ANNUAL

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

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Shelby Cnty Judge of Probate, AL
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JAN 25 2012
James W. Fuhrmeister
Judge of Probate

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

**Please Print in Ink or Type.**

| Name of Candidate or Elected Official | Political Party/Ballot Affiliation |
|---|---|
| Jon Parker | Republican |
| **Office Sought or Held (include district or circuit number, if applicable)** | |
| Shelby County Commission Dist. 3 | |
| **Address** ☐ Check box if reporting new address | |
| 840 Hwy 54 | |
| **City** / **State** / **ZIP Code** | **Telephone Number** |
| Montevallo / AL / 35115 | [redacted] |

**Calendar Year** covered by this report: 2012

☐ Amended Annual Report

☐ Termination Report

**Total Pages in Report** Include this page in your count: 5

## SECTION I - Summary of activity from last filed report through December 31 of reporting year

| | | | | | |
|---|---|---|---|---|---|
| 1 | Beginning balance (ending balance from previous filing) | | | 1 | Ø |
| | **Cash Contributions** | | | | |
| 2a | Itemized cash contributions (total from Form 2) | 2a | Ø | | |
| 2b | Non-itemized cash contributions | 2b | Ø | | |
| 2c | Total cash contributions (add lines 2a and 2b) | | | 2c | Ø |
| | **In-Kind Contributions** | | | | |
| 3a | Itemized in-kind contributions (total from Form 3) | 3a | Ø | | |
| 3b | Non-itemized in-kind contributions | 3b | Ø | | |
| 3c | Total in-kind contributions (add lines 3a and 3b) | 3c | Ø | | |
| | **Receipts from Other Sources** | | | | |
| 4a | Total itemized receipts from other sources (total from Form 4) | 4a | Ø | | |
| 4b | Total non-itemized receipts from other sources | 4b | Ø | | |
| 4c | Total itemized receipts from other sources (add lines 4a and 4b) | | | 4c | Ø |
| | **Expenditures** | | | | |
| 5a | Itemized expenditures (total from Form 5) | 5a | Ø | | |
| 5b | Non-itemized expenditures | 5b | Ø | | |
| 5c | Total expenditures (add lines 5a and 5b) | | | 5c | Ø |
| 6 | Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) | | | 6 | Ø |

## SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

| | | | | | |
|---|---|---|---|---|---|
| 7 | Beginning balance (as of January 1 of reporting year) | | | 7 | Ø |
| 8 | Total cash contributions for year | | | 8 | Ø |
| 9 | Total in-kind contributions for year | 9 | Ø | | |
| 10 | Total receipts from other sources for year | | | 10 | Ø |
| 11 | Total expenditures for year | | | 11 | Ø |
| 12 | Ending balance (add lines 7, 8, & 10, then subtract line 11) | | | 12 | Ø |
| 13 | Total campaign debt (total debt owed as of December 31) | 13 | Ø | | |

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.

Jon Parker
Signature of Candidate or Elected Official

1-25-2012
Date

Sworn to and subscribed before me this 25th day of Jan of the year 2012. My commission expires the 29th day of April of the year 2014.

Melody H. Winslett
Signature of Notary Public

Melody H. Winslett
Print Notary's Name

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: _____

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

| PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) | ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PURPOSE OF EXPENDITURE (CHECK ONE) | | | | | | | | | | DATE OF EXPENDITURE (mo./day/yr.) | AMOUNT OF EXPENDITURE |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Administrative | Advertising | Consultants/ Polling | Contribution | Food | Fundraising | Loan Repayment | Lodging | Transportation | OTHER GIVE BRIEF EXPLANATION | | |
| NA | | | | | | | | | | | | | Ø |
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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: _____

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 | RECEIPT SOURCE (CHECK ONE) | | | | | DATE RECEIVED (mo./day/yr.) | AMOUNT OF RECEIPT |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Interest | Loan | Other | GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN] | Lending Institution | PAC | Individual | Business | Other | | |
| NA | | | | | | | | | | | | Ø |
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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: _____

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 loans on this form. Use Forms 2 and 4 for those listings.

| 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) | | | | DATE CONTRIBUTION RECEIVED (mo./day/yr.) | AMOUNT OF CONTRIBUTION |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Administrative | Advertising | Consultants/ Polling | Equipment | Food | Rent | Transportation | Other | Business/ Corporation | Individual | PAC | Other | | |
| NA | | | | | | | | | | | | | | | Ø |
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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: _____

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 or Corporation | Individual | PAC | Other | Returned | | |
| NA | | | | | | | | |
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