

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20160801000269900 1/5 \$ 00 Shelby Cnty Judge of Probate, AL 08/01/2016 01:06:06 PM FILED/CERT

Please Print in Ink or Type.

Nar	ne of Candidate or Elected Official	Political Party/	Ballot A	ffiliation	Type of Repor	t (check	cone)
		Indepe			Mon	•	Amended Monthly
	ce Sought or Held (include district or circuit number, if applicable)	_			Wee	kly	Amended Weekly
<u> </u>	Montevallo CityCouncil D	istric	r#.	3	For Monthly R Month in which	•	
	ress Check box if reporting new address.				report is filed.		
1	10 Calmont Woods Drive			:	For Weekly Re Date of Friday i	-	
City	Nortevallo AL 35115	Telephone Nu	mber		week in which t report is filed.		7-29-16
					Total Number Pages in Repo		5
S	ummary of activity since last filed report						
1	Beginning balance (ending balance from previou	us filing)				1 \$	37a. 75
	Cash Contributions				· ;		
2a	Itemized cash contributions (total from Form 2)	· · · · · · · · · · · · · · · · · · ·	2a		· · · · · · · · · · · · · · · · · · ·		
2b	Non-itemized cash contributions		2b				
2c	Total cash contributions (add lines 2a and 2b)					2c	
!	In-Kind Contributions	· · · · · · · · · · · · · · · · · · ·			•	L 	
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				
I	Receipts from Other Sources	····	<u> </u>			:	
4a	Itemized Receipts from Other Sources (total from	r Form 4)	4a				
4b	Non-itemized Receipts from Other Sources		4b				
4c	Total receipts from other sources (add lines 4a a	nd 4b)	,			4c	
	Expenditures				L		······································
5a	Itemized expenditures (total from Form 5)		5a ≸	324.	00	:	÷
5b	Non-itemized expenditures		5b				
5c	Total expenditures (add lines 5a and 5b)				·	5c	
6	Ending balance (add lines 1, 2c, & 4c, then subtract	ct line 5c)	· 			6	\$48.75
Car	ndidates for State Office: File this report with the Offic	e of the Se	cretar	v of State			
	ndidates for County or Municipal Office: File this rep					y in wh	ich the office is sought.
As re	equired by the Alabama Fair Campaign Practices Act, I herek	by Swor	n to a	nd subscri	bed before me	this	5+ day of
	ar or affirm to the best of my knowledge and belief that the	_					My commission expires
	thed report(s) and the information contained herein a and correct and that this information is a full and comple	re ete	17		Salmahar	<u></u> .	e year <u>2016</u>
state	ment of all contributions, expenditures, and other require	<i>-</i>					
ntori	mation during the applicable period of time. **Rang 8-1-16	, /	/	aha (A O A	. <u>-</u>	CAROLYN JONES
_4	18-1-16	Signa	ture of	Notary Publ	id	lotary Alab	CAROLYN JONES Public, Shelby County ama State At Large
oig n a	ature of Candidate or Elected Official Date	_		n Jon		My (Commission Expires ptember 17, 2016
							, , , , , , , , , , , , , , , , , , ,

Print Notary's Name

ALABAMA FAIR CAMPAIGN PRACT FICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE ζo ELECTED OFFICIAL

Contributions received by candidate or e lected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

Use Forms 3 and 4 for those listings. all contributions from that source to be itemized.

	IIS PAGE	TH	SNS	0	Ğ.	굕	TOTAL CASH CONT	ORM REVISED 10.27.2011
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CONTRIBUTION	CONTRIBUTIO RECEIVED (mo./day/yr.)	Returned	Other	PAC	Individual	Business or Corporation	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
		O _N	BUTIONE)	CHAIR C	(C H S S S S S S	유		
	e to be itemized.	ource gs.	nat so	m th	s froi r tho	itions 4 for	utions from a single source exceed \$100.00, the FCPA requires all contributions from a single source exceed \$100.00, the FCPA requires all contributions or loans on this form. Use Forms 3 and	When total contribu

MPAIGN TICES ACT CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELEC TED OFFICIAL

Contributions received рd cal ndidate 9 <u>e</u> lected official

ME OF CANDIDATE OR ELECTED OFFICIAL:

CONTRIBUTOR (INCLUDE FULL NAME) Shelby Cnty Judge of Probate, AL 08/01/2016 01:06:06 PM FILED/CERT <u>†</u>0. 2011 When total contributions from a single source exceed **DO NOT LIST** cash or loans **ADDRESS**(ADDRESS SHOULD INCLUDE)
STREET OR P.O. BOX, CITY, STATE, AND ZIP) exceed \$100.00, on this form. Administrative TOTAL the NATURE OF Advertising **FCPA** Use Consultants/ Polling Forms Z requires Equipment -KIND CONTRIBUTION ECK ONE) Food **N** and <u>a</u> Rent CONTRIBUTIONS contributions ਠ੍ਹਾਂ Transportation those Other Business/ listings. from Corporation SOURCE (CHECK ONE) Individual that PAC source SIHT Other ţ DATE PAGE be (mo./ itemized. /day/yr.) EIVED

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

FORM 4: Receipts Other Sources loans, interest, and other sources 악 Ĭ.

NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total contributions from a single source exceed \$100.00, the FCPA requirement to the contributions on this form. Use FCPA requires Forms all contributions from that source to be itemized. and 3 for those listings.

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RECEIPT	RECEIVED (mo./day/yr.)	Business Other	Individual	PAC	Lending Institution	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Other	Loan	Interest	1 夕ら日 9	(INCLUDE FULL NAME)
		JRCE E)	SOU NE	CEIPT (CHEC	REC	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	E PT	FORM	우		ם ח ס ח

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FORM PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE REVISED Shelby Cnty Judge of Probate, AL 08/01/2016 01:06:06 PM FILED/CERT 0 1) iv 2011 S Inc P ADDRESS SHOULD III
T OR P.O. BOX, CITY, S O Montevallo, PKE 3515 Administrative メ Advertising Consultants/ Polling Charitable Contribution TOTAL PURPOSE OF EXPENDITURE (CHECK ONE) Food Fundraising **EXPENDITURES** Loan Repayment Lodging Transportation OTHER GIVE BRIEF LANATION THIS PAGE EXPENDITUE OF ナ 28 3%