

ANNUAL



FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

THIS AREA FOR OFFICIAL USE ONLY



20170210000051250 1/5 \$ .00  
Shelby Cnty Judge of Probate, AL  
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|                                                                           |                             |          |                  |
|---------------------------------------------------------------------------|-----------------------------|----------|------------------|
| Name of Candidate or Elected Official                                     | Political Party Affiliation |          |                  |
| Johnny Glenn Dutton                                                       | ALAN L. KING                |          |                  |
| Office Sought or Held (include district or circuit number, if applicable) | Judge of Probate            |          |                  |
| Leeds City Council - District 3                                           |                             |          |                  |
| Address <input type="checkbox"/> Check box if reporting new address       |                             |          |                  |
| 6444 Zeigler Road                                                         |                             |          |                  |
| City                                                                      | State                       | ZIP Code | Telephone Number |
| Leeds                                                                     | AL                          | 35094    |                  |

Calendar Year  
covered by this report.

2016

- ☐ Amended Annual Report  
☐ Termination Report

Total Pages in Report  
Include this page in  
your count.

5

## SECTION I - Summary of activity from last filed report through December 31 of reporting year

|                                    |                                                                  |    |   |          |
|------------------------------------|------------------------------------------------------------------|----|---|----------|
| 1                                  | Beginning balance (ending balance from previous filing)          |    | 1 | 1,276.00 |
| <b>Cash Contributions</b>          |                                                                  |    |   |          |
| 2a                                 | Itemized cash contributions (total from Form 2)                  | 2a |   |          |
| 2b                                 | Non-itemized cash contributions                                  | 2b |   |          |
| 2c                                 | Total cash contributions (add lines 2a and 2b)                   | 2c |   | 0        |
| <b>In-Kind Contributions</b>       |                                                                  |    |   |          |
| 3a                                 | Itemized in-kind contributions (total from Form 3)               | 3a |   |          |
| 3b                                 | Non-itemized in-kind contributions                               | 3b |   |          |
| 3c                                 | Total in-kind contributions (add lines 3a and 3b)                | 3c |   |          |
| <b>Receipts from Other Sources</b> |                                                                  |    |   |          |
| 4a                                 | Total itemized receipts from other sources (total from Form 4)   | 4a |   |          |
| 4b                                 | Total non-itemized receipts from other sources                   | 4b |   |          |
| 4c                                 | Total itemized receipts from other sources (add lines 4a and 4b) | 4c |   | 0        |
| <b>Expenditures</b>                |                                                                  |    |   |          |
| 5a                                 | Itemized expenditures (total from Form 5)                        | 5a |   | 9.40     |
| 5b                                 | Non-itemized expenditures                                        | 5b |   |          |
| 5c                                 | Total expenditures (add lines 5a and 5b)                         | 5c |   | 9.40     |
| 6                                  | Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)    | 6  |   | 1,266.60 |

## SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

|    |                                                              |    |  |          |
|----|--------------------------------------------------------------|----|--|----------|
| 7  | Beginning balance (as of January 1 of reporting year)        | 7  |  | 1,314.60 |
| 8  | Total cash contributions for year                            | 8  |  | 0        |
| 9  | Total in-kind contributions for year                         | 9  |  | 0        |
| 10 | Total receipts from other sources for year                   | 10 |  | 0        |
| 11 | Total expenditures for year                                  | 11 |  | 48.00    |
| 12 | Ending balance (add lines 7, 8, & 10, then subtract line 11) | 12 |  | 1,266.60 |
| 13 | Total campaign debt (total debt owed as of December 31)      | 13 |  |          |

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 31 day of December of the year 2016. My commission expires the 12 day of March of the year 2017.

