



Political Action Committee Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Political Committee (as appears on Statement of Organization)		Acronym for PAC	
Address (as appears on Statement of Organization) <input type="checkbox"/> Check box if reporting new address			
City	State	ZIP Code	Telephone Number

Type of Report (check one)

- | | |
|----------------------------------|--|
| <input type="checkbox"/> Monthly | <input type="checkbox"/> Amended Monthly |
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Amended Weekly |

For Monthly Reports

Month in which the report is filed.

For Weekly Reports

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

Total Number of Pages in Report

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)				1	
Cash Contributions						
2a	Itemized cash contributions (total from Form 2)	2a				
2b	Non-itemized cash contributions	2b				
2c	Non-itemized employee payroll contributions	2c				
2d	Total cash contributions (add lines 2a, 2b, and 2c)			2d		
In-Kind Contributions						
3a	Itemized in-kind contributions (total from Form 3)	3a				
3b	Non-itemized in-kind contributions	3b				
3c	Total in-kind contributions (add lines 3a and 3b)	3c				
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		
Expenditures						
5a	Itemized expenditures (total from Form 5)	5a				
5b	Non-itemized expenditures	5b				
5c	Total expenditures (add lines 5a and 5b)			5c		
6	Ending balance (add lines 1, 2d, & 4c, then subtract line 5c)			6		

Sworn to and subscribed before me this _____ day of _____ of the year _____. My commission expires the _____ day of _____ of the year _____.

Signature of Notary Public

Printed Name of Notary Public

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 Chairperson or Treasurer of Political Committee

Date