

MONTHLY & WEEKLY



STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED IN OFFICE
PROBATE COURT
AUG 22 2016
ALAN L. KING
Judge of Probate
E.O.D.

County Division Code: AL040
Inst. # 2016086238 Pages: 1 of 5
I certify this instrument filed on
8/22/2016 1:39 PM Doc: ELCAPRE
Alan L. King, Judge of Probate
Jefferson County, AL.

Clerk: SKIPWITHH

Please Print in Ink or Type.



20160830000313590 1/5 \$.00
Shelby Cnty Judge of Probate, AL
08/30/2016 10:12:55 AM FILED/CERT

Name of Candidate or Elected Official
Gary Ivey

Office Sought or Held (include district or circuit number, if applicable)
Mayor, City of Hoover

Address Check box if reporting new address
709 Crested Fern Ln.

City Hoover	State AL	ZIP Code 35244	Telephone Number 205-944-7519
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Report (check one)

- Monthly Amended Monthly
 Weekly Amended Weekly

For Monthly Reports
Month in which the report is filed.

[Empty box]

For Weekly Reports
Date of Friday in the week in which the report is filed.

08/19/2016

Total Number of Pages in Report

5

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		40,874.25
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	3,950.00	
2b	Non-itemized cash contributions	0.00	
2c	Total cash contributions (add lines 2a and 2b)		\$3,950.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	0.00	
3b	Non-itemized in-kind contributions	0.00	
3c	Total in-kind contributions (add lines 3a and 3b)	0.00	
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	0.00	
4b	Non-itemized Receipts from Other Sources	0.00	
4c	Total receipts from other sources (add lines 4a and 4b)		0.00
Expenditures			
5a	Itemized expenditures (total from Form 5)	38,343.07	
5b	Non-itemized expenditures	0.00	
5c	Total expenditures (add lines 5a and 5b)		38,343.07
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)		\$6,481.18

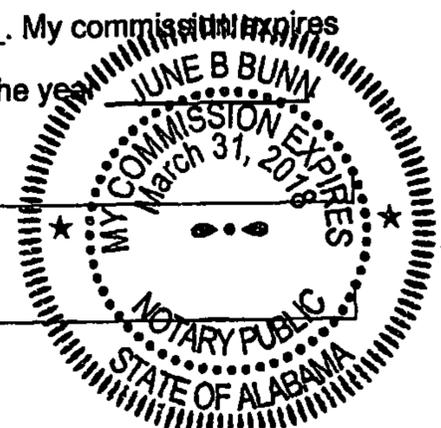
Candidates for State Office: File this report with the Office of the Secretary of State.
 Candidates for County or Municipal Office: File this report with the Judge of Probate of the county in which the office is sought.

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.

Sworn to and subscribed before me this 22 day of August of the year 2016. My commission expires the _____ day of _____ of the year _____.

Signature of Candidate or Elected Official: [Signature]
 Date: 8-22-16

Signature of Notary Public: [Signature]





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 Shelby Cnty Judge of Probate, AL
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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: Gary Ivey

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																	0.00	



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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: Gary Ivey

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		
Master Image	PO Box 59056 Birmingham, AL 35259		X									08/15/2016	2,062.00
Chip Burns	2514 Stag Run Cir. Hoover, AL 35226	X										08/15/2016	640.50
Strategic Impact	333 West Vine Street Lexington, KY 40509		X									08/16/2016	15,629.98
Strategic Impact	333 West Vine Street Lexington, KY 40509		X									08/16/2016	7,814.99
Third Wave Communications			X									08/16/2016	4,000.00
Strategic Impact	333 West Vine Street Lexington, KY 40509		X									08/17/2016	7,814.99
Master Image	PO Box 59056 Birmingham, AL 35259		X									08/18/2016	347.71
US Post Office	351 24th St. N. Birmingham, AL 35203										postage	08/19/2016	32.90
TOTAL EXPENDITURES THIS PAGE													\$38,343.07