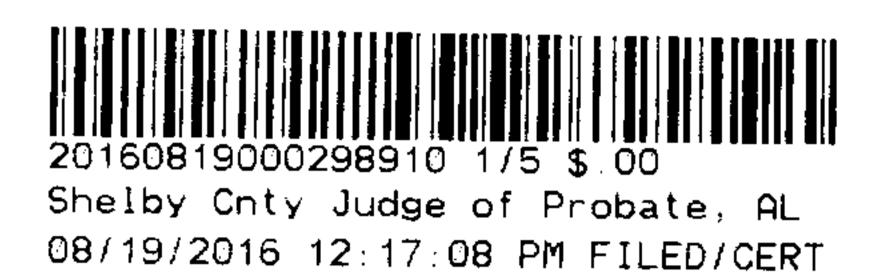
# 40NTHLY & WEEKLY



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



Please Print in Ink or Type. Name of Candidate or Elected Official Type of Report (check one) Political Party/Ballot Affiliation Amended Monthly JOHNNY GleNN Monthly Weekly Office Sought or Held (include district or circuit number, if applicable) Amended Weekly District 3 Leeds For Monthly Reports Month in which the Check box if reporting new address report is filed. For Weekly Reports Date of Friday in the ZIP Code Telephone Number week in which the 35094 Leeds report is filed. Total Number of Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) **Cash Contributions** Itemized cash contributions (total from Form 2) 2a Non-itemized cash contributions 2b Total cash contributions (add lines 2a and 2b) 2c In-Kind Contributions Itemized in-kind contributions (total from Form 3) 3a Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) 3c Receipts from Other Sources

Candidates for State Office: File this report with the Office of the Secretary of State.

Candidates for County or Municipal Office: File this report with the Judge of Probate of the county in which the office is sought.

4b

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.

Non-itemized Receipts from Other Sources

Itemized expenditures (total from Form 5)

Total expenditures (add lines 5a and 5b)

Non-itemized expenditures

Itemized Receipts from Other Sources (total from Form 4) |4a|

Total receipts from other sources (add lines 4a and 4b)

Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)

Signature of Candidate or Elected Official

Expenditures

4c

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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: JOHNNY GIENN DUTTON

When total contribution DO	ons from a single source exceed \$100.00, the FCPA requires all contributions or loans on this form. Use Forms 3 a	ibution	ns fro	om th	nat so	ource gs.	e to be itemized.	
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)						
		Business or Corporation	Individual	PAC	Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
None								
	···-							
ORM REVISED 9.2.2011	TOTAL CASH CONTRIBUTIONS THIS PAGE							0

20160819000298910 3/5 \$ 00

20160819000298910 3/5 \$.00 Shelby Cnty Judge of Probate, AL 08/19/2016 12:17:08 PM FILED/CERT

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 ELECTED OFFICIAL: JOHNNY GIENN DUTTON



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 DATE AMOUNT (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION (mo./day/yr.) TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 9.2.2011

20160819000298910 4/5 \$ 00

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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: JOHNNY GIENN DUHON

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) SOURCE OF RECEIPT ADDRESS DATE AMOUNT (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE GUARANTORS RECEIVED OF STREET OR P.O. BOX, Business (mo./day/yr.) RECEIPT CITY, STATE, AND ZIP) [FCPA REQUIRES FULL NAME AND COM-PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] TOTAL RECEIPTS THIS PAGE **FORM REVISED 9.2.2011** 



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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: JOHNNY GIENN DUTTON



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 DATE OF **AMOUNT** OTHER (ADDRESS SHOULD INCLUDE RECEIVING EXPENDITURE EXPENDITURE OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) (INCLUDE FULL NAME) GIVE (mo./day/yr.) EXPENDITURE BRIEF EXPLANATION TOTAL EXPENDITURES THIS PAGE FORM REVISED 9,2,2011