

Print Form

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY



20160819000300010 1/5 \$.00
Shelby Cnty Judge of Probate, AL
08/19/2016 03:32:39 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Jason DeLuca		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) Hoover City Council - Place 6			
Address <input type="checkbox"/> Check box if reporting new address 2612 Ornamental Lane			
City Hoover	State AL	ZIP Code 35226	Telephone Number [REDACTED]

Type of Report (check one)

☐ Monthly ☐ Amended Monthly
☒ Weekly ☐ Amended 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
Pages in Report

7/29/2016

5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	\$3,031.90
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$0.00	
2b	Non-itemized cash contributions	2b	\$50.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$50.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	\$0.00	
3b	Non-itemized in-kind contributions	3b	\$0.00	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$0.00	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	\$0.00	
4b	Non-itemized Receipts from Other Sources	4b	\$0.00	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$0.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	\$2,962.57	
5b	Non-itemized expenditures	5b	\$2.25	
5c	Total expenditures (add lines 5a and 5b)	5c	\$2,964.82	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	\$117.08	

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.

Signature of Candidate or Elected Official **[Signature]** Date **8/1/2016**

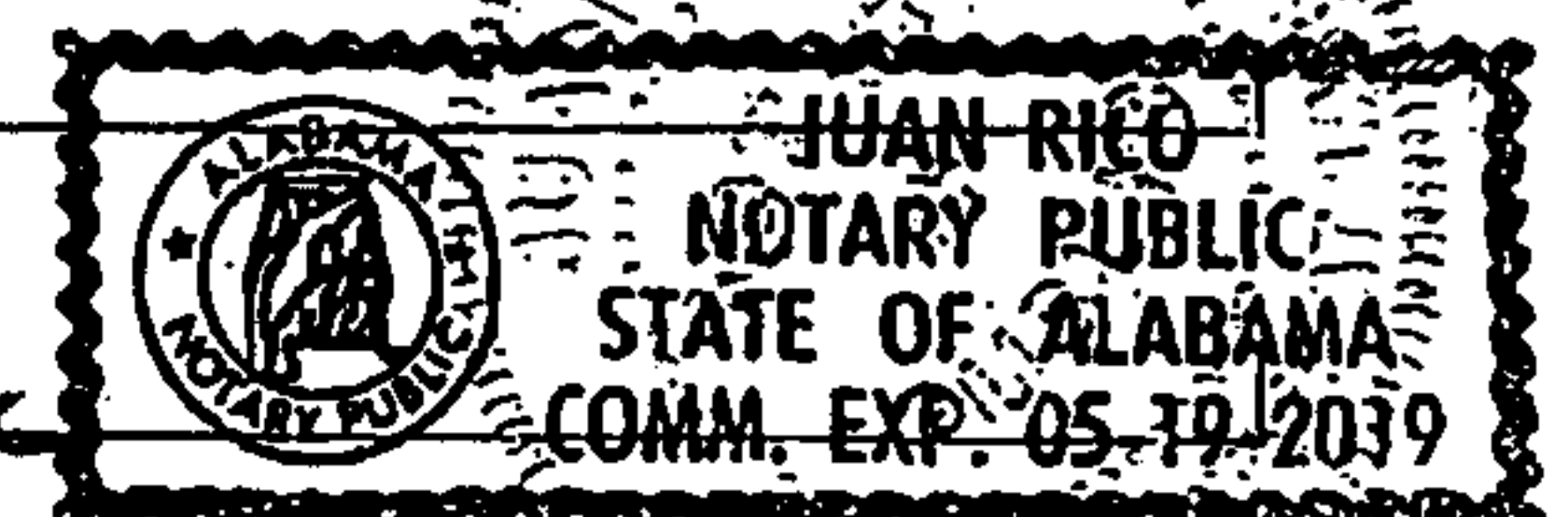
FORM REVISED 10.27.2011

Sworn to and subscribed before me this 1 day of

August of the year 2016. My commission expires
the 19 day of May of the year 2015.

