

PROBATE COURT

JUL 0 2 2021

RECEIVED IN OFFICE

County Division Code: AL040 Inst. # 2021077058 Pages: 1 of 6 l certify this instrument filed on 7/2/2021 2:42 PM Doc: ELCAPRE Judge of Probate

THIS AREA FOR OFFICIAL LISE ONLY

Clerk: HENLEYT

Jefferson County, AL.

Candidate & Elected Official Probate Campaign Finance Report SUMMARY FORM 1

<u> </u>	Ple	ease Print in I	nk or Type.		
Name of Candidate or Elected Offi	cial			Political Party/Ballot Affiliation	☐ Week
Leticia Watkins					For Monthly Re
Office Sought or Held (include dist	ict or cir	cuit number, if	applicable)	<u> </u>	Month for which report is filed.
Birmingham Board of	f Edu	cation,	District	6	For Weekly Rep
Address Check box if reporting P.O. Box 110004	g new a	ddress			Date of Friday in week for which the
City		State	ZIP Code	Telephone Number	report is filed.
Birmingham	AL	• 	35211		Total Number of Pages in Report

Type of Report (check	one)
Monthly	Amended Monthly
Weekly	Amended Weekly
For Monthly Reports Month for which the report is filed.	June
For Weekly Reports Date of Friday in the week for which the report is filed.	
Total Number of Pages in Report	6

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3a	\$0.00		
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5a	\$4,350.22	'	
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		5c	\$4,350.22
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6b	\$0.00		
6c			
		7	\$5,497.27
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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.

Signature of Candidate or Elected Official

102 July 2021 Date

Signature of Notary Public **Print Notary's Name**

Sworn to and subscribed before me this ____

of the year 2021. My commission expires

day of Softmber of the year 3024

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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: Leticia Watkins

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)						A BROLINIT	
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.)	AMOUNT OF CONTRIBUTION	
James Carpenter	1745 Woodbine Dr. Birmingham, AL 35216		-				6/2/2021	\$50.00	
Janet Monahan	689 Camera Roadd Waverly, VA 23890						6/16/2021	\$20.00	
Cindy Satcher-Stollenwerck	408 Savannah Cove Calera, AL 35040		-				6/16/2021	\$50.00	
LaTonya Williams	5464 South Miami Blvd Apt 303 Durham, NC 27703		-				6/20/2021	\$36.00	
Roy King	5221 Laurel Springs Rd Spring Grove, VA 23881						6/20/2021	\$20.00	
•	2021 She I								
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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



When total	al contributions from a single source exceed \$100.0 DO NOT LIST cash or loans on the				-								ource	e to be itemized.	
CONTRIBUTOR (INCLUDE FULL NAME)		NATURE OF CONTRIBUTION SOURCE (CHECK ONE)													
	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
N/A															
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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



Totioio Motion

When total					00, the FCPA requires all contributions from on this form. Use Forms 2 and 3 for the				to be	iten	nized.	,
			FORM		COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	RI	E CEI I	PT SO		CE		
(INCLUDE FULL NAME)	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]	dual dison tion (means)				RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
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110040004 110040004 04/2021 1												
82350 4/ Judge of 1:51:29												•
Probate:												
Date, AL (LED/CERT		-										
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ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 5: Expenditures by candidate or elected official





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

					Р	PURPOSE OF EXPENDITURE (CHECK ONE)					DITU	RE		
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	Charitable	Food	Fundraising	ے او	Repayment	Loaging	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
ActBlue	P.O. Box 441146 Somerville, MA 02144-0031						•		: : :		·		6/30/2021	\$2.64
MacMail Advertising	1201 19th Street North Birmingham, AL		~										6/28/2021	\$4,184.27
Jefferson County Probate Court	716 Richard Arrington Blvd N Birmingham, AL 35203	~											6/25/2021	\$100.00
Yummefy	707 Richard Arrington Blvd S Birmingham, AL 35233			,		-							6/24/2021	\$16.39
Shrimp Basket	801 Greensprings Hwy Homewood, AL 35209					•			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				6/23/2021	\$46.92
	20211004000482350 5/6 \$.1 Shelby Cnty Judge of Prol 10/04/2021 11:51:29 AM F.													
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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: Leticia Watkins



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 RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND Z	Administrative	dvertis	Consultants/ Polling	Contribution	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
N/A							-		,				
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