

ANNUAL



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

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Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

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JAN 14 2013

James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official GARY MILLER IVEY		Political Party/Ballot Affiliation	
Office Sought or Held (Include district or circuit number, if applicable) MAYOR OF CITY OF HOOVER			
Address <input type="checkbox"/> Check box if reporting new address 709 CRESTED FERN LN			
City HOOVER	State AL.	ZIP Code 35244	Telephone Number 205-733-1749

Calendar Year
covered by this report.**2012**☐ Amended Annual Report☐ Termination ReportTotal Pages in Report
Include this page in
your count.**5****SECTION I - Summary of activity from last filed report through December 31 of reporting year**

1	Beginning balance (ending balance from previous filing)		1	59469.05
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	250	
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	Total itemized receipts from other sources (total from Form 4)	4a		
4b	Total non-itemized receipts from other sources	4b		
4c	Total itemized receipts from other sources (add lines 4a and 4b)	4c		
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	8731.75	
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		

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SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

7	Beginning balance (as of January 1 of reporting year)	7	
8	Total cash contributions for year	8	
9	Total in-kind contributions for year	9	
10	Total receipts from other sources for year	10	
11	Total expenditures for year	11	
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)	12	50987.30
13	Total campaign debt (total debt owed as of December 31)	13	

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
Date **1-11-13**

Sworn to and subscribed before me this **11th** day of **January** the year **2013**, my commission expires the **26th** day of **July** of the year **2015**

Signature of Notary Public
Print Notary's Name **Thomas D. Strickland**

FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

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.

[illegible]

FORM REVISED 9.2.2011

TOTAL CASH CONTRIBUTIONS THIS PAGE

250

NAME OF CANDIDATE OR ELECTED OFFICIAL: GARY TUSEY



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.

[illegible]

GARY M. TVEY



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.

[illegible]

FORM REVISED 9.2.2011

TOTAL RECEIPTS THIS PAGE

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GARY M. ZWEY



**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)**

Administrative
Advertising
Consultants/ Polling
Contribution
Food
Fundraising
Loan Repayment
Lodging
Transportation

OTHER
GIVE
BRIEF
EXPLANATION

**DATE OF
EXPENDITURE
(mo./day/yr.)**

**AMOUNT
OF
EXPENDITURE**

J.H. RAICH

402 OFFICE PARK DR
Suite 310 Bham 35223

The Root

616 Preserve Parkway
Suite 112 Hoover, 35226

B4A Warehouse

1531 1st Ave South
B'ham Al. 35233

Happy Catering

P.O. Box 19519
B'ham Al. 35219

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11-2-12

46670

8.28.12

1264

8-8-12

56

12-12-12

230125

FORM REVISED 9.2.2011

TOTAL EXPENDITURES THIS PAGE

8731