Total expenditures (add lines 5a and 5b)					5c	\$0.00
_	Expenditures on Line of Credit						
6a	Itemized expenditures (total from Form 6)	6a	•		^		
6b	Non-itemized expenditures	6b		<u> </u>			
3C	Total expenditures on credit (add lines 6a and 6b)	6c	- -		\$0.00		
	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	فأو المواجد				7	# 10,326.78
s re we ttac ue tate	equired by the Alabama Fair Campaign Practices Act, I hereby ar or affirm to the best of my knowledge and belief that the	n to	and st	of the	bed before me year 202 f Jyly	<u> </u>	3 (1 (-)

ttached report(s) and the information contained herein are	September of the year 2021 My commission
rue and correct and that this information is a full and complete	the 20th day of Jyly of the year 202!
tatement of all contributions, expenditures, and other required aftermation during the applicable period of time.	70
Calorie Cardidate of Francisco Alexandre Partition Line 18	Signature of Notary Public
ignature of Candidate of Language Lythology My Commission Expires	William Brantley Authony Jr.
ORM REVISED 06.06.2017	Print Notary's Name

THE RESIDENCE OF THE PROPERTY OF THE PARTY O



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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: Valecie A. Abbott 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 DATE AMOUNT **ADDRESS** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION (mo./day/yr.) . 3 S. Jackson Street 500.00 ARHA PAC 9-2-21 Montaomary, AL 36104. TOTAL CASH CONTRIBUTIONS THIS PAGE **FORM REVISED 9.2.2011**



20211004000481680 3/6 \$.00 Shelby Cnty Judge of Probate, AL 10/04/2021 11:02:06 AM FILED/CERT

County Division Code: AL040 Inst. # 2021106338 Pages: 3 of 6

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: Valerie A. 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) CONTRIBUTOR **ADDRESS** DATE AMOUNT (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION (mo./day/yr.) TOTAL IN-KIND CONTRIBUTIONS THIS PAGE 0.00 FORM REVISED 9.2.2011

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County Division Code: AL040 Inst. # 2021106338 Pages: 4 of 6

FORM REVISED 9.2.2011

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

e ()

\$ 0.00

Valerie, A. Abbot 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. COMPLETE THIS BLOCK IF RECEIPT FORM RECEIPT SOURCE IS A LOAN OF RECEIPT (CHECK ONE) ADDRESS -SOURCE OF RECEIPT DATE **AMOUNT** (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) GUARANTORS OF RECEIVED STREET OR P.O. BOX, (mo./day/yr.) RECEIPT [FCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN]

TOTAL RECEIPTS THIS PAGE

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County Division Code: AL040 Inst. # 2021106338 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: Valecie A. Abbott

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) PERSON/GROUP/BUSINESS ADDRESS DATE OF **AMOUNT** 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** TOTAL EXPENDITURES THIS PAGE \$ 0.00 FORM REVISED 9.2.2011



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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: VOLEGE A. ALOBOTT



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