Coun'ty Division Code: AL040 Inst. # 2016082852 Pages: 1 of 5 I certify this instrument filed on: 8/12/2016 5:35 PM

Doc: ELCAPRE Alan L.King, Judge of Probate Jefferson County, AL

Clerk: LYNN

| FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA | - | THIS AREA FOR | OFFICIAL USE ONLY | | | | | |
|---|---------------------------------------|---|---|--|--|--|--|--|
| Candidate & Elected Off Campaign Finance Report SUMMARY FORM 1 | | Shelb 08/19 | 819000298160 1/5 \$.00 by Cnty Judge of Probate, AL 1/2016 10:34:14 AM FILED/CERT | | | | | |
| Name of Candidate or Elected Official Political Party/ | Ballot Affiliation KING Pe of Probate | Type of Report (check Monthly Weekly For Monthly Reports Month in which the report is filed. For Weekly Reports Date of Friday in the week in which the report is filed. Total Number of | Amended Monthly Amended Weekly | | | | | |
| Summary of activity since last filed report 1 Beginning balance (ending balance from previous filing) Cash Contributions 2a Itemized cash contributions (total from Form 2) 2b Non-Itemized cash contributions 2c Total cash contributions (add lines 2a and 2b) | 2a 83 2b | Pages in Report | 850.00 | | | | | |
| In-Kind Contributions 3a Itemized In-kind contributions (total from Form 3) 3b Non-itemized in-kind contributions 3c Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources | 3a 3b 3c | 0 0 0 | | | | | | |
| 4a Itemized Receipts from Other Sources (total from Form 4) 4b Non-itemized Receipts from Other Sources 4c Total receipts from other sources (add lines 4a and 4b) Expenditures 5a Itemized expenditures (total from Form 5) Non-itemized expenditures | 4b | 4c 4c | 5000.00 | | | | | |
| | ecretary of Sta e Judge of Pro | | . 1 | | | | | |
| 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 Date FORM REVISED 9.2.2011 SUSAN D. CUMMINGS | 131 day | of May of the | My commission expires he year 2016 | | | | | |
| Notary Public State of Alabama MY COMMISSION EXPIRES: AUG 31, 2016 | • | | | | | | | |

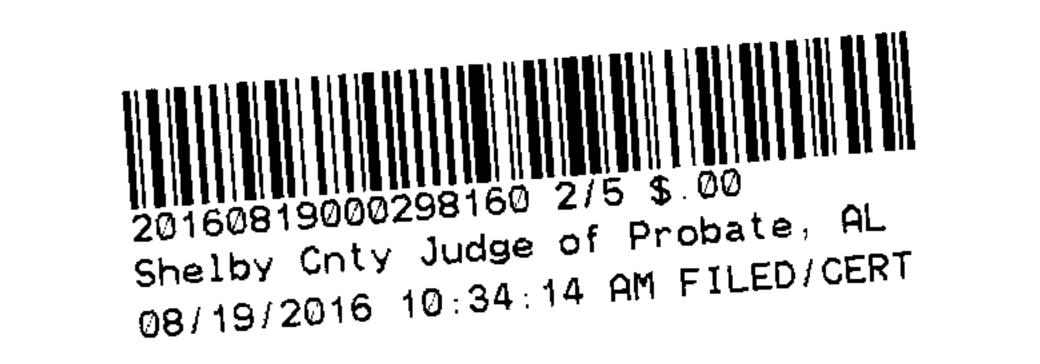
ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: TREY D. Lott



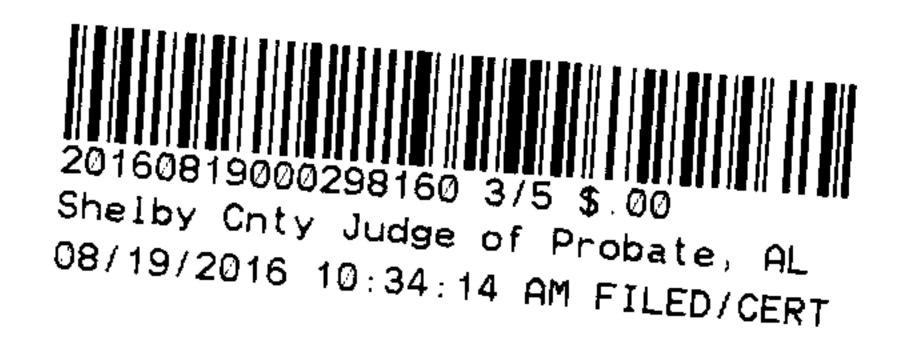
| CONTRIBUTOR (INCLUDE FULL NAME) | O NOT LIST in-kind contributions or loans on this form. Use Forms 3 a | T | S F CO | OUR NTRI | CE | ION | | | |
|------------------------------------|---|----------------------------|------------|--------------------------|----|-----|--|------------------------------|--|
| | (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | Business or Corporation | Individual | PAC Other Returned | | - | DATE CONTRIBUTION RECEIVED (mo./day/yr.) | AMOUNT OF CONTRIBUTION | |
| CHARLES AND ANN WEPHERSON | 4727 OUD LOONey MILL RD Birming HAM AL 35243 | | X | | | | 2-1-16 | 250.00 | |
| PAUL SAIA | 2004 Morning Cove circue Birmingham AL 35244 | | X | | | | 4-22-16 | 250.00 | |
| Rum And Scott Scheam | 413 DOVECOTE CIRCUE Bieningham AL 35244 | | X | | | | 4-27-16 | 100.00 | |
| LANCE AND MEUSSA HYCUE | GIRMINGHAM AL 3524Z | | X | | | | 4-27-16 | 250.00 | |
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| | | | | | | | | | |
| ORM REVISED 9.2.2011 | TOTAL CASH CON | TRI | 3U1 | IO | NS | TH | IS PAGE | 850.00 | |



