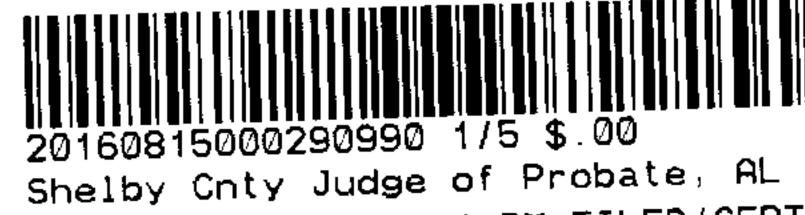




#### Candidate & Elected Official 目 Campaign Finance Report 图 SUMMARY FORM 1



08/15/2016 01:44:31 PM FILED/CERT

Jessica L. Holland

Print Notary's Name

	Please Print in Ink or Type.					_		
Nar	ne of Candidate or Elected Official Politica	al Party/Ba	allot .	Affiliation	Type of	Repor	-	ck one)  Amended Monthly
Ke	rri Pate					_] 	•	Amended Weekly
	ce Sought or Held (include district or circuit number, if applicable)				For Mor	J	•	
	baster City Council Ward 7 Candidate  ress	····			For Mor Month in	•	•	<b>5</b>
					report is			
	00 N Grande View Cv	L N.L	<u>,,</u>		For Wee Date of	-	•	
City Ma	State ZIP Code Teleph ylene AL 35114	hone Numl	oer		week in report is		the	08/19/2016
	yierie / L				Total Nu		of	
					Pages i			5
S	ummary of activity since last filed report							
1	Beginning balance (ending balance from previous fil	ling)					1	766.21
	Cash Contributions							
2a	Itemized cash contributions (total from Form 2)	2	2a	· · · · · · · · · · · · · · · · · · ·	80	0.00		
2b	Non-itemized cash contributions	2	2b		5	0.00		
2c	Total cash contributions (add lines 2a and 2b)						2c	850.00
•	In-Kind Contributions		·					
 3а	Itemized in-kind contributions (total from Form 3)	3	3a			··· <u>-</u>		
3b	Non-itemized in-kind contributions	3	3b		<del></del>			
3c	Total in-kind contributions (add lines 3a and 3b)	(	3c		·····-			
	Receipts from Other Sources		<u></u>					
 4а	Itemized Receipts from Other Sources (total from Fo	orm 4) 4	4a		· <del>············</del>	·· · · · · · · · · · · · · · · · · · ·		
4b	Non-itemized Receipts from Other Sources	4	4b			··		
4c	Total receipts from other sources (add lines 4a and	4b)	: : :				4c	
	Expenditures		: .					
5a	Itemized expenditures (total from Form 5)		5a	,	12	4.52		
5b	Non-itemized expenditures		5b					
5c	Total expenditures (add lines 5a and 5b)						5c	124.52
6	Ending balance (add lines 1, 2c, & 4c, then subtract lines	ne 5c)	:				6	1491.69
Ca	ndidates for State Office: File this report with the Office of	f the Sec	cret	ary of State	<b>)</b> .			
	ndidates for County or Municipal Office: File this report v					coun	ty in v	which the office is sought.
As r swe atta rue stat	equired by the Alabama Fair Campaign Practices Act, I hereby ar or affirm to the best of my knowledge and belief that the ched 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 rmation during the applicable period of time.	sworr the	to	and subsci	ribed before	re me	this //	day of
1 1	WINGONIA III WALMANA IIKA	Signal		of Notary Pub	olic		_	

Date

Signature of Candidate or Elected Official

# ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE 80 ELECTED OFFICIAL

### FORM 2: Contributions received by candidate 9 $\Phi$ lected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Kerri Pate

