County Division Code: AL040 Inst. # 2017055958 Pages: 1 of 4 I certify this instrument filed on: 6/2/2017 3:07 PM

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

Clerk: SKIPWITHH

Print Form

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

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

FILED IN OFFICE

THIS AREA FOR OFFICIAL USE ONLY

