

Print Form

THIS AREA FOR OFFICIAL USE ONLY

MONTHLY & WEEKLY

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**Candidate & Elected Official
Campaign Finance Report
SUMMARY FORM 1**20160822000301110 1/5 \$.00
Shelby Cnty Judge of Probate, AL
08/22/2016 09:17:26 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official ASHLEY CERRY		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) Mayor of Vestavia Hills			
Address <input type="checkbox"/> Check box if reporting new address 724 Donna Drive			
City Vestavia Hills	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

7/29/16**5****Summary of activity since last filed report**

1	Beginning balance (ending balance from previous filing)	1	5,414.85
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	—
2b	Non-itemized cash contributions	2b	400.00
2c	Total cash contributions (add lines 2a and 2b)	2c	400.00
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	370.03
5b	Non-itemized expenditures	5b	93.66
5c	Total expenditures (add lines 5a and 5b)	5c	463.69
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	5,351.16

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.

Ashley C. Cerry **7/29/16**
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this **29th** day of **July** of the year **2016**. My commission expires the **28th** day of **February** of the year **2020**.

Dani A. Berry
Signature of Notary Public

Tami A. Berry
Print Notary's Name

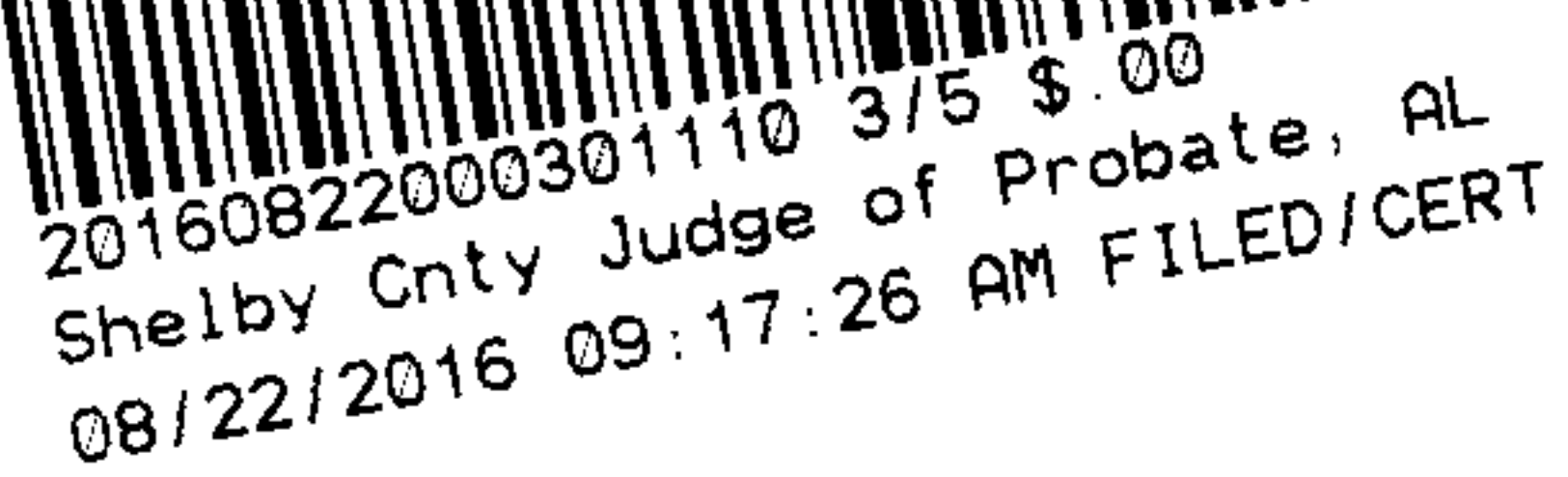


NAME OF CANDIDATE OR ELECTED OFFICIAL:

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.

[illegible]

20160822000301110 2/5 \$.00
Shelby Cnty Judge of Probate, AL
08/22/2016 09:17:26 AM FILED/CERT



20160822000301110 4/5 \$.00
Shelby Cnty Judge of Probate, AL
08/22/2016 09:17:26 AM FILED/CERT

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: _____

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		
Kwik Kopy			X									7/28/16	182.03
USPS		X									Stamps	7/29/16	188.00
TOTAL EXPENDITURES THIS PAGE													370.03

FORM REVISED 10.27.2011

20160822000301110 5/5 \$.00
Shelby Cnty Judge of Probate, AL
08/22/2016 09:17:26 AM FILED/CERT