Signature of Notary Public **[Signature]**

Print Notary's Name **Juan Rico**



NAME OF CANDIDATE OR ELECTED OFFICIAL: Jason DeLuca

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

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

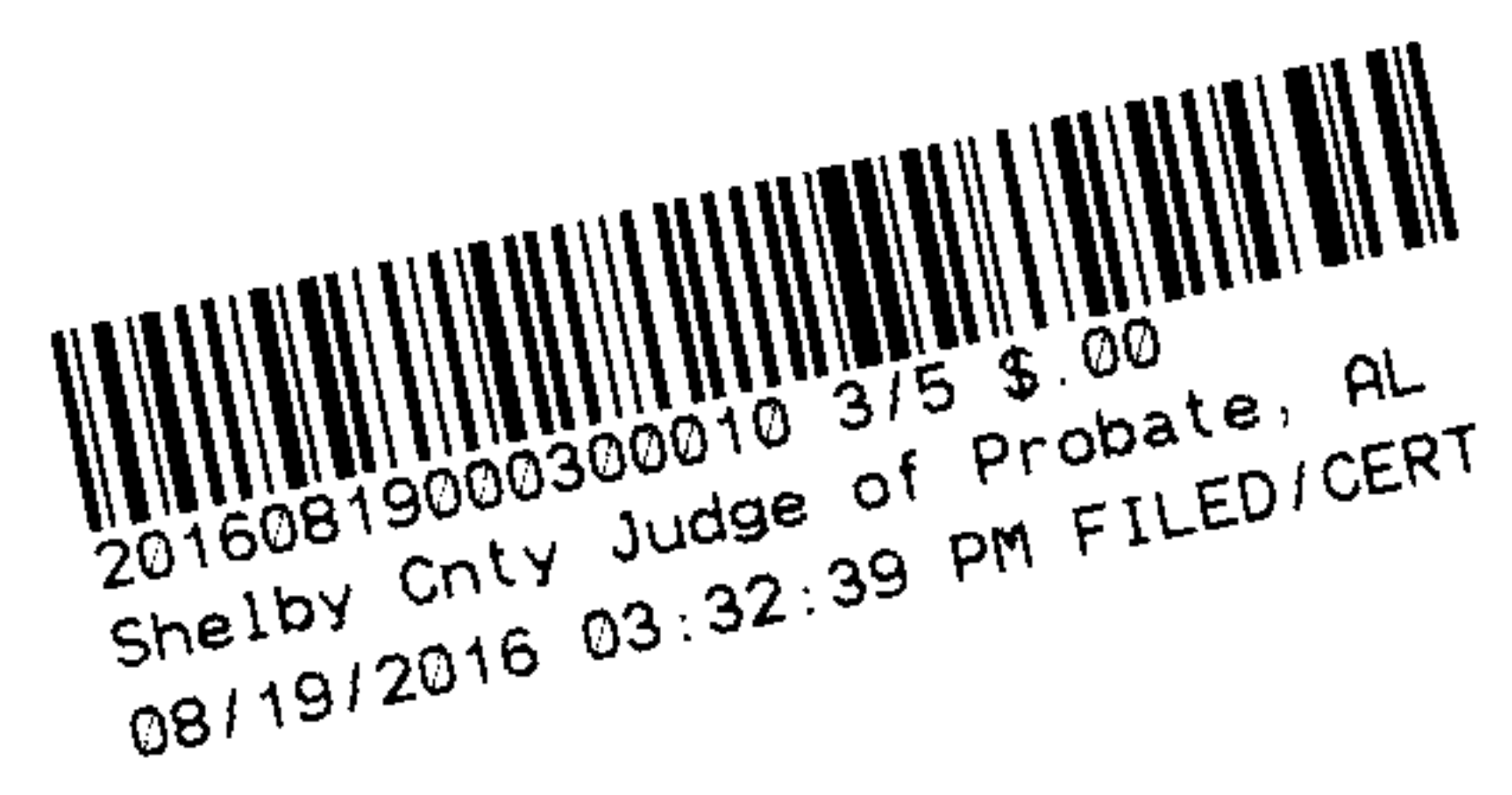
NAME OF CANDIDATE OR ELECTED OFFICIAL: Jason DeLuca



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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)										SOURCE (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other					
		TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																

FORM REVISED 10.27.2011

TOTAL IN-KIND CONTRIBUTIONS THIS PAGE

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

FORM 5: Expenditures by candidate or elected officialNAME OF CANDIDATE OR ELECTED OFFICIAL: Jason DeLuca

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

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)										DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
Red State Strategies	PO Box 43564 Birmingham, AL 35243		X									7/29/2016	\$271.40
me2Graphics, LLC	448 Sherwood Circle Calera, AL 35040		X									7/29/2016	\$2,515.17
me2Graphics, LLC	448 Sherwood Circle Calera, AL 35040		X									7/29/2016	\$115.00
Facebook	1601 Willow Road Menlo Park, CA 94025		X									7/31/2016	\$61.00
TOTAL EXPENDITURES THIS PAGE													\$2,962.57

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