FORM REVISED

My Commission Expires

October 28, 2019



Candidate & Elected Official Campaign Finance SUMMARY FORM 1 Campaign Finance Report

Shelby Cnty Judge of Probate, AL 08/24/2016 11:57:21 AM FILED/CERT

Please Print in Ink or Type. Type of Report (check one) Political Party/Ballot Affiliation Name of Candidate or Elected Official Amended Monthly Monthly N/A Mark McLaughlin Weekly Amended Weekly Office Sought or Held (include district or circuit number, if applicable) Mayor City of Westover For Monthly Reports Month in which the report is filed. 250 McLaughlin Lane For Weekly Reports Date of Friday in the ZIP Code Telephone Number State City week in which the 35147 AL Westover report is filed. **Total Number of** Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) **Cash Contributions** Itemized cash contributions (total from Form 2) Non-itemized cash contributions 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 3b 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 4b Total receipts from other sources (add lines 4a and 4b) 4C **Expenditures** Itemized expenditures (total from Form 5) 5a Non-itemized expenditures 5b Total expenditures (add lines 5a and 5b) 5c 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 dend 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 of the year 2016 My commission expires attached report(s) and the information contained herein are of the year 2017 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 Public-Signature of Candidate or Elected Official Print Notary's Name MARIE MALLORY

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FORM REVISED 20160824000306110 2/5 \$.00 Shelby Cnty Judge of Probate, AL 08/24/2016 11:57:21 AM FILED/CERT 10. 2011 DO NOT LIST in-kind contributions or loans on this form. ADDRESS SHOULD INCLUDE (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) TOTAL CASH CONTRIBUTIONS ယ and Business or 4 for those listings. 유 Corporation CONTRIBUTION (CHECK ONE) Individual PAC Other **THIS** Returned RECEIVED PAGE

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

FORM 3: In-Kind ontributions can ate 9 elected official

NAME OF CANDIDATE OR ELECTED

When total contributions from a single source exceed \$100.00, the F OFFICIAL: the FCPA re Use Fo 343 requires orms 2 and 4 for those listings. all contributions from that source to be itemized.

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