

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

DEC 30 2013

James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Type of Report (check one)

Monthly

Amended Monthly

Weekly

Amended Weekly

For Monthly Reports

Month in which the
report is filed.October
2013

For Weekly Reports

Date of Friday in the
week in which the
report is filed.Total Number of
Pages in Report

Name of Candidate or Elected Official <u>Mark McLoughlin</u>		Political Party/Ballot Affiliation <u>N/A</u>	
Office Sought or Held (include district or circuit number, if applicable) <u>Mayor City of Westover</u>			
Address <input type="checkbox"/> Check box if reporting new address <u>250 McLoughlin Lane</u>			
City <u>Westover</u>	State <u>AL</u>	ZIP Code <u>35747</u>	Telephone Number <u>[REDACTED]</u>

1	Beginning balance (ending balance from previous filing)	1	<u>24.71</u>
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	<u>0</u>
2b	Non-itemized cash contributions	2b	<u>0</u>
2c	Total cash contributions (add lines 2a and 2b)	2c	<u>0</u>
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	<u>0</u>
3b	Non-itemized in-kind contributions	3b	<u>0</u>
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<u>0</u>
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<u>0</u>
4b	Non-itemized Receipts from Other Sources	4b	<u>0</u>
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<u>0</u>
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	<u>0</u>
5b	Non-itemized expenditures	5b	<u>0</u>
5c	Total expenditures (add lines 5a and 5b)	5c	<u>0</u>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<u>24.71</u>

20131230000496180 1/1 \$0.00
Shelby Cnty Judge of Probate, AL
12/30/2013 01:50:28 PM FILED/CERT

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 [Signature]
Date 12/3/13

Sworn to and subscribed before me this 3rd day of December of the year 2013. My commission expires the 16th day of April of the year 2014.

Signature of Notary Public [Signature]
Print Notary's Name Sherry McLoughlin