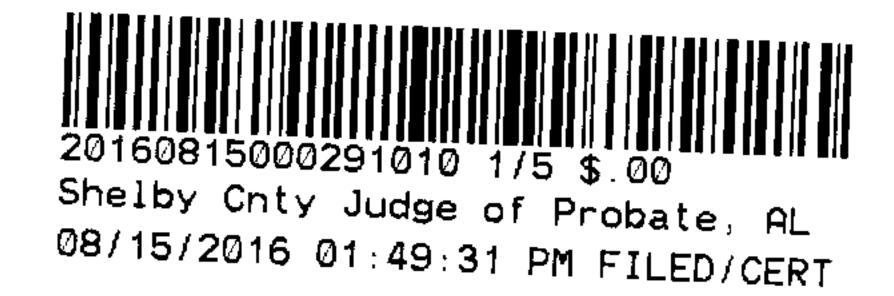
FORM REVISED 10.27.2011



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



Please Print in Ink or Type.					
Name of Candidate or Elected Official	Political Party/Ballot Affiliation	<u></u>			
Lenny Glynn	Republican	Monthly	Amended Monthly		
Office Sought or Held (include district or circuit number, if applicable)		✓ Weekly	Amended Weekly		
Mayor City of Pelham Address Check box if reporting new address		For Monthly Reports Month in which the			
		report is filed.			
Post Office Box 689		For Weekly Reports			
City State ZIP Code Pelham AL 35124	Telephone Number	Date of Friday in the week in which the	August 12, 2016		
remain AL 33124		report is filed.			
		Total Number of Pages in Report	5		
Summary of activity since last filed report					
1 Beginning balance (ending balance from previ	ous filing)	1	\$1,890.38		
Cash Contributions					
2a Itemized cash contributions (total from Form 2)) 2a	\$800.00	· · · · · · · · · · · · · · · · · · ·		
2b Non-itemized cash contributions	2b				
2c Total cash contributions (add lines 2a and 2b)		2c	\$800.00		
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 Itemized Receipts from Other Sources (total from	om 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	\$13.63			
5b Non-itemized expenditures	5b	\$50.29			
5c Total expenditures (add lines 5a and 5b)		5c	\$63.92		
6 Ending balance (add lines 1, 2c, & 4c, then subtr	ract line 5c)	6	\$2,626.46		
Candidates for State Office: File this report with the Of	fice of the Secretary of S	State			
Candidates for County or Municipal Office: File this re			ich the office is sought.		
As required by the Alabama Fair Campaign Practices Act, The		bscribed before me this	15th day of		
swear or affirm to the best of my knowledge and belief that	t the /////	$-\lambda m I I I$	My commission expires		
attached report(s) and the information contained herein rue and correct and that this information is a full and comp		, <u> </u>			
statement of all contributions, expenditures, and other requ	uired the	$\mathcal{L}_{\mathcal{L}}$	e year <u>2018</u>		
nformation during the applicable period of time.		MA. M.			
118/15/	Signature of Notar	y Public	<u>. </u>		
Signature of Candidate or Elected Official Date	1/1/950	sica 1. Ho	11and		
ORM REVISED 10.27.2011	Print Notary's Nam	ne 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

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

FORM 2: Contributions received by candidate or elected official

FORM REVISED 10.27.2011

Lenny Giynn

\$800.00

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. SOURCE OF CONTRIBUTION (CHECK ONE) CONTRIBUTOR **ADDRESS** DATE **AMOUNT** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE OF CONTRIBUTION STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION Other (mo./day/yr.) PAC Jeff Smith 88 Dam Rd, Wilsonville, AL 35186 08/11/2016 \$800.00

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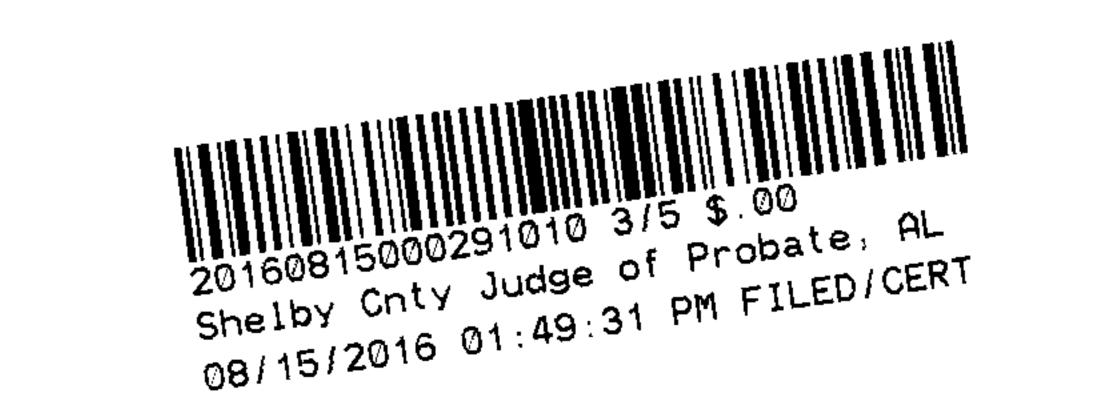
TOTAL CASH CONTRIBUTIONS THIS PAGE

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

FORM 3: In-Kind Contributions received by candidate or elected official

Lenny Glynn 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 cash or loans on this form. Use Forms 2 and 4 for those listings. NATURE OF CONTRIBUTION SOURCE (CHECK ONE) (CHECK ONE) CONTRIBUTOR **ADDRESS AMOUNT** DATE (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE Administrativ Advertising Consultants/ Polling Equipment OF CONTRIBUTION Business/ Corporatior Individual STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION Other Other (mo./day/yr.) Food Rent PAC TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011



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

FORM 4: Receipts from Other Sources loans, interest, and other sources of income

TAT SC

NAME OF CANDIDATE OR ELECTED OFFICIAL: Lenny Glynn

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT		1	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN		RECEIPT SOURCE (CHECK ONE)					
		Interest	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
· · · · ·												
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<u></u>						<u> </u>						
					TOTAL REC	FID7	re 1	FLI I				<u> </u>



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

FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Lenny Glynn



When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized. **PURPOSE OF EXPENDITURE** (CHECK ONE) PERSON/GROUP/BUSINESS **ADDRESS AMOUNT** DATE OF Administrative **OTHER** (ADDRESS SHOULD INCLUDE OF **EXPENDITURE** RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) **GIVE** EXPENDITURE Lodging (INCLUDE FULL NAME) BRIEF **EXPLANATION Home Depot** 3191 Pelham Pkwy, Pelham, AL 35124 08/10/2016 Sign - supplies \$13.63 X TOTAL EXPENDITURES THIS PAGE \$13.63 FORM REVISED 10.27.2011

