

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMACandidate & Elected Official
Campaign Finance Report
SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY

20161020000386490 1/2 \$.00
Shelby Cnty Judge of Probate, AL
10/20/2016 02:48:25 PM FILED/CERT

Please Print in Ink or Type

ALAN L. KING

Judge of Probate

E.O.D.

Type of Report (check one)

☐ Monthly☐ Amended Monthly☒ Weekly☐ Amended WeeklyFor 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

Name of Candidate or Elected Official <u>Trey D. Lott</u>			
Office Sought or Held (include district or circuit number, if applicable) <u>Hoover City Council Place 1</u>			
Address <input type="checkbox"/> Check box if reporting new address <u>2010 Patten Chapel Rd Ste 201</u>			
City <u>Hoover</u>	State <u>AL</u>	ZIP Code <u>35216</u>	Telephone Number <u></u>

10-7-162

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<u>4860.02</u>
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	<u>250.00</u>
2b	Non-itemized cash contributions	2b	<u>—</u>
2c	Total cash contributions (add lines 2a and 2b)	2c	<u>250.00</u>
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	<u>—</u>
3b	Non-itemized in-kind contributions	3b	<u>—</u>
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<u>—</u>
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<u>—</u>
4b	Non-itemized Receipts from Other Sources	4b	<u>—</u>
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<u>—</u>
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	<u>—</u>
5b	Non-itemized expenditures	5b	<u>—</u>
5c	Total expenditures (add lines 5a and 5b)	5c	<u>—</u>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<u>5110.02</u>

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.

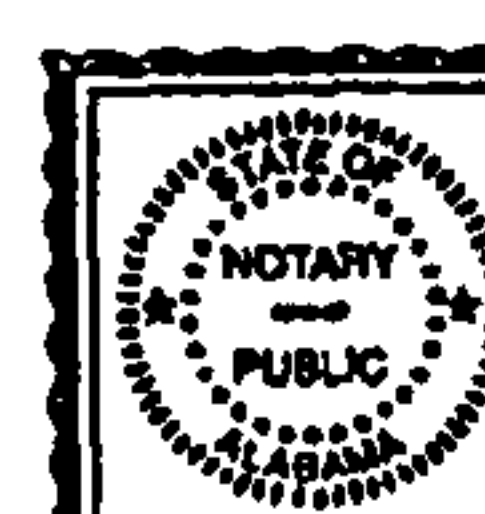
As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures, and other required information during the applicable period of time.

[Signature] 10-11-16
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this 11 day of October of the year 2016. My commission expires the 31 day of August of the year 2020.

[Signature]
Signature of Notary Public

Susan Cummings
Print Notary's Name

SUSAN D. CUMMINGS
My Commission Expires
August 31, 2020

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: _____

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			
ALABAMA DEVELOPMENT PAC	PO Box 130415 BHAM AL 35213			X				10-3-16	250.00
TOTAL CASH CONTRIBUTIONS THIS PAGE									250.00

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