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Shelby Cnty Judge of Probate: AL

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USE ONLY

MONTHLY &amp; WEEKLY

FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMACandidate & Elected Official  
Campaign Finance Report  
SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official <b>Devon R. Roscha Ragland Pierce</b>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <b>Mayor</b>			
Address <input type="checkbox"/> Check box if reporting new address <b>P.O. BOX 291</b>			
City <b>Leeds</b>	State <b>AL</b>	ZIP Code <b>35094</b>	Telephone Number

Type of Report (check one)

☐ Monthly☐ Amended Monthly☒ Weekly☐ Amended WeeklyFor 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  
Pages in Report**8/5/16**

## Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<b>7249.16</b>
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a	<b>0</b>
2b	Non-itemized cash contributions	2b	<b>0</b>
2c	Total cash contributions (add lines 2a and 2b)	2c	<b>0</b>
<b>In-Kind Contributions</b>			
3a	Itemized in-kind contributions (total from Form 3)	3a	<b>0</b>
3b	Non-itemized in-kind contributions	3b	<b>0</b>
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<b>0</b>
<b>Receipts from Other Sources</b>			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<b>0</b>
4b	Non-itemized Receipts from Other Sources	4b	<b>0</b>
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<b>0</b>
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a	<b>2250.00</b>
5b	Non-itemized expenditures	5b	<b>68.75</b>
5c	Total expenditures (add lines 5a and 5b)	5c	<b>2318.75</b>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<b>4930.41</b>

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.

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.

**Devon R. Roscha Ragland Pierce** **8/8/16**  
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this **8** day of **August** of the year **2016**. My commission expires the **2** day of **March** of the year **2019**.

**Debra Renee Dadds**  
Signature of Notary Public  
**Debra Renee Dadds**  
Print Notary's Name