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

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

| NAME OF CANDIDATE OR I | | | | # | | , 1 | | | | | | | | | | ······································ | |
|------------------------|--|-----------------|---------------------------------------|------------------------|-----------|----------------|----------|-----------------|---------------|--------------------------|----------------|--------------|------|---------|--------------------------------------|--|--------------------|
| - When total | contributions from a single source exceed \$100.0 DO NOT LIST cash or loans on this | 00, tr s for | ne Fi m. l | CPA Jse i | oun | ires 182 | all cand | ontril 4 for | butio thos | ns fro se lis | om th tings | net s i. | ouro | e to be | temized. | 1 | |
| | | NATE | NATURE OF CONTRIBUTION (CHECK ONE) | | | | | | | | SOL | | | | | | |
| (INCLUDE FULL NAME) | (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | Administrative | Advertising | Consultants/ Poling | Equipment | Food | Rent | Transportation | oge G | Business/ Corporation | Individual | PAC | ŀ | CONT | ATE SIBUTION EIVED day/yr.) | • | UNT F BUTION |
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| FORM REVISED 9.2.2011 | | TO | TA | LIN | ŀΚ | IND | C | דאכ | RI | 3UT | 101 | VS ' | TH | S PA | 3E | | |



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 NAME OF CANDIDATE OR ELECTED OFFICIAL: TREY D. Lett

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 in-kind contributions on this form. Use Forms 2 and 3 for those listings. COMPLETE THIS BLOCK IF RECEIPT FORM RECEIPT SOURCE **IS A LOAN** OF RECEIPT (CHECK ONE) **ADDRESS** SOURCE OF RECEIPT DATE **AMOUNT** (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) **GUARANTORS** RECEIVED OF STREET OR P.O. BOX, (mo./day/yr.) RECEIPT [FCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) PLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN Hoovee AL 35242 ORTREY D'EUGUN COT Ressonal Laso 17.20-16 5000.00 5000,00 TOTAL RECEIPTS THIS PAGE FORM REVISED 9.2.2011



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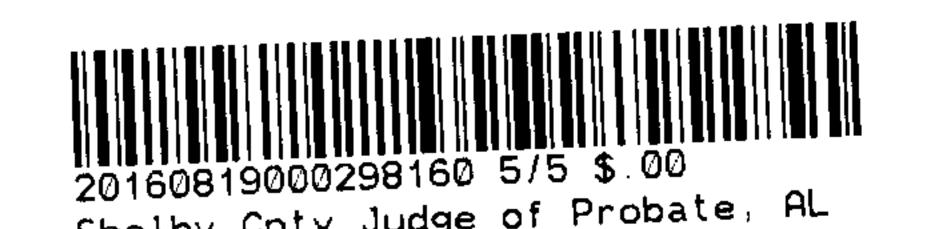
FORM REVISED 9.2.2011

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: TR-EY D. Lett.

| | | | , | · | . PI | URPC | 08E ((CH | | | | | | |
|---|--|----------------|--------------|------------------------|--------------|------|--------------|------|---------|-----------------|------------------------------|---|-----------------------------|
| PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) | ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP | Administrative | Advertising | Consultants/ Poling | Contribution | F800 | Fundraising | Loan | Lodging | Transportation. | OTHER GIVE BRIEF EXPLANATION | DATE OF EXPENDITURE (mo./day/yr.) | AMOUNT OF EXPENDITURI |
| City of Hoover | MUNICIPAL DRIVE HOOVER, AL 35216 | | | | | | | | | | GUALIFYING FLC | 7-5-16 | 50.0 |
| rnes Publishing | | | X | | | | | | | | · | 72+16 | 425.0 |
| Cony Her | | | | X | | | | | | | | 7-21-16 | 300.0 |
| ic designs & Premos | POBOX 130748 Bruminaham AL 3521 | 3 | X | | | , | | | | | | 7-29-16 | 2029.8 |
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TOTAL EXPENDITURES THIS PAGE

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