County Division Code: AL040 Inst. # 2016083520 Pages: 1 of 3 I certify this instrument filed on: 8/15/2016 3:55 PM

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

Clerk: SKIPWITHH

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

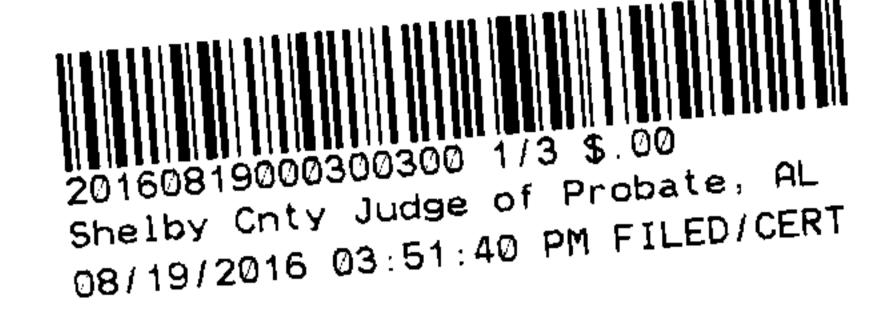
Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

197cl

Signature of Candidate of Elected Official

FORM REVISED 9.2.2011

THIS AREA FOR OFFICIAL USE ONLY



Please Print in Ink or Type. Type of Report (check one) Political Party/Ballot Affiliation Name of Candidate or Elected Official Amended Monthly Monthly Weekly Amended Weekly Office Sought or Held (include district or circuit number, if applicable) Mayor For Monthly Reports <u>eeds</u> Month in which the Address / Check box if reporting new address report is filed. For Weekly Reports Date of Friday in the Telephone Number ZIP Code City State week in which the spag report is filed. **Total Number of** Pages in Report Summary of activity since last filed report 4930.41 Beginning balance (ending balance from previous filing) **Cash Contributions** 650.00 Itemized cash contributions (total from Form 2) 100.00 Non-itemized cash contributions 750.00 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 Itemized Receipts from Other Sources (total from Form 4) 4a Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) Expenditures 400.31 Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) 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. Sworn to and subscribed before me this day of As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the ughst of the year 2016. . My commission expires attached report(s) and the information contained herein are J-MC of the year. 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 Notary Publicy

Print Notary's Name

20160819000300300 2/3 \$.00

Shelby Cnty Judge of Probate, AL 08/19/2016 03:51:40 PM FILED/CERT

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

FORM 5: Expenditures by candidate or elected official Ragiand Pierce



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 OF EXPENDITURE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) GIVE (mo./day/yr.) EXPENDITURE (INCLUDE FULL NAME) BRIEF **EXPLANATION** 8/9/16 76.95 8/11/16 50.00 8/13/16/200.67 Logans Full Moon 8/9/16 250 Green Springs Hwy 39.08 TOTAL EXPENDITURES THIS PAGE **FORM REVISED 9.2.2011**

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: Deloris Roscha Ragland-Pierce

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** (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) CONTRIBUTION OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION (moJday/yr.) Therapuetic Specialist P.O.BOX 504 Leeds, AL 35094 Edmund&Patricia Phillips 537 Forest Dr. Leeds, AL35094. 100.00 8/11/16 4537 Junn Ave Leeds AL35094 8/11/16 50.00 John F. Saddler Agencies 832 Green Springs Huy TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 9.2.2011

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