

Print Form

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MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20170405000114580 1/2 \$ .00  
Shelby Cnty Judge of Probate, AL  
04/05/2017 08:06:31 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official <u>Lorrie Franklin Malone</u>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <u>Birmingham City Council District 7</u>			
Address <input type="checkbox"/> Check box if reporting new address <u>P.O. Box 110294</u>			
City <u>Birmingham</u>	State <u>AL</u>	ZIP Code <u>35211</u>	Telephone Number

Type of Report (check one)

- ☐ Monthly ☒ Amended Monthly  
☐ Weekly ☐ Amended Weekly

For Monthly Reports  
Month in which the report is filed.

September

For Weekly Reports  
Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

8

## Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<u>0</u>
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a	<u>440.00</u>
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	<u>440.00</u>
<b>In-Kind Contributions</b>			
3a	Itemized in-kind contributions (total from Form 3)	3a	<u>43.00</u>
3b	Non-itemized in-kind contributions	3b	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<u>43.00</u>
<b>Receipts from Other Sources</b>			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<u>3326.00</u>
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<u>3326.00</u>
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a	<u>3326.00</u>
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	<u>3326.00</u>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<u>483.00</u>

Candidates for State Office:

Candidates for County or Municipal Office:

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.

Lorrie F. Malone  
Signature of Candidate or Elected Official

Date

Sworn to and subscribed before me this 1st day of Nov of the year 2016. My commission expires the 23rd day of May of the year 2020.

Charney Nashawn Peake  
Signature of Notary Public

Charney Nashawn Peake  
Print Notary's Name

## 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: \_\_\_\_\_

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 (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN  GUARANTORS  (FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN)	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other		
Lonnie Malone	P.O. Box 11294 Bham AL 35211		<input checked="" type="checkbox"/>		Lonnie Franklin Malone 275 Oxford Way Bham AL 35211			<input checked="" type="checkbox"/>			9/25/16	\$326.00
TOTAL RECEIPTS THIS PAGE												

FORM REVISED 10.27.2011



20170405000114580 2/2 \$.00  
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