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Shelby Cnty Judge of Probate, AL 07/23/2012 01:39:10 PM FILED/CERT CEIVED

Political Action Committee Campaign Finance Report SUMMARY FORM 1

JUL 20 2012

James W. Fuhrmeister Judge of Probate

Please	Print	in	lnk	or	Type.
I ICASC	E 3 (E E F F	344	1111	VI.	IYMC.

Name of Political Committee (as a J. Allan Lowe	ppears on Statement of C	Organization)	Acronym for PAC	
Address (as appears on Statemen	t of Organization) [] Ch	eck box if repor	ting new address	
PO Box 1143				
City	State	ZIP Code	Telephone Number	
Columbiana	AL	35051	2	

Type of Report (check of	ne)
Monthly	Amended Monthly
✓ Weekly	Amended Weekly
For Monthly Reports Month in which the report is filed.	
For Weekly Reports Date of Friday in the week in which the report is filed.	20 JULY 2012
Total Number of Pages in Report	5

S	ummary of activity since last filed report				
1	Beginning balance (ending balance from previous filing)			1	\$649.62
	Cash Contributions				<u>. </u>
2a	Itemized cash contributions (total from Form 2)	2a			
2b	Non-itemized cash contributions	2b	\$100.00	 	
2c	Non-itemized employee payroll contributions	2c		7	
2d	Total cash contributions (add lines 2a, 2b, and 2c)			2d	\$100.00
	In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a			
3b	Non-itemized in-kind contributions	3b		Existe Alive	
3c	Total in-kind contributions (add lines 3a and 3b)	3c			
	Receipts from Other Sources			.)	
4a	Total itemized receipts from other sources (total from Form 4)	4a			
4b	Total non-itemized receipts from other sources	4b			
4c	Total receipts from other sources (total from Form 4)			4c	
	Expenditures	1			
5a	Itemized expenditures (total from Form 5)	5a	\$288.35		
5b	Non-itemized expenditures	5b			
5c	Total expenditures (add lines 5a and 5b)			5c	\$288.35
6	Ending balance (add lines 1, 2d, & 4c, then subtract line 5c)			6	\$461.27

Sworn to an	d subscribed before me	this 20th	day of
July	of the year 2012	My com	mission expires
the 11th	day of August	of the year	•
Signature of N			·
Lora Beane			ł

Printed Name of Notary Public

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 Chairperson or Treasurer of Political Com-

20JUL12

Date

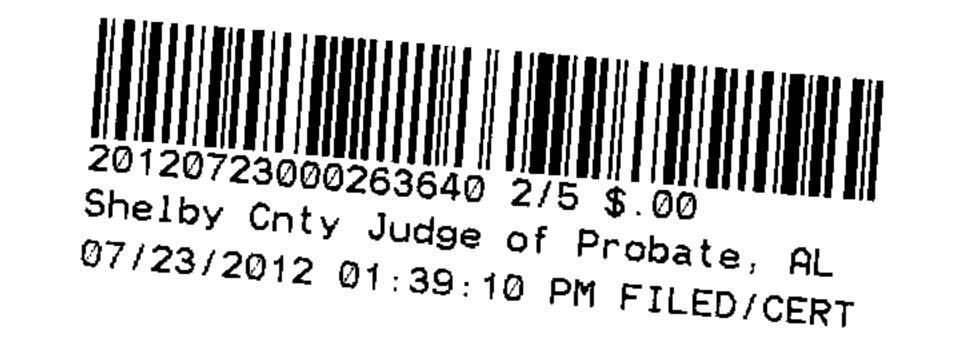
mittee

FORM 2: Contributions received by political action committee

NAME OF POLITICAL ACTION COMMITTEE: J. ALLAN LOWE



	NOT LIST in-kind contributions or loands on this form. Use Forms 3		s co	OUR NTRI		ON		
(INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business (not a corporation)	Corporation	Individual	Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
								\$0.00
ORM REVISED 10.27.2011	TOTAL CASH CO	VTRI	BU'	TIO	NS	ТН	IS PAGE	\$0.00



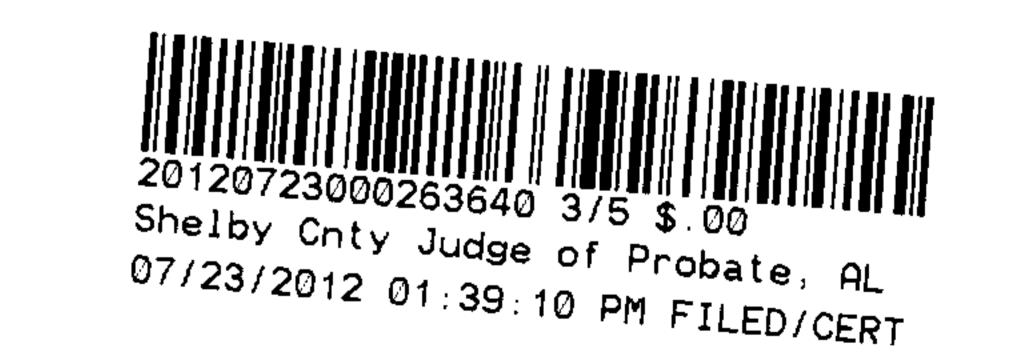
FORM 3: In-Kind Contributions received by political action committee

NAME OF POLITICAL ACTION COMMITTEE:

J. ALLAN LOWE



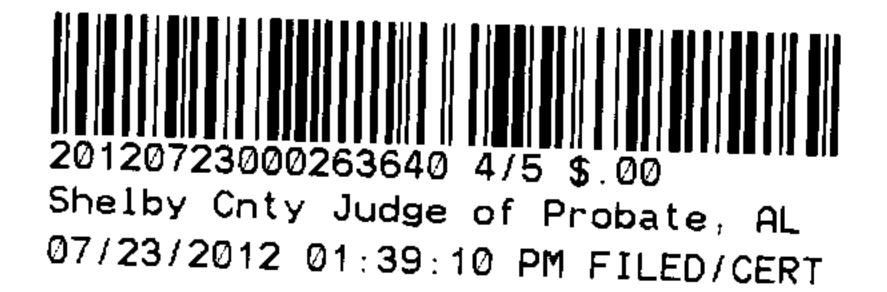
	al contributions from a single source exceed \$100.0 DO NOT LIST cash contributions or loans	on t	his f	orm.	Use	For	ms 2	and	4 fo	r tho	se lis	ting	S.		
CONTRIBUTOR (INCLUDE FULL NAME)	4 D D D C C C		NAII	URE (CHEC			HON	.	1	SOU				AMOUNT OF CONTRIBUTION \$0.00
	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	б	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business (not a corporation)	Corporation	Individual	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	
															\$0.
															
															-
REVISED 10.27.2011		 TC	ATC	L	V-K	INE) C	ON.	TRI	BU.	LLI TIO	NS	ТН	IS PAGE	·



FORM 4: Receipts from Other Sources loans, interest, and other sources of income

NAME OF POLITICAL ACTION COMMITTEE: 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. COMPLETE THIS BLOCK IF RECEIPT **FORM** RECEIPT SOURCE IS A LOAN OF RECEIPT (CHECK ONE) **ADDRESS** SOURCE OF RECEIPT **AMOUNT** DATE (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) **GUARANTORS** RECEIVED OF STREET OR P.O. BOX, (mo./day/yr.) RECEIPT [FCPA REQUIRES FULL NAME AND CITY, STATE, AND ZIP) Other COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN] \$0.00 TOTAL RECEIPTS THIS PAGE \$0.00 FORM REVISED 10.27.2011



FORM 5: Expenditures by political action committee

NAME OF POLITICAL ACTION COMMITTEE: J. ALLAN LOWE



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** AMOUNT DATE OF Administrative **OTHER** Advertising Consultants/ Polling Contribution Food Fundraising (ADDRESS SHOULD INCLUDE OF EXPENDITURE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo /day/yr.) **EXPENDITURE** GIVE (INCLUDE FULL NAME) BRIEF **EXPLANATION** BROWN LUMBER AND BLDG PO Box 758, Columbiana, AL 35051 Jul 17, 2012 \$288.35 SUPPLY, INC TOTAL EXPENDITURES THIS PAGE \$288.35 FORM REVISED 10,27,2011