FORM REVISED 10.27.2011 Billy Jack Franklin Enterprises Franklin Fence CONTRIBUTOR (INCLUDE FULL NAME) Çο When total contributions from a single source exceed \$100.00, the FCPA requires **Erosion LLC** DO NOT LIST in-kind contributions or loans on this form. Use 171 171 Big Rock Dr, Calera AL Big Rock Dr, Calera AL ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) 35040 35040 TOTAL CASH Forms all contributions CONTRIBUTIONS ယ and 4 Business or X X QF Corporation for those listings. SOURCE CONTRIBUTION (CHECK ONE) Individual from PAC that Other source SIHT Returned ರ CONTRIBUTION 08/15/2016 be 08/15/2016 RECEIVED (mo./day/yr.) **PAGE** DATE itemized CONTRIBUTION AMOUNT 400.00 800.00 400.00

20160815000290990 2/5 \$.00 20160815000290990 2/5 \$.00 Shelby Cnty Judge of Probate, AL 08/15/2016 01:44:31 PM FILED/CERT

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

#### FORM 3: In-Kind ( ontributions received рy can ididate 9 elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Kerri Pate



When total contributi ons from a single source exceed DO NOT LIST cash or loans \$100.00, the on this form. FCPA requires Use Forms 2 and 4 for those listings. all contributions from that source to be itemized.

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obate, AL														
T									: 					
CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Other	PAC	Corporation Individual	Business/	Transportation Other	Rent	Food	Equipment	Polling	Advertising Consultants/	Administrative	(INCLUDE FULL NAME)  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCL
•		m '''	SOURCE (CHECK ONE)	CHE OSO		ON	T	NTR.	ECK (	URE OF CONTRIBI	ATUF	z		

### ALABAMA FAIR CAMPAIGN PRACT TICES ACT CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

#### Receipts from ther Sources loans, interest, and other sources of income

NAME OF CANDIDATE OR ELECTED OFFICIAL: Kerri Pate

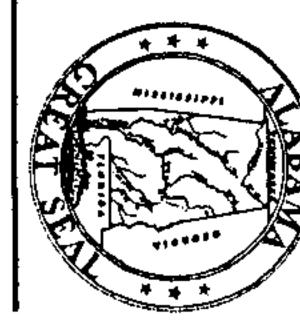
When total contributions from a single DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings. source exceed \$100.00, the FCPA requires all contributions from that source ţ be itemized.

FORM REVISED 10.27.2011									(INCLUDE FULL NAME)	
									(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	
									Interest	OF R
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	<u> </u>			iii						<u> </u>
TOTAL RECE									GUARANTORS  [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN
PT								· · · · · · · · · · · · · · · · · · ·	Lending Institution	REC
II S	·								PAC	XEIPT CHEC
SIE		 						<del></del>	Individual Business	SOU
PΑ									Other	RCE
G									RECEIVED (mo./day/yr.)	7
			201 She	60815000 1by Cnty	290990 4 Judge 0	5 \$.00 f Probate PM FILE	e, AL D/CERT		RECEIPT	

# ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE Q٥ ELECTED OFFICIAL

# Expenditures by candidate or elected ofi ficial

NAME OF CANDIDATE OR ELECTED OFFICIAL: Kerri Pate



When total expenditures to a single recipient exceed \$100.00, the FCPA requires expenditures ð that recipient be nized.

124.52	PAGE	FURES THIS P		EXPE		707						FORM REVISED 10.27.2011
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100.00	08/09/2016							×			157 Flagstone, Calera AL 35040	Lindsay Schluntz
24.52	08/15/2016			· · · · · · · · · · · · · · · · · · ·				^	×		713 Olde Town Cir, Alabaster AL 35007	Inviting You Designs
AMOUNT OF EXPENDITURE	DATE OF EXPENDITURE (mo./day/yr.)	OTHER  GIVE BRIEF EXPLANATION	Lodging Transportation	Loan Repayment	Fundraising	Food	Charitable	Consultants/ Polling	Advertising	Administrative	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)
		RE	PENDITURE	× π γ	$\bot$ $\frown$ $\blacksquare$	PURPOSE (C)	2					

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