8 WEEKL

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

SUMMARY FORM 1

FILED IN OFFICE PROBATE COURT

Candidate & Elected Official Campaign Finance

Please Print in Ink or Type.

JAMES P. NAFTEL, II

County Division Code: AL040 Inst. # 2021113924 Pages: 1 of 3

THIS AREA FOR OFFICIAL USE ONLY

I certify this instrument filed on 9/30/2021 4:00 PM Doc: ELCAPRE

Judge of Probate Jefferson County, AL.

20211008000492630 1/3 \$.00

Shelby Cnty Judge of Probate, AL

Report (check one)

Monthly

Clerk: NICOLE

Amended Monthly

10/08/2021 01:53:16 PM FILED/CERT Weekly For Monthly Reports Amended Weekly

Name of Candidate or Elected Official Office Sought or Held (include district or circuit number, if applicable)

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

Check box if reporting new address Telephone Number 1 City ZIP Code

St	Summary of activity since last filed report							
1	Beginning balance (ending balance from previous filing)			1	7,4	946	<u>~~~~</u>	
Cash Contributions				I		•		
2a	Itemized cash contributions (total from Form 2)	2a	\$C5700			•		
2b	Non-itemized cash contributions	2b	(数)					
2c	Total cash contributions (add lines 2a and 2b)			2c	<u>OU</u>	4-100	<u>\$0.00</u>	
	n-Kind Contributions				•			
3a	Itemized in-kind contributions (total from Form 3)	3a	AXO				•, •	
3b	Non-itemized in-kind contributions	3b	ARO					
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$0.00	-		·		
	Receipts from Other Sources			1	-			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a			:			
	Non-itemized Receipts from Other Sources	4b			<u> </u>		:	
4c	Total receipts from other sources (add lines 4a and 4b)			4c	TR.		\$ 8∵0 0	
Expenditures				•	• •	و. ب	, -	
5a	Itemized expenditures (total from Form 5)	5a	A150			_		
5b	Non-itemized expenditures	5b	#2 <u>9</u> 2.50	<u></u>				
5c	Total expenditures (add lines 5a and 5b)			5c	#	132	50 \$9.99	
	Expenditures on Line of Credit			•				
6a	Itemized expenditures (total from Form 6)	6a	AX 0					
6b	Non-itemized expenditures	6b	域の				** 1	
6c	Total expenditures on credit (add lines 6a and 6b)	6c	ex 6					
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	0	2140	\$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.

Signature of Candidate or Elected Official

Print Notary's Name

the

Sworn to and subscribed before me this ___29+11 Sentember of the year 2021 ___. My commission expires

of the year <u>2085</u> day of AUTI

Signature of Notary Public

FORM REVISED 06.08.2017

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: TOSON MACONF



	ions from a single source exceed \$100.00, the FCPA requires all contrib						e to be itemized.		
	O NOT LIST in-kind contributions or loans on this form. Use Forms 3 and	SOURCE OF CONTRIBUTION (CHECK ONE)							
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)		Individual	PAC	Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION	
Mext Granostian	P.O. Box 1493 Birming/ham, 17-1 350201			M			9/22/21	\$50000	
College Prop Alamana	Determined the Cath						9/23/21	00 1	
202110 She1by									
28									
9263Ø 2/3 Judge of 1:53:16 F									
Probate,									
					Armen de Adapta				
					Trans.				
FORM REVISED 9.2.2011	TOTAL CASH CON	77QQ.00							

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: JOSON WEOCOUNS



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 PERSON/GROUP/BUSINESS ADDRESS Administrative
Advertising
Consultants/
Polling
Contribution
Food
Food
Loan
Repayment
Loan
Loan
Repayment
Transportation OTHER OF EXPENDITURE (ADDRESS SHOULD INCLUDE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) EXPENDITURE (mo./day/yr.) GIVE (INCLUDE FULL NAME) BRIEF EXPLANATION TOTAL EXPENDITURES THIS PAGE FORM REVISED 9.2.2011