County Division Code: AL040 Inst. # 2017033817 Pages: 1 of 2 | Leertify this instrument filed on: 4/5/2017 1:11 PM Doc: ELCAPRE Alan L.King, Judge of Probate Jefferson County, AL Clerk: SSCOGGINS Shelby Cnty Judge of Probate, AL 04/17/2017 11:44:33 AM FILED/CERT THES AREA FOR OFFICIAL USE ONLY FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA Candidate & Electell JESSICA MCALPINE Campaign Finance Report NOTARY PUBLIC STATE OF ALABAMA **SUMMARY FORM 1** MY COMMISSION EXPIRES 02/17/2021 Please Print In Ink or Type. Type of Report (check one) Name of Candidate or Elected Official Political Party/Ballot Affiliation Monthly Amended Monthly oderick KoyA DemocraT Weekly Amended Weekly Office Sought or Held (include district or circuit number, if applicable) Counc For Monthly Reports DIST. Month in which the Check box if reporting new address report is filed. P.O. Box 310902 For Weekly Reports Date of Friday in the ZIP Code Telephone Number State week in which the 35231 13h AM ΑJ report is filed. **Total Number of** Pages In Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) **Cash Contributions** Itemized cash contributions (total from Form 2) 2100.00 99.00 Non-itemized cash contributions 2199.00 Total cash contributions (add lines 2a and 2b) **In-Kind Contributions** Itemized in-kind contributions (total from Form 3) Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) 4a Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) **Expenditures** Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) 2199.00 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. Sworn to and subscribed before me this As required by the Alabama Fair Campaign Practices Act, I hereby of the year 2017 swear or affirm to the best of my knowledge and belief that the April My commission expires attached report(s) and the information contained herein are of the year 202 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. Signature of Notary Public Signature of Candidate or Elected Official Print Notary's Name FORM REVISED 9.2.2011



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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: \_\_ 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 -DATE **AMOUNT** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE OF CONTRIBUTION Individual STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED (mo./day/yr.) 2100 PICHARD ARRINGTON BIUD 03/24/17 J. MCLANE 2100.00 TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 9.2.2011