

Print Form

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20160822000301070 1/3 \$.00
Shelby Cnty Judge of Probate, AL
08/22/2016 09:17:22 AM FILED/CERT

Please Print in Ink or Type. PROBATE COURT	
Name of Candidate or Elected Official John Dover Henley	Political Party/Ballot Affiliation AUG 11 2016
Office Sought or Held (include district or circuit number, if applicable) Vestavia Hills City Council Place 1	ALAN L. KING Judge of Probate
Address <input type="checkbox"/> Check box if reporting new address 1823 Mission Road	E.O.D.
City Vestavia Hills, Alabama 35216	State Alabama
ZIP Code 35216	Telephone Number 205-913-1418

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

08/12/2016

3

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	\$1,095.60
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	\$200.00
2b	Non-itemized cash contributions	2b	\$100.00
2c	Total cash contributions (add lines 2a and 2b)	2c	\$300.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	
3b	Non-itemized in-kind contributions	3b	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	\$504.95
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	\$504.95
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	\$890.65

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.

John Dover Henley
Signature of Candidate or Elected Official
Date **8/12/16**

Sworn to and subscribed before me this **12th** day of **August** of the year **2016**. My commission expires the **1st** day of **May** of the year **2019**.

Deborah B. Cannon
Signature of Notary Public

Deborah B Cannon
Print Notary's Name

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: John Dover Henley

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
Anne Boston	2215 Ivy Trace; Birmingham, AL 35243		X				08/09/2016	\$100.00
Pat Goodman	1300 Anglewood Drive; Vestavia hills, AL 35216		X				08/08/2016	\$100.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								\$200.00

FORM REVISED 10.27.2011

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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: John Dover Henley



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		
Oxford Street Strategies, LLC	405 Oxford Street; Heflin, AL 36264	X										08/07/2016	\$500.00
Pay Pal											Pay Pal Charges	08/08/2016	\$4.95
TOTAL EXPENDITURES THIS PAGE													\$504.95

FORM REVISED 10.27.2011



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