County Division Code: AL040 Inst. # 2017002199 Pages: 1 of 5 I certify this instrument filed on: 1/9/2017 7:15 PM

'Doc: ELANN Alan L.King, Judge of Probate Jefferson County, AL

Clerk: LYNN

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FAIR CAMPAIGN PRACTICES ACT	THIS AREA FOR OFFICIAL USE ONLY						
Candidate & Elected O	fficial						
Campaign Finance Repo	ort		000051250 1/5 \$.00 hty Judge of Probate				
SUMMARY FORM 1A FILED PROBA	IN OFFICE TE COURT	02/10/20	17 01:42:16 PM FILED				
Please Print in Ink or Type. Name of Candidate or Elected Official Political Political	r Pallo Parfiliation	Çalendar Year					
Tolong (Floors) Dietton	2011	covered by this repor	2016				
Office Sought or Held (include district or circuit number, if applicable) Judge	L KING Probate	ــنے					
1 pods lite landil-DEDiate	3		Amended Annual Rep				
Address Check box if reporting new address			Termination Report				
6444 Zeigler RoAd		Total Pages in Repo	rt				
City State ZIP Code Telephone	Number	Include this page in your count.	5				
Leeds AL 35094	سدون پرستسم	your cours,					
7770 <u>7770</u>							
SECTION I - Summary of activity from last filed report	rt through De	cember 31 of rep					
Beginning balance (ending balance from previous filing)			1,276.00				
Cash Contributions	<u> </u>						
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	<u> </u>				
In-Kind Contributions	-		χ_{i} :				
3a Itemized in-kind contributions (total from Form 3)	3a		-				
3b Non-itemized in-kind contributions 3c Total in-kind contributions (add lines 3a and 3b)	30 3c						
Receipts from Other Sources		·					
4a Total itemized receipts from other sources (total from Form 4)	4a						
4b Total non-itemized receipts from other sources	45						
4c Total itemized receipts from other sources (add lines 4a and 4b)		4c	<u>/</u>)				
Expenditures		<u> </u>					
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 - Janua	ry 1st through De					
7 Beginning balance (as of January 1 of reporting year)		7					
8 Total cash contributions for year		8	0				
9 Total in-kind contributions for year	9						
10 Total receipts from other sources for year		10					
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						
affirm to the best of my knowledge and belief that the attached report(s) and			day of December to the 12_ day of March				
Johns 12-31-16	ignature of Notary Publication of Notary Publications of Notary Publ	1 1 than Ida					

FORM REVISED 9.2.2011

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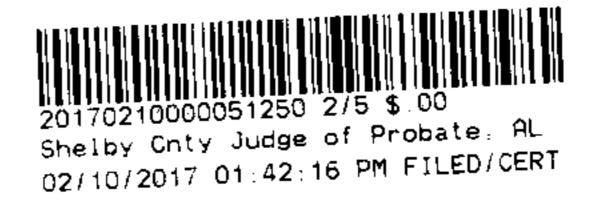
FORM REVISED 9.2.2011

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-GIENN

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. SOURCE OF CONTRIBUTION (CHECK ONE) CONTRIBUTOR **ADDRESS** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION Returned STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION Other (mo./day/yr.) PAC TOTAL CASH CONTRIBUTIONS THIS PAGE



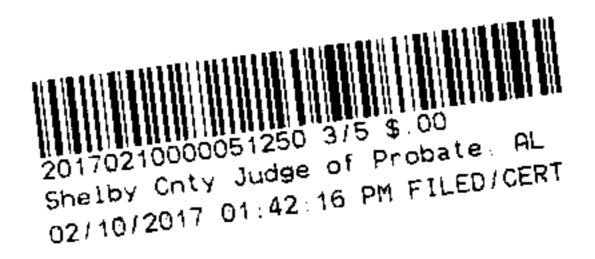
ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

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 iterrized.

·····	DO NOT LIST cash or loans on this	s for	m. L	lse F	om	s 2 a	and 4	for	thos	e list	tings	i.	***	 	
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)					
		Administrative	Advertising	Consultants/,	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
None					_		<u> </u>		_				_		
								_	Ì						
		_													
									,						
FORM REVISED 9.2.2011	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. COMPLETE THIS BLOCK IF RECEIPT FORM RECEIPT SOURCE IS A LOAN OF RECEIPT (CHECK ONE) DATE **AMOUNT ADDRESS** SOURCE OF RECEIPT **GUARANTORS** RECEIVED OF (AODRESS SHOULD INCLUDE (INCLUDE FULL NAME) Lending Institution PAC Individua Business Other STREET OR P.O. BOX, (mo./day/yr.) RECEIPT [FCPA REQUIRES FULL NAME AND COM-Interest CITY, STATE, AND ZIP) Other Load PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] NONE 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 Johnny Glenn Dutton NAME OF CANDIDATE OR ELECTED OFFICIAL: 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) **AMOUNT** DATE OF **ADDRESS** PERSON/GROUP/BUSINESS Administrative
Advertising
Contribution
Contribution
Food
Food
Loan
Repsyment
Loan
Repsyment
Lodging OTHER OF EXPENDITURE (ADDRESS SHOULD INCLUDE RECEIVING EXPENDITURE (mo./day/yr.) **EXPENDITURE** STREET OR P.O. BOX, CITY, STATE, AND ZIP) GIVE (INCLUDE FULL NAME) BRIEF EXPLANATION Postage 9-19-16 \$ 9.40 U.S. Post Office 1500 8th Street

Leeds, AL 35094



TOTAL EXPENDITURES THIS PAGE

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