

MONTHLY & WEEKLY

FAIR CAMP
STATE OF

Candidate

Campaign Finance Report

SUMMARY FORM 1

Clerk: SKIPWITHH

County Division Code: AL040
 Inst. # 2016088675 Pages: 1 of 5
 I certify this instrument filed on
 8/26/2016 11:58 AM Doc: ELCAPRE
 Alan L. King, Judge of Probate
 Jefferson County, AL.

Print Form

THIS AREA FOR OFFICIAL USE ONLY

 FILED IN OFFICE
 PROBATE COURT

AUG 26 2016

 ALAN L. KING
 Judge of Probate

E.O.D.

20160913000332760 1/5 \$.00
 Shelby Cnty Judge of Probate, AL
 09/13/2016 01:08:13 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Jason DeLuca		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) Hoover City Council - Place 6			
Address <input type="checkbox"/> Check box if reporting new address 2612 Ornamental Lane			
City Hoover	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.

8/26/2016

 Total Number of
 Pages in Report

5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	\$608.64
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	\$1,500.00
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$1,500.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	\$0.00
3b	Non-itemized in-kind contributions	3b	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$0.00
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	\$0.00
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$0.00
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	\$498.07
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	\$498.07
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	\$1,610.57

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.

Signature of Candidate or Elected Official

Date

8/26/16

FORM REVISED 10.27.2011



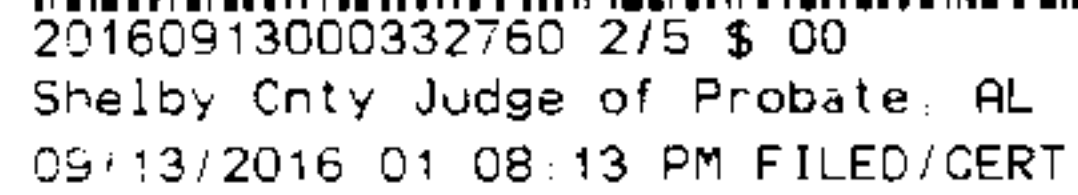
E. RACHEL CLARK
 My Commission Expires
 July 27, 2020

Sworn to and subscribed before me this 26th day of August of the year 2016. My commission expires the 27 day of July of the year 2020.

Signature of Notary Public

E. RACHEL CLARK

Print Notary's Name

**FORM 2: Contributions** received by candidate or elected official

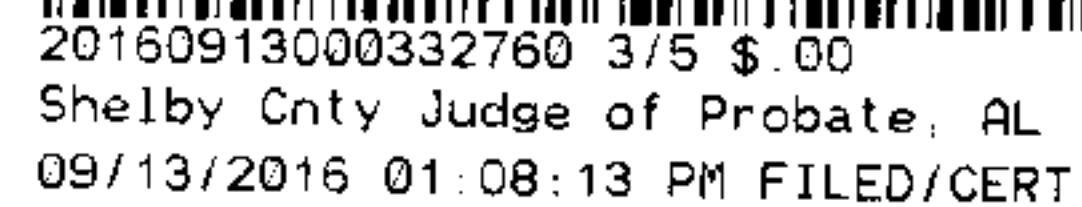
NAME OF CANDIDATE OR ELECTED OFFICIAL: Jason DeLuca



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		
Lance & Melissa Hyche	4029 Milner Way Hoover, AL 35242		X				8/22/2016	\$250.00
ABPAC	PO Box 241205 Montgomery, AL 36124			X			8/22/2016	\$1,000.00
Goodwyn Mills & Cawood PAC	2660 Eastchase Lane, Suite 200 Montgomery, AL 36117			X			8/22/2016	\$250.00
	TOTAL CASH CONTRIBUTIONS THIS PAGE							\$1,500.00

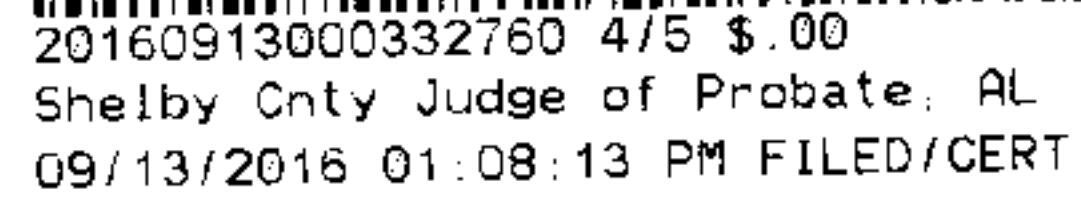
FORM REVISED 10.27.2011



NAME OF CANDIDATE OR ELECTED OFFICIAL: Jason DeLuca

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																

FORM REVISED 10.27.2011

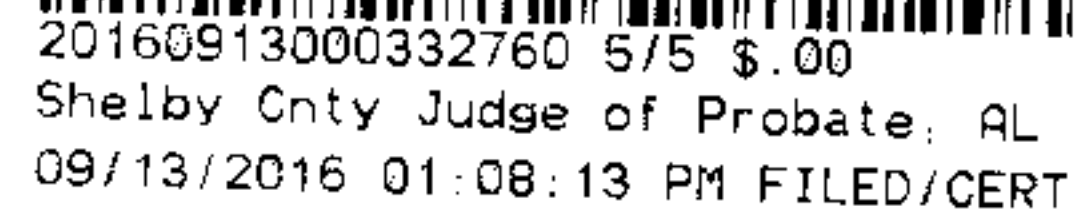


NAME OF CANDIDATE OR ELECTED OFFICIAL: Jason DeLuca

DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other		
TOTAL RECEIPTS THIS PAGE												

FORM REVISED 10.27.2011



NAME OF CANDIDATE OR ELECTED OFFICIAL: Jason DeLuca

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		
Facebook	1601 Willow Road Menlo Park, CA 94025		X									8/21/2016	\$250.06
Facebook	1601 Willow Road Menlo Park, CA 94025		X									8/25/2016	\$248.01
TOTAL EXPENDITURES THIS PAGE													\$498.07

FORM REVISED 10.27.2011