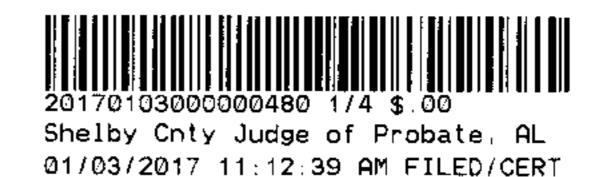


Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A



Please Print in Ink or Type. Name of Candidate or Elected Official Calendar Year Political Party/Ballot Affiliation covered by this report. 2016 Elizabeth K McMillan Office Sought or Held (include district or circuit number, if applicable) Amended Annual Report Pelham council Termination Report Address Check box if reporting new address Granville Lane Total Pages in Report Include this page in ZIP Code Telephone Number State City your count. Pelham 35124 AL SECTION I - Summary of activity from last filed report through December 31 of reporting year Beginning balance (ending balance from previous filing) 70,30 Cash Contributions 2a Itemized cash contributions (total from Form 2) ø 2a 2Ъ 2b Non-itemized cash contributions 2c Ø 2c Total cash contributions (add lines 2a and 2b) In-Kind Contributions 3a Itemized in-kind contributions (total from Form 3) 3a U 3b | Non-itemized in-kind contributions 3b 3c Total in-kind contributions (add lines 3a and 3b) 3с **Receipts from Other Sources** Total itemized receipts from other sources (total from Form 4) **4**a 4b 4b | Total non-itemized receipts from other sources Total itemized receipts from other sources (add lines 4a and 4b) 4c **Expenditures** Itemized expenditures (total from Form 5) 5a 70.30 5b 5b Non-itemized expenditures 70.30 5c | Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) SECTION II - Summary of activity for entire reporting year - January 1st through December 31st Beginning balance (as of January 1 of reporting year) Total cash contributions for year 9 Total in-kind contributions for year Total receipts from other sources for year Total expenditures for year 12 Ending balance (add lines 7, 8, & 10, then subtract line 11) 13 Total campaign debt (total debt owed as of December 31) Sworn to and subscribed before me this 30 day of Decoun Pot the 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 year 6016. My commission expires the 13 the information contained herein are true and correct and that this information the year <u>70</u>(9 is a full and complete statement of all contributions, expenditures, and other required information during the applicable period of time. Signature of Notary Public 12-30-2016

Date

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: Elizabeth & Manillan

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. **NATURE OF CONTRIBUTION** SOURCE (CHECK ONE) (CHECK ONE) **AMOUNT** CONTRIBUTOR **ADDRESS** DATE Administrative Transportation Consultants/ Polling Equipment Food (ADDRESS SHOULD INCLUDE OF (INCLUDE FULL NAME) CONTRIBUTION Individual STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION Other Other (mo./day/yr.) Rent **TOTAL IN-KIND CONTRIBUTIONS THIS PAGE** FORM REVISED 9.2.2011



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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: Elizabeth & MMILLAN

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. **COMPLETE THIS BLOCK IF RECEIPT FORM** RECEIPT SOURCE **IS A LOAN** OF RECEIPT (CHECK ONE) **ADDRESS SOURCE OF RECEIPT** DATE **AMOUNT** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE **GUARANTORS** RECEIVED OF STREET OR P.O. BOX, Individual Business Other Lending Institution (mo./day/yr.) RECEIPT CITY, STATE, AND ZIP) Interest [FCPA REQUIRES FULL NAME AND COM-Other Loan PLETE ADDRESS OF INDIVIDUAL(S) EN-PAC DORSING OR GUARANTEEING LOAN] **TOTAL RECEIPTS THIS PAGE** FORM REVISED 9.2.2011



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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: Elizabeth & McMillan



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) PERSON/GROUP/BUSINESS **ADDRESS** DATE OF **AMOUNT** Transportation Administrative OTHER (ADDRESS SHOULD INCLUDE Fundraising EXPENDITURE OF Contribution **RECEIVING EXPENDITURE** STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) GIVE **EXPENDITURE** Lodging (INCLUDE FULL NAME) BRIEF Food **EXPLANATION** Pelham Library Guild 12-30-16 70.30 **TOTAL EXPENDITURES THIS PAGE** FORM REVISED 9.2.2011

\$70.30

