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FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

WEEKLY & MONTHLY

Political Action Committee Campaign Finance Report SUMMARY FORM 1



20160629000359190 1/7 \$.00
Madison Cnty Judge of Probate, AL
06/29/2016 11:33:42 AM FILED/CERT

FRANK BARGER

2

Please Print in Ink or Type.

Type of Report (check one)

- Monthly Amended Monthly
 Weekly Amended Weekly

For Monthly Reports

Month in which the report is filed.

June 2016

For Weekly Reports

Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

7

Name of Political Committee (as appears on Statement of Organization)		Acronym for PAC	
North Alabama PAC			
Address (as appears on Statement of Organization) <input type="checkbox"/> Check box if reporting new address			
116 Jefferson St., #300			
City	State	ZIP Code	Telephone Number
Huntsville	AL	35801	2565649967

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		1 11,952.22
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	27,500.00
2b	Non-itemized cash contributions	2b	
2c	Non-itemized employee payroll contributions	2c	
2d	Total cash contributions (add lines 2a, 2b, and 2c)	2d	27,500.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	0
3b	Non-itemized in-kind contributions	3b	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0
Receipts from Other Sources			
4a	Total itemized receipts from other sources (total from Form 4)	4a	
4b	Total non-itemized receipts from other sources	4b	
4c	Total receipts from other sources (total from Form 4)	4c	0
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	5,000.00
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	5,000.00
6	Ending balance (add lines 1, 2d, & 4c, then subtract line 5c)	6	34,452.22

Sworn to and subscribed before me this 29th day of June of the year 2016. My commission expires the 15 day of January of the year 2017.

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.

Wilma H. Henson
Signature of Notary Public
Wilma H. Henson
Printed Name of Notary Public

Stacy Kelly
Signature of Chairperson or Treasurer of Political Committee
6/29/16
Date



FORM 2: Contributions received by political action committee

NAME OF POLITICAL ACTION COMMITTEE: North Alabama PAC

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 (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business (not a corporation)	Corporation	Individual	Other	Returned		
	<i>- See attached -</i>							
	TOTAL CASH CONTRIBUTIONS THIS PAGE							

2016 June	North	Alabama	Pac	Contributions
Name	Address	Source	Date	Amount
Heritage Plantation	8624 Memorial Pkwy SW, Hsv, AL 35802	Business	6/1/2016	\$1,600.00
Oak Grove Dairy, LLC	10002 Memorial Pkwy, SW, Hsv, AL 35802	Business	6/1/2016	\$5,000.00
PA Alexander, LLC	10002 Memorial Pkwy, SW, Hsv, AL 35802	Business	6/1/2016	\$3,400.00
Hylis, Inc	10002 Memorial Pkwy, SW, Hsv, AL 35802	Business	6/1/2016	\$5,000.00
Huntsville Center, Inc	10002 Memorial Pkwy, SW, Hsv, AL 35802	Business	6/1/2016	\$5,000.00
Heritage Plantation	8624 Memorial Pkwy SW, Hsv, AL 35802	Business	6/22/2016	\$7,500.00
				\$27,500.00



FORM 4: Receipts from Other Sources loans, interest, and other sources of income

NAME OF POLITICAL ACTION COMMITTEE: North Alabama PAC

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.

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)				DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	Individual	Business	Other		
	0										
TOTAL RECEIPTS THIS PAGE											

2016 June	North	Alabama	Pac	Expenditures
Name	Address	Reason	Date	Amount
Showers for City Council	PO Box 3235, Huntsville, AL 35810	Contibution	6/2/2016	\$2,500.00
Will Culver for City Council	PO Box 3722, Huntsville, AL 35810	Contibution	6/9/2016	\$2,500.00
				\$5,000.00

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