

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20120501000149560 1/5 \$.00
Shelby Cnty Judge of Probate, AL
05/01/2012 08:33:32 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official GARY MILLER ZVEY		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) MAYOR CITY OF HOOVER			
Address ☐ Check box if reporting new address 709 CRESTED FERN LN			
City HOOVER	State AL	ZIP Code 35244	Telephone Number [REDACTED]

Type of Report (check one)

- ☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

For Monthly Reports
Month in which the report is filed.

APRIL

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 23140
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	
2b	Non-itemized cash contributions	2b	1360
2c	Total cash contributions (add lines 2a and 2b)	2c	
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	Itemized Receipts from Other Sources (total from Form 4)	4a	
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	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, 2c, & 4c, then subtract line 5c)	6	24500

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 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 **[Signature]** Date **4-26-12**

Sworn to and subscribed before me this **26** day of **April** of the year **2012**. My commission expires the **31** day of **March** of the year **2014**.

Signature of Notary Public **[Signature]**

Print Notary's Name **June B Burr**

Print Notary's Name

NOTARY PUBLIC STATE OF ALABAMA AT LARGE
MY COMMISSION EXPIRES: Mar 31, 2014

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: GARY ZUEY

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		
Joe L McDowell Jr.	2040 Springhill Court Bham 35242		☒				4-10-12	1000 ⁰⁰
Paul Jackson	123 Dacy Road Jackson Al. 36545		☒				4-10-12	180 ⁰⁰
Galen Thackston	7244 Fairwoods Place Montgomery 36117		☒				4-10-12	180 ⁰⁰
TOTAL CASH CONTRIBUTIONS THIS PAGE								1360



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: GARY ZVEY

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				
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																00	

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The seal of the Georgia Institute of Technology is a circular emblem. It features a central shield with a landscape scene depicting a river, a bridge, and a building. Above the shield, the word "GEORGIA" is inscribed. Below the shield, the word "INSTITUTION" is inscribed. The outer ring of the seal contains the words "ALABAMA" on the left and "MISSISSIPPI" on the right, separated by stars at the top and bottom.

CARRY EVERY

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.

20120501000149560 4/5 \$.00
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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: GARY ZIEY

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	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
TOTAL EXPENDITURES THIS PAGE												00	