



Statement of Dissolution FOR ELECTED OFFICIALS, CANDIDATES AND POLITICAL ACTION COMMITTEES

RECE!

FORM REVISED 9.2.2011

| Please Print in Ink or Type. | Report Status (check one) |
|--|---|
| Name of Candidate or Elected Official, or Political Committee | No report required because I have had no |
| John Greene | activity since the last reporting period Termination report attached |
| Office Sought or Held (include district or circuit number, if applicable) | Termination report attached |
| Hoover City Council Place #7 | Note: If you have had activity since the last report |
| Address Check box if reporting new address | filed, you are responsible for filing the |
| 2439 Gawain Dr. | requisite Annual Report covering the last |
| City State ZIP Code Telephone Number | year of activity. However, the submission of a Termination Report along with the Statement |
| Hoover AL 35226 205-823-7235 | of Dissolution will satisfy this requirement. |
| | |
| This states and discoluse the chaus person Dringing Compoint Comp | aittoo or Political Action Committee as of |
| This statement dissolves the above-named Principal Campaign Comm | illee of Folitical Action Committee as of |
| the 30th day of November in | the year 2012 . |
| tite | |
| | |
| Pursuant to §17-5-7(a) [Code of Alabama, 1975], any excess funds sh manner: | all be disposed of in the following |
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| Repaignent of loan to Self. | · · · · · · · · · · · · · · · · · · · |
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| As required by the Alabama Fair Campaign Practices Act, I hereby sw | ear, or affirm, to the best of my |
| knowledge and belief that this Statement of Dissolution is true and cor | |
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| for there | 12/1/i2 |
| Signature of Candidate or Elected Office Treasurer of Political Committee | ial, or Chairperson or Date |



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



Shelby Cnty Judge of Probate, AL 12/06/2012 09:52:24 AM FILED/CERT

| | P | lease Print in | ink or Type. | | | | Type of Repor | t (chack | വാലി | |
|---------|--|----------------|------------------|-------------------|--|---|---------------------------------|----------------|-----------------|------------|
| - | e of Candidate or Elected Official | | | Political Party/E | Ballot / | Affiliation | Type of Repor | • | Amended | Monthly |
| | n Greenne | | | n/a | | <u>, , , , , , , , , , , , , , , , , , , </u> | Ŭ Wee | • | Amended | Weekly |
| 1 | e Sought or Held (include district or cover City Council Place #7 | | f applicable) | | | | For Monthly R | • | <u></u> | |
| Addr | · · · · · · · · · · · · · · · · · · · | <u> </u> | <u> </u> | <u> </u> | | | Month in which | • | December 2 | 012 |
|] | 9 Gawain Drive | | | | | | report is filed. For Weekly Re | anorts | | |
| City | J Gavrain Direc | State | ZIP Code | Telephone Nur | nber | | Date of Friday | in the | | |
| Hoc | ver | AL | 35226 | 205-823-72 | | | week in which treport is filed. | the | | |
| <u></u> | <u> </u> | <u> </u> | <u> </u> | | | __ | Total Number | | 4 | |
| | | | | | | | Pages in Repo | ort | | |
| Sι | immary of activity sind | ce last fil | ed report | | 1 | | | | | |
| 1 | Beginning balance (endi | ng balanc | e from previ | ous filing) | | | | 1 | | \$25.10 |
| (| Cash Contributions | | | | <u></u> | ·,-, | | - 7 | | |
| 2a | Itemized cash contribution | ons (total | from Form 2) |) | 2a | | \$150.00 | | | |
| 2b | Non-itemized cash contr | ibutions | | , <u></u> | 2b | | | <u></u> | | |
| 2c | Total cash contributions | (add lines | 2a and 2b) | | | | | 2c | | \$150.00 |
| 1 | n-Kind Contributions | | | | | · · · · · · · · · · · · · · · · · · · | | _ | | |
| 3a | Itemized in-kind contribu | tions (tota | i from Form | 3) | 3a | | | | | |
| 3b | Non-itemized in-kind cor | ntributions | | | 3b | · · · · · · · · · · · · · · · · · · · | | | | |
| 3c | Total in-kind contribution | s (add line | es 3a and 3b |) | 3c | | | | | |
| | Receipts from Other So | urces | | | | | | _ | | |
| 4a | Itemized Receipts from (| Other Sou | rces (total fro | om Form 4) | 4a | | \$2.71 | | | |
| 4b | Non-itemized Receipts for | rom Other | Sources | | 4b | | | | | |
| 4c | Total receipts from other | sources | add lines 4a | and 4b) | | | | 4c | | \$2.71 |
| | Expenditures | <u> </u> | | | | | | | | |
| 5a | Itemized expenditures (t | otal from | Form 5) | | 5a | | \$177.81 | | | |
| 5b | Non-itemized expenditure | res | | | 5b | | | | | |
| 5c | Total expenditures (add | lines 5a a | nd 5b) | | | | | 5c | | \$177.81 |
| 6 | Ending balance (add lines | s 1, 2c, & 4 | 1c, then subt | ract line 5c) | | | | 6 | · | \$0.00 |
| Car | ndidates for State Office: | File this rep | ort with the Of | ffice of the Se | ecret | ary of Sta | e. | | | |
| | ndidates for County or Mu | | | | | | | ty in wh | nich the office | is sought. |
| Asre | equired by the Alabama Fair Ca | ampaign Pra | actices Act, The | reby Swo | rn to | and subs | cribed before me | this | c | lay of |
| swea | ar or affirm to the best of my | knowledge | and belief tha | it the | (| of t | he year <u>20 /</u> | 2 | My commission | on expires |
| | ched report(s) and the informand correct and that this information | | | nloto | ······································ | | of feb | | | • |
| state | ement of all contributions, exp | penditures, | and other requ | · Lile | | 4 | | | | · |
| infor | mation during the applicable | period of tir | ne. | | | 11hi | \mathcal{L} | 1.1. | . * | |

ignature of Candidate or Elected Official

Signature of Notary Public

Print Notary's Name

Date

OF ANDIDA AR When total contributions from a single source exceed \$100.00, the MPAIGN IE <mark>유</mark> trib ELEC. PRA DO NOT LIST in-kind contributions or loans on this form. FED OFFICIAL: Utions received by candidate or CTICES ACT - CAMPAIGN FINANCE REPORT John Greene FCPA elected official Use Forms 3 and 4 for those listings. FOR CANDIDATE & ELECTED OFFICIAL



requires all contributions from that source to be itemized.

| \$150.00 | IS PAGE | ゴエ | SNC | JIO | BE | TOTAL CASH CONTRI | | FORM REVISED 10.27.2011 |
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| \$150.00 | Nov 1, 2012 | | | <u> </u> | | ay, Pelham, AL 35124 | 270 Commerce Parkway, | Belmont Studios |
| CONTRIBUTION | CONTRIBUTION RECEIVED (mo./day/yr.) | Returned | Other | PAC | Individual | ADDRESS SHOULD INCLUDE OR P.O. BOX, CITY, STATE, AND ZIP) or no since at the composition of the compositio | STREET C | (INCLUDE FULL NAME) |
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| | | 90. | 10000 | 000 | < | | | |

MPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

Recei S from Other Sources loans, interest, and other sources <u>o</u>f ---

OF. ANDIDATE 유 ELECTED OFFICIAL: John Greene



| € | | AG | SP | SIHT | ST | E E | TOTAL REC | | | - | | FORM REVISED 10.27.2011 | |
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| | Nov 30, 20 | | | | | × | | | | × | P.O. Box 2288 Birmingham, AL 35201 | APCO Credit Union | |
| RECE | RECEIVED (mo./day/yr.) | Other | Business | Individual | PAC | Lending Institution | GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN] | Other | Loan | Interest | (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | (INCLUDE FULL NAME) | |
| | 1 | m | NE Z | S S S | (유 연 | R | COMPLETE THIS BLOCK IF RECEIPT IS A LOAN | TOIS | FORM | OF | | | |
| | ized. | itemi | to be | rce | t sou ings. | n that e listi | 00, the FCPA requires all contributions from ns on this form. Use Forms 2 and 3 for those | 100. jutio | eed \$ ontrib | exce | contributions from a single source DO NOT LIST cash or in-ki | When total | |
| | | | | | | | | | | | | | |

ABAMA FAIR AMPAIGN PRA CTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

Expend itures by candidate or elected official

1E OF CANDIDATE OR ELECTED OFFICIAL: John Greene



When total expenditures to a single recipient exceed \$100.00, the FCPA requires <u>a</u> expenditures ð that recipient be

| FORM REVISED 10.27.2011 | | Shelby | ge of Pro | obate, AL ILED/CER | | | Self | PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) | |
|-------------------------|----------|--------|-----------|-----------------------|---|---|-------------------------------------|---|---------------------|
| | | | | | | | 2439 Gawain Drive, Hoover, AL 35226 | ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | |
| | | | | | | | | Administrative | |
| | | | | - | | | | Advertising | |
| | | | | | | | ···· | Consultants/ Polling | |
| To | <u> </u> | | | | | · | | Charitable Contribution | PUF |
| AT(| | | | | | | | Food | RPOSE |
| m | | | | | : | | | Fundraising | E OF E |
| ¥ | | | | | | | × | Loan Repayment | CK OF |
| | | | | | | | · | Lodging | END |
| DITU | ļ | | | | | | | Transportation | XPENDITURE (ONE) |
| RES THIS | | | | | | | | OTHER GIVE BRIEF EXPLANATION | F T |
| PAGE | | | | | | | Nov 30, 2012 | EXPENDITURE (mo./day/yr.) | |
| \$177.81 | | | | | | | \$177.81 | AMOUNT OF EXPENDITURE | |