County Division Code: AL040 Inst. # 2017043957 Pages: 1 of 5 I certify this instrument filed on: 5/3/2017 10:45 AM

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

Clerk: SKIPWITHH

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FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Print Form.

THIS AREA FOR OFFICIAL USE ONLY

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



Shelby Cnty Judge of Probate, AL 06/01/2017 09:01:06 AM FILED/CERT

Please Print in link or Type.	,		
	Party/Ballot Affiliation	Type of Report (check   Wonthly	one)    The contract of the co
Hosea Eric Lewis		Weekly	Amended Weekly
Office Sought or Held (include district or circuit number, if applicable)	rmingham	For Monthly Reports	
Address Check box if reporting new address		Month in which the	May
4612 Hillman Drive Birminghar	· ~~	report is filed.	
	e Number	For Weekly Reports Date of Friday in the	*
Birmingham, State ZIP Code Telephon		week in which the report is filed.	
	•	Total Number of	
	-¢	Pages in Report	4
Summary of activity since last filed report			
1 Beginning balance (ending balance from previous filin	<b>g)</b>	1	
Cash Contributions			•
2a Itemized cash contributions (total from Form 2)	2a 62	21.90	
2b Non-itemized cash contributions	2b	Ø .	
2c Total cash contributions (add lines 2a and 2b)	*	2c	621.90
In-Kind Contributions			
3a Itemized in-kind contributions (total from Form 3)	3a 40	0.00	
3b Non-itemized in-kind contributions	3b		
3c Total in-kind contributions (add lines 3a and 3b)	3c 400	.00	*
Receipts from Other Sources	1		• •
4a Itemized Receipts from Other Sources (total from Forr	n 4) 4a	8	-
4b Non-itemized Receipts from Other Sources	4b	Ø	
4c Total receipts from other sources (add lines 4a and 4b	o)	4c	
Expenditures	*		•
5a Itemized expenditures (total from Form 5)	5a 62/	1.90	•
5b Non-itemized expenditures	5b	<u>5</u>	
5c Total expenditures (add lines 5a and 5b)		5c	621.90
6 Ending balance (add lines 1, 2c, & 4c, then subtract line	e 5c)	6	· Ø
Candidates for State Office: File this report with the Office of ti	ne Secretary of Sta	Tito:	
Candidates for County or Municipal Office: File this report wi			hich the office is sought
As required by the Alabama Fair Campaign Practices Act, I hereby	Sworn to and subs	scribed before me this _	3-d day of
swear or affirm to the best of my knowledge and belief that the	May of	the year <u>2017</u>	. My commission expires
attached report(s) and the information contained herein are true and correct and that this information is a full and complete	ing Sth		ie year ANNVOV
statement of all contributions, expenditures, and other required	u 16 Ua		
information during the applicable period of time.		nacesha	Dist. and
[May 5] [5/3/12]	Signature of Notary F	Public	まら ろうは
Signature of Candidate or Elected Official Date	1	acu C'Sha	の言語
	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: HOSEQ Lewis

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.											
7		OI	CO	OUR NTRI ECK	BUTI			AMOUNT OF CONTRIBUTION			
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business of Corporation	Individual	PAC	Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)				
Hosea + Grystat Cu Lewis	4612 Hillman Dr. BhamAL						4/17/17	\$100,00			
Crustal Lewis	4612 Hillman Dr. Bham AL35221						4/17/17	\$ 96.90			
	4612 Hillman Dr Bham AL 35221						4/1/17	\$ 150.00			
Hosea + Crystal	4612 Hillman Dr. Bham AL 35221						2/17/17	\$ 275.00			
							4				
							-				
						k	-				
FORM REVISED 10.27.2011	TOTAL CASH CON	TR	BU	TIC	)NS	Th	IIS PAGE	621.90			



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

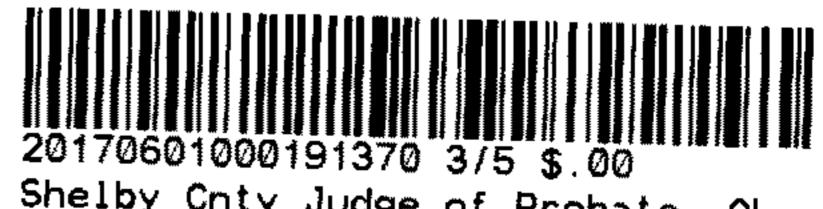
## FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Hosea Lewis



	DO NOT LIST cash or loans on this	fon	m. L	se F	om	<b>\$</b> 2 &	and 4	4 for	thos	e lis	tings	<b>}.</b>			
CONTRIBUTOR (INCLUDE FULL NAME)			NAT	URE (		CONTI		TION		•	<b>SOU</b> CHEC			•	•
	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)					Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION		
Crystal Lewis	4612 Hillman Or Bham Al 35221	/					*			•				4/1/17-4/30/17	\$ 400.00
															•
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•						, ·								• •	
•			7					*							
	,														-
														•	
FORM REVISED 10.27.2011		· T(	) T/	\L I	N-K	INI	) C	ON	TRI	BU'	ΤΙΟ	NS	TH	IS PAGE	\$ 400.00

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.



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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:

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.

		FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	R	ECEI (CH	PT 80 ECK (			DATE	AMOUNT
(INCLUDE FULL NAME) (ADDRESS STREET	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Interest Loan Other			GUARANTORS  [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN)	Lending	PAC	Individual	dividu usine		RECEIVED (mo./day/yr.)	OF RECEIPT
					•							
												4
											•	
++												
			4									
						,						
FORM REVISED 10.27.2011	TOTAL RECEIPTS THIS PAGE											



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### 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: HOSEA Lewis



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) DATE OF AMOUNT **ADDRESS** PERSON/GROUP/BUSINESS OTHER (ADDRESS SHOULD INCLUDE EXPENDITURE OF RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) EXPENDITURE (mo./day/yr.) GIVE -(INCLUDE FULL NAME) BRIEF **EXPLANATION** 1510 4th Ave North Bessemer Ac 35020 SNG Signs INC Ajani Ink Multimedia 3435 Breckensidge Blvd.
Marketing Services Ste #120 Rm#7 Dulvth GA
Pearlie Jenkins 26 George Williams Rd
"Image is kvery thing" Phenix City AL 36869 275.00 150,00 TOTAL EXPENDITURES THIS PAGE **FORM REVISED 10.27.2011** 



20170601000191370 5/5 \$.00 Shelby Cnty Judge of Probate, AL 06/01/2017 09:01:06 AM FILED/CERT