MONTHLY & WEEKLY

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Print Form

FOR OFFICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official	Political Party/Ballot Affiliation
GARY MILLER IVEY	
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 / **State** / **ZIP Code**	**Telephone Number**
HOOVER AL 35244	[redacted]

Type of Report (check one)

- ☑ Monthly
- ☐ Weekly
- ☐ Amended Monthly
- ☐ Amended Weekly

For Monthly Reports Month in which the report is filed: JUNE

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 61824
	Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	2950	
2b	Non-itemized cash contributions	2b		
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	3888.85	
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 60885.15

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.

Gary Miller Ivey — Signature of Candidate or Elected Official

6-28-12 — Date

Sworn to and subscribed before me this 28 day of June of the year 2012. My commission expires the _____ day of _____ of the year

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

June B Bunn — Signature of Notary Public

June B. Bunn — Print Notary's Name

FORM REVISED 10.27.2011

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 MILLER IVEY

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		
CROWN NISSAN	1640 Montgomery Hwy Hoover 35216	✓					6-25-12	500
Preston Lawley	5414 Trace Ridge Ln Hoover, Al. 35244		✓				6-19-12	200
B'ham Auto Pac	P.O. Box 230821 Montgomery Al. 36123				✓		5-30-12	1000
Ivan Leonard Chevrolet	1620 Montgomery HWY Hoover Al 35216	✓					6.6.12	500
Larry McIntosh	2004 Banebury Drive Hoover Al. 35244		✓					250
US Steel Pac	600 GRANT ST Pittsburg Pa 15219			✓			6.1.12	500

FORM REVISED 10.27.2011

TOTAL CASH CONTRIBUTIONS THIS PAGE 2950

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: GARY MILLER IVEY

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														06

FORM REVISED 10.27.2011

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: GARY MILLER IVEY

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		
FORM REVISED 10.27.2011											TOTAL RECEIPTS THIS PAGE	0 0

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 MILLER IVEY

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		
Boxx 4 Ass	1890 Napier Drive B'Ham Al. 35226						✓					6-4-12	2388.85
Master Image Inc	P.O. Box 59056 B'ham 35209		✓									5-29-12	1500
	TOTAL EXPENDITURES THIS PAGE												

FORM REVISED 10.27.2011