Signature of Candidate or Elected Official

FORM REVISED 10.27.2011



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



Shelby Cnty Judge of Probate, AL 12/28/2016 09:07:13 AM FILED/CERT

Jessica L. Holland

Print Notary's Name

Please Print in Ink or Type. Type of Report (check one) Name of Candidate or Elected Official Political Party/Ballot Affiliation Amended Monthly Monthly Republican Lenny Glynn Weekly Office Sought or Held (include district or circuit number, if applicable) Mayor City of Pelham For Monthly Reports Month in which the report is filed. Post Office Box 689 For Weekly Reports Date of Friday in the Telephone Number ZIP Code City August 5, 2016 State week in which the 35124 Pelham AL report is filed. **Total Number of** Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) \$482.75 **Cash Contributions** Itemized cash contributions (total from Form 2) 2a \$1,700.00 Non-itemized cash contributions 2b \$40.00 Total cash contributions (add lines 2a and 2b) \$1,740.00 **In-Kind Contributions** 3a 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 4b Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) 4c **Expenditures** Itemized expenditures (total from Form 5) 5a \$243.60 Non-itemized expenditures \$83.51 **|5b** \$327.11 Total expenditures (add lines 5a and 5b) 5c \$1,895.64 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 As required by the Alabama Fair Campaign Practices Act, I hereby Sworn to and subscribed before me this _____ day of swear or affirm to the best of my knowledge and belief that the of the year 2014. My commission expires Dec attached report(s) and the information contained herein are the 22nd day of April of the year 2018 true and correct and that this information is a full and complete statement of all contributions, expenditures, and other required Dersica G. Houand information during the applicable period of time. Signature of Notary Public

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: Lenny Glynn

	tions from a single source exceed \$100.00, the FCPA requires all contributions or loans on this form. Use Forms 3 a						e to be itemized.	
CONTRIBUTOR (INCLUDE FULL NAME)		OI	FCO	OUR NTRI ECK (BUT			
	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation	Business or Corporation Individual		PAC Other		DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
Gregory & Priscilla Denny	1170 Stagg Run Tral, Indian Springs Village, AL 35124		×				08/01/2016	\$200.00
Gallant Lake LLC	120 Bishop Circle, Pelham, AL 35124	08/01/2016	\$1,000.00					
Isis and Son's Carpet and Oriental Rugs	2858 Highway 31 S, Pelham, AL 35124	×					08/01/2016	\$500.00
FORM REVISED 10.27.2011	REVISED 10.27.2011 TOTAL CASH CONTRIBUTIONS THIS PAGE							



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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: Lenny Glynn

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) ST	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)										RCE K ON			
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
None															
FORM REVISED 10.27.2011	TOTAL IN-KIND CONTRIBUTIONS THIS PAGE														



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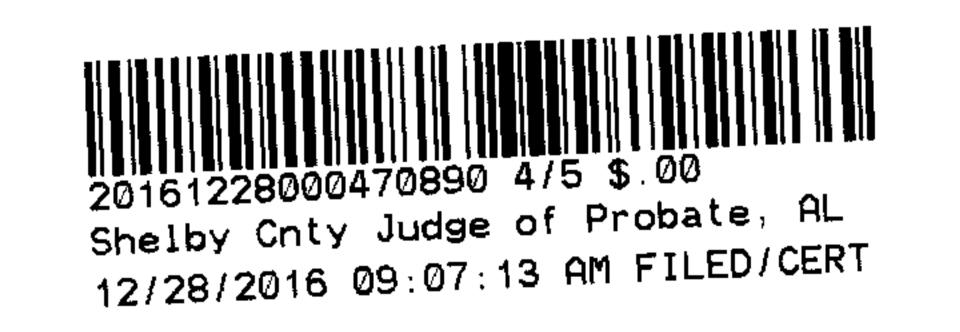
ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

FORM 4: Receipts from Other Sources loans, interest, and other sources of income



NAME OF CANDIDATE OR ELECTED OFFICIAL: Lenny Glynn

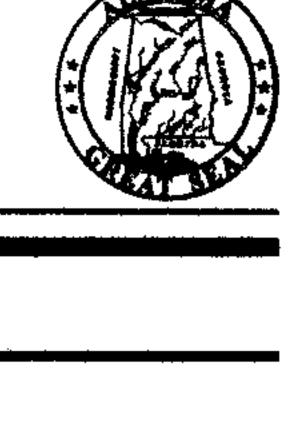
When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.												
COLLOCE OF BECEIOT	•	FORM		COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	RI	CEII (CHI	PT SC		Œ			
(INCLUDE FULL NAME) (ADDRESS STREE	S SHOULD INCLUDE ET OR P.O. BOX, STATE, AND ZIP)	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending Institution	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)		
None												
						:						
FORM REVISED 10.27.2011	TOTAL RECEIPTS THIS PAGE											



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: Lenny Glynn



When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized. **PURPOSE OF EXPENDITURE** (CHECK ONE) **ADDRESS** PERSON/GROUP/BUSINESS DATE OF **AMOUNT** OTHER (ADDRESS SHOULD INCLUDE OF EXPENDITURE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) **GIVE** (mo./day/yr.) **EXPENDITURE** (INCLUDE FULL NAME) BRIEF EXPLANATION City of Pelham Post Office Box 1419, Pelham, AL 35124 08/01/2016 \$200.00 Increase the Peace Steel City Signs, Inc \$43.60 2854 Pelham Pkwy, Pelham, AL 35124 08/01/2016 TOTAL EXPENDITURES THIS PAGE \$243.60 **FORM REVISED 10.27.2011**

