Courty Division Code: AL040 Inst. # 2017033488 Pages: 1 of 3 I certify this instrument filed on: 4/4/2017 2:55 PM

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

Clerk: NICOLE

Print Form

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FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report

THIS AREA FOR OFFICIAL USE ONLY



Shelby Cnty Judge of Probate, AL 04/17/2017 11:50:40 AM FILED/CERT

Σ	SUMMARY FORM 1			04/17/2017	11:5	0:40 AM FILED/CERT
	Please Print in Ink or Type.					
L	Political Party Anie Frankin Malone Sought or Held (Include district or circuit number, if applicable)	/Ballot	Affiliation	Type of Report Monti	hly	k one) Amended Monthly Amended Weekty
P	RMINGHAM City Council District			For Monthly Re Month In which t report is filed.	-	March
<u>'</u> -{	10294		<u></u>	For Weekly Rep Date of Friday in	•	
City))) () () () () () () () () (umper		week in which the report is filed.		
<u>.</u>	Sirmingham, HL 35211			Total Number of Pages In Repor		3
S	ummary of activity since last filed report					
1	Beginning balance (ending balance from previous filing)	_			1	551.45
-	Cash Contributions				,	
2a	Itemized cash contributions (total from Form 2)	2a	218.9	ک		
2b	Non-itemized cash contributions	2b		- " - "	. <u>-</u>	
2¢	Total cash contributions (add lines 2a and 2b)		-		2c	218.92
	In-Kind Contributions			•		
За	Itemized in-kind contributions (total from Form 3)	3a	X			
3b	Non-itemized in-kind contributions	3b				
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<u> </u>		•	
	Receipts from Other Sources		. –	· · · · · · · · · · · · · · · · · · ·		
4a	Itemized Receipts from Other Sources (total from Form 4) 4a	K			
4b		4b	\ \ \			
	Total receipts from other sources (add lines 4a and 4b)				4c	B
	Expenditures	7				150
5a	Itemized expenditures (total from Form 5)	5a	3.01.0	·		
5b		5b	- 2386-2			
5c					5c	201.08
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c	<u>)</u>			6	569.29
	ndidates for State Office: Tille this report with the Office of the Sindidates for County or Municipal Office: File this report with t				v in v	
				ibed before me		44h day of
		t-pR		A . I		
	and correct and that this information is a full and complete	1 PIC	agy of the			My commission expires
	and correct and that this information is a full and complete the ement of all contributions, expenditures, and other required)(C	بري، ع ووب ر	of May	_ of	the year <u>2020</u> .
	mation during the applicable period of time.	城	Lange	Mash	N.	Deake.
	emet! 1/2 1/4/17 &	melure	of Notary Pub	lic	<u>~ ~</u>	
Sigr	alture of Candidate or Elected Official Date		CO NO	NaThAO		Peake
			WE HOW	1000		1-00

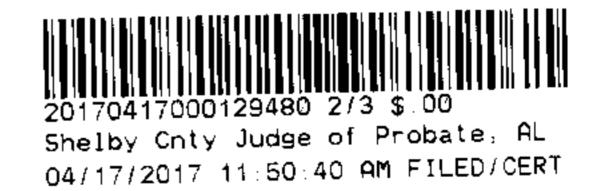
County Division Code: AL040 Inst. # 2017033488 Pages: 2 of 3

NAME OF CANDIDATE OR ELECTED OFFICIAL:

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

FORM 2: Contributions received by 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 AMOUNT** DATE (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) CONTRIBUTION OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED Busines Corpora Individu (mo./day/yr.) 218.92 TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011

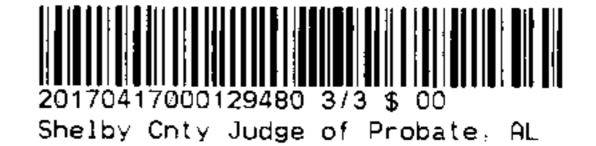


ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

	ADDRESS SUCH DINCHIOS	PURPOSE OF EXPENDITURE (CHECK ONE)											
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)		Administrative	Advertising	Consultants/	Charitable Contribution	Food	Fundraising	Loan Repsyment	Lodging	Transportation	GIVE	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
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TOTAL EXPENDITURES THIS PAGE									PAGE	201.08			



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