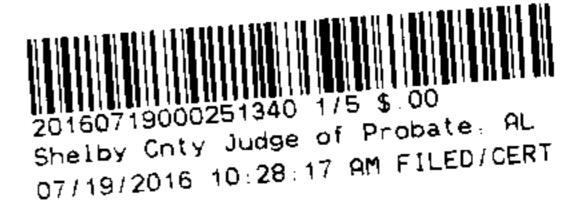


# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



Please Print in Ink or Type. Type of Report (check one) Name of Candidate or Elected Official Political Party/Ballot Affiliation Amended Monthly Monthly Weekly Amended Weekly Office Sought or Held include district or circuit number, if applicable) For Monthly Reports Month in which the Check box if reporting new address report is filed. For Weekly Reports Date of Friday in the ZIP Code Telephone Number week in which the report is filed. Total Number of Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) **Cash Contributions** Itemized cash contributions (total from Form 2) 2a Non-itemized cash contributions 2b Total cash contributions (add lines 2a and 2b) 2c In-Kind Contributions Itemized in-kind contributions (total from Form 3) 3a| За Non-itemized in-kind contributions 3b Total in-kind contributions (add lines 3a and 3b) 3c 3c **Receipts from Other Sources** Itemized Receipts from Other Sources (total from Form 4) 4a Non-itemized Receipts from Other Sources 4b Total receipts from other sources (add lines 4a and 4b) 4c **Expenditures** Itemized expenditures (total from Form 5) 13.60 5a Non-itemized expenditures 5b 5b Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State. Candidates for County or Municipal Office: File this report with the Judge of Probate of the county in which the office is sought. As required by the Alabama Fair Campaign Practices Act, I hereby Sworn to and subscribed before me this day of swear or affirm to the best of my knowledge and belief that the of the year 2016 My commission expires attached report(s) and the information contained herein are true and correct and that this information is a full and complete day of March of the year 2017 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

### 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: 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 **ADDRESS** DATE **AMOUNT** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION Business or Corporation Individual PAC OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED Other (mo./day/yr.) TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 9 2 2011

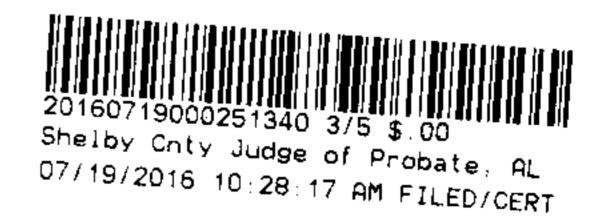
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#### ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

## FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: JOHNNY (JENN DUTTON

When t	otal contributions from a single source exceed \$100.0 <b>DO NOT LIST</b> cash or loans on this												ourc	e to be itemized.	
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)								SOURCE (CHECK ONE)					
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
None															<del></del>
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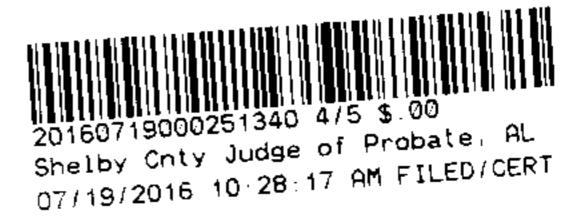


#### ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

## FORM 4: Receipts from Other Sources loans, interest, and other sources of income NAME OF CANDIDATE OR ELECTED OFFICIAL: JOHNNY GIENN DUHON



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** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE **GUARANTORS** RECEIVED OF STREET OR P.O. BOX, Business Other Lending Institution PAC idual (mo /day/yr) RECEIPT Interest [FCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) Loan Indivi PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] TOTAL RECEIPTS THIS PAGE FORM REVISED 9/2/2011



## 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: JOHNNY GIENN DUTTON



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 sportation **AMOUNT** Administrative Advertising
Consultants/
Polling
Contribution
Food
Food
Repayment
Lodging
Transportation OTHER (ADDRESS SHOULD INCLUDE RECEIVING EXPENDITURE EXPENDITURE **OF** STREET OR P.O. BOX, CITY, STATE, AND ZIP) (INCLUDE FULL NAME) GIVE (mo./day/yr.) EXPENDITURE **EXPLANATION** Postage 7-11-16 \$ 13.60 U.S. Post Office 1500 8th Street X
Leeds AL 35094 TOTAL EXPENDITURES THIS PAGE FORM REVISED 9.2.2011