Johnny Glenn Dutton  
Signature of Candidate or Elected Official

12-31-16  
Date

Oakley Whalley Luker  
Signature of Notary Public  
Oakley Whalley Luker  
Print Notary's Name

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: Johnny Glenn Dutton

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<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | SOURCE<br>OF CONTRIBUTION<br>(CHECK ONE) |            |     |       |          |  | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
|------------------------------------|---------------------------------------------------------------------------------|------------------------------------------|------------|-----|-------|----------|--|---------------------------------------------------|------------------------------|
|                                    |                                                                                 | Business or<br>Corporation               | Individual | PAC | Other | Returned |  |                                                   |                              |
| None                               |                                                                                 |                                          |            |     |       |          |  |                                                   |                              |
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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: JOHNNY GLENN DUTTON

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<br>(INCLUDE FULL NAME)    | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | NATURE OF CONTRIBUTION<br>(CHECK ONE) |             |              |           |      |      |                |       |           |             |            | SOURCE<br>(CHECK ONE) |       |  |  | DATE<br>CONTRIBUTION<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>CONTRIBUTION |
|---------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|--------------|-----------|------|------|----------------|-------|-----------|-------------|------------|-----------------------|-------|--|--|---------------------------------------------------|------------------------------|
|                                       |                                                                                 | Administrative                        | Advertising | Consultants/ | Equipment | Food | Rent | Transportation | Other | Business/ | Corporation | Individual | PAC                   | Other |  |  |                                                   |                              |
| NONE                                  |                                                                                 |                                       |             |              |           |      |      |                |       |           |             |            |                       |       |  |  |                                                   |                              |
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| TOTAL IN-KIND CONTRIBUTIONS THIS PAGE |                                                                                 |                                       |             |              |           |      |      |                |       |           |             |            |                       |       |  |  | 0                                                 |                              |

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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: Johnny Glenn Dutton

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.

| SOURCE OF RECEIPT<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX,<br>CITY, STATE, AND ZIP) | FORM<br>OF RECEIPT |      |       | COMPLETE THIS BLOCK IF RECEIPT<br>IS A LOAN<br><br>GUARANTORS<br><br>[FCPA REQUIRES FULL NAME AND COM-<br>PLETE ADDRESS OF INDIVIDUAL(S) EN-<br>DORSING OR GUARANTEEING LOAN] | RECEIPT SOURCE<br>(CHECK ONE) |     |            |          |       | DATE<br>RECEIVED<br>(mo./day/yr.) | AMOUNT<br>OF<br>RECEIPT |
|------------------------------------------|------------------------------------------------------------------------------------|--------------------|------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----|------------|----------|-------|-----------------------------------|-------------------------|
|                                          |                                                                                    | Interest           | Loan | Other |                                                                                                                                                                               | Lending<br>Institution        | PAC | Individual | Business | Other |                                   |                         |
| <u>NONE</u>                              |                                                                                    |                    |      |       |                                                                                                                                                                               |                               |     |            |          |       |                                   |                         |
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| TOTAL RECEIPTS THIS PAGE                 |                                                                                    |                    |      |       |                                                                                                                                                                               |                               |     |            |          |       |                                   | <u>0</u>                |

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## ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE &amp; ELECTED OFFICIAL

**FORM 5: Expenditures** by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

Johnny Glenn Dutton

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

| PERSON/GROUP/BUSINESS<br>RECEIVING EXPENDITURE<br>(INCLUDE FULL NAME) | ADDRESS<br>(ADDRESS SHOULD INCLUDE<br>STREET OR P.O. BOX, CITY, STATE, AND ZIP) | PURPOSE OF EXPENDITURE<br>(CHECK ONE) |             |                         |              |      |             |                   |         |                |                                       |         | DATE OF<br>EXPENDITURE<br>(mo./day/yr.) | AMOUNT<br>OF<br>EXPENDITURE |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|-------------|-------------------------|--------------|------|-------------|-------------------|---------|----------------|---------------------------------------|---------|-----------------------------------------|-----------------------------|
|                                                                       |                                                                                 | Administrative                        | Advertising | Consultants/<br>Polling | Contribution | Food | Fundraising | Loan<br>Repayment | Lodging | Transportation | OTHER<br>GIVE<br>BRIEF<br>EXPLANATION |         |                                         |                             |
| U.S. Post Office                                                      | 1500 8 <sup>th</sup> Street<br>Leeds, AL 35094                                  | X                                     |             |                         |              |      |             |                   |         |                | Postage                               | 9-19-16 | \$ 9.40                                 |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
|                                                                       |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         |                                         |                             |
| TOTAL EXPENDITURES THIS PAGE                                          |                                                                                 |                                       |             |                         |              |      |             |                   |         |                |                                       |         | \$ 9.40                                 |                             |

FORM REVISED 9.2.2011



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 Shelby Cnty Judge of Probate, AL  
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