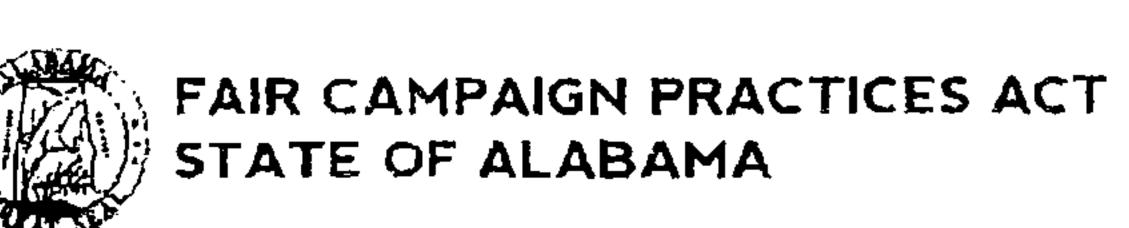
Name of Candidate or Elected Official

Address Check box if reporting new address

Office Sought or Held (inplude district or circuit humber, if applicable)

THIS AREA FOR OFFICIAL USE ONLY



Candidate & Elected Official Campaign Finance Report Campaign Finance
SUMMARY FORM 1

To:

Please Print in Ink or Type.

Shelby Cnty Judge of Probate, AL 08/23/2013 02:51:26 PM FILED/CERT

Political Party/Ballot Affiliation	туре от керогt (check one)				
1//4	Monthly	Amended Monthly			
	Weekly	Amended Weekly			
	For Monthly Reports Month in which the report is filed.	July 3			
Telephone Number	For Weekly Reports Date of Friday in the week in which the report is filed.				
	Total Number of				

City	Vestover AL 35147	nber	week in which report is filed. Total Number	the of	
			Pages in Rep	ort	
	and any or spinish succe last filed report				
1	Beginning balance (ending balance from previous filing)		•	1	24.7]
	Cash Contributions	 			
2a	Itemized cash contributions (total from Form 2)	2a			
2b	Non-itemized cash contributions	2b	6		
2c	Total cash contributions (add lines 2a and 2b)	;		2c	
	In-Kind Contributions	j J			
3a	Itemized in-kind contributions (total from Form 3)	3a	المنافعة الم		
3b	Non-itemized in-kind contributions	3b			
3c	Total in-kind contributions (add lines 3a and 3b)	3c	سري		
	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			
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	24.71

6	Ending balance (add lines 1, 2c, & 4c, then subtract lines 1)	ne 5c)	6	24.11
		The Secretary of State.		
	and the state of t	ate the Judge of Probate of	the county in wh	ich the office is sought.
we tta ue tate	equired by the Alabama Fair Campaign Practices Act, I hereby ar or affirm to the best of my knowledge and belief that the check report(s) and the information contained herein are and correct and that this information is a full and complete ement of all contributions; expenditures, and other required mation during the applicable period of time.	Sworn to and subscribed to the Lo day of	$r_{20/3}$	My commission expires year $\frac{2014}{}$
ign	ature of Candidate of Elected Official Date	Signature of Notary Filipic Signature of Notary Filipic	Laugh	
ORN	REVISED 10.2/2011	Print Notary's Name	\bigcup	

Fax: +1 (205) 669-3714

Page 1 of 2 8/22/2013 4:12

CITY OF WESTOVER

OFFICE OF THE MAYOR

FACSIMILE TRANSMITTAL SHEET				
To: Shelby County Probate Judge	From: Mark McLaughlin			
FAX NUMBER: 205-669-3714	DATE: AUGUST 21, 2013			
Phone Number: 205-669-3710	Total Number of Pages Including Cover: 2			
RE: MONTHLY CAMPAIGN FINANCE REPORT	SENDERS REFERENCE NUMBER:			
□ URGENT □ FOR REVIEW □ 1	PLEASE COMMENT 🗖 PLEASE REPLY			

CONFIDENTIALITY NOTICE

The document (s) in this transmission may contain information that is privileged and confidential and/or exempt from disclosure under applicable law. This information is intended only for the use of the person in the "To:" field of this transmission coversheet. If you are not the intended recipient, please be advised not to copy, distribute, or take action in reliance of this information. If you have received this communication by error, please notify us immediately by telephone so that we can arrange for its immediate return. Thank you for your anticipated cooperation.

20130823000346570 2/2 \$.00 Shelby Cnty Judge of Probate, AL 08/23/2013 02:51:26 PM FILED/CERT

CITY OF WESTOVER
MAYOR MARK MCLAUGHLIN
POST OFFICE BOX 356
WESTOVER, AL 35185
CITY HALL 205-678-3375
FAX 205-678-3376
WWW.WESTOVERALABAMA.ORG

