FORM REVISED 10.27.2011



20120713000251150 1/5 3.00 Shelby Cnty Judge of Probate, AL 07/13/2012 01:22:42 PM FILED/CERT A FOR OFFICIAL USE ONLY

RECEIVED JUL 13 2012 James W. Fuhrmeister Judge of Problemeister

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

		Please Print in Ink o	or Type.							
		/Ballot Affiliation		Type of Repo	•		and and Bennathalis			
J. Allan Lowe N/A							nthly		ended Monthly	
	Sought or Held (include distric	• •	licable)		·		✓ We	•		ended Weekly
	or, City of Columbiana						For Monthly I Month in which	•		
Addre	` <u> </u>	new address					report is filed.			
PO E	30x 1143						For Weekly R Date of Friday	-		
Colu	mbiana	State A L	ZIP Code 35051	Telephone Nu	mber		week in which		13JUL1	2
Colu	IIIDIANA	^ L	33031		······································		report is filed.	#		
							Total Number Pages in Rep		5	
Su	mmary of activity s	since last filed	report							
1 E	Beginning balance (e	ending balance fr	om previc	ous filing)				1		\$492.77
С	ash Contributions									
2a I	temized cash contrib	outions (total fron	n Form 2)	 	2a		\$250.00			
2b 1	Von-itemized cash co	ontributions	· · · · · · · · · · · · · · · · · · ·		2b		·			
2c 7	Total cash contributio	ns (add lines 2a	and 2b)	•				2c		\$250.00
In	-Kind Contribution	S								
3a	temized in-kind conti	ributions (total from	om Form	3)	3a	······································	<u></u>			
3b 1	Von-itemized in-kind	contributions			3b					
3c 7	Total in-kind contribut	tions (add lines 3	Ba and 3b)	3c					
R	eceipts from Other	Sources		· · · · · · · · · · · · · · · · · · ·						
4a I	temized Receipts fro	m Other Sources	s (total fro	m Form 4)	4a	<u> Calendario de la compaño de </u>	<u> </u>			
4b 1	Von-itemized Receipt	ts from Other So	urces	······································	4b	· · · · · · · · · · · · · · · · · · ·	<u></u>			
4c 7	Total receipts from ot	ther sources (add	lines 4a	and 4b)				4c		······································
E	xpenditures		······································					• • • • • • • • • • • • • • • • • • •		
5a	temized expenditure	s (total from For	m 5)		5a	· . · · · · · · · · · · · · · · · · · ·				
5b 1	Von-itemized expend	litures			5b		\$93.15			
5c 7	Total expenditures (a	dd lines 5a and !	5b)					5c		\$93.15
6 E	Ending balance (add l	ines 1, 2c, & 4c, t	hen subtr	act line 5c)				6		\$649.62
Cano	didates for State Office	e: File this report v	with the Off	ice of the Se	cretary	of State.			***	
Cano	didates for County or	Municipal Office:	File this re	port with the	Judge	of Proba	te of the cour	ity in w	hich the o	ffice is sought.
As rec	uired by the Alabama Fa	ir Campaign Practic	es Act, I her	eby Swo	rn to an	d subscril	oed before me	this_	134	day of
	or affirm to the best of	-		the \(\neg\)	uly				•	nission expires
	ed report(s) and the ind correct and that this						May		•	•
	nent of all contributions, ation during the applica		•	1115	<i>17-</i>	day or	ray	OT U	ne year	2016
ınform	ation during the applica	ble period of time.			La.	nces	1 10	ر. نامد العمال	a one	/ \
	1 Man	Jane-	13502	.12 Sign		lotary Publi			7.7	
Signat	are of Candidate or Elected	Official	Date	4			11	رق معنی ر		

Print Notary's Name



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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: J. ALLAN LOWE



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 AMOUNT** DATE (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE OF CONTRIBUTION Individual Returned STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED (mo./day/yr.) Jul 12, 2012 \$250.00 ANDREW L. PONTIUS III 85 LAKE FOREST LANE, WILSONVILLE, AL 35186 \$250.00 TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011



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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:

J. ALLAN LOWE



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. NATURE OF CONTRIBUTION SOURCE (CHECK ONE) (CHECK ONE) CONTRIBUTOR **ADDRESS** AMOUNT DATE Administrative
Advertising
Consultants/
Polling
Equipment (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE OF CONTRIBUTION Transportation Other Corporation STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED Other (mo./day/yr.) TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011



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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: J. ALLAN LOWE

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.

FORM COMPLETE THIS BLOCK IF RECEIPT RECEIPT SOURCE

DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings. FORM COMPLETE THIS BLOCK IF RECEIPT RECEIPT SOURCE												
	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	OF RECEIPT			IS A LOAN GUARANTORS		RECEIPT SOURCE (CHECK ONE)					
SOURCE OF RECEIPT (INCLUDE FULL NAME)								<u> </u>	SS		RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other	[FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending Institution	PAC	Individual	Busines	Other		
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TOTAL EXPENDITURES THIS PAGE

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: J. ALLAN LOWE

FORM REVISED 10.27.2011



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) **AMOUNT** DATE OF PERSON/GROUP/BUSINESS **ADDRESS** Administrative OTHER Food Fundraising OF (ADDRESS SHOULD INCLUDE EXPENDITURE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) EXPENDITURE GIVE (INCLUDE FULL NAME) BRIEF **EXPLANATION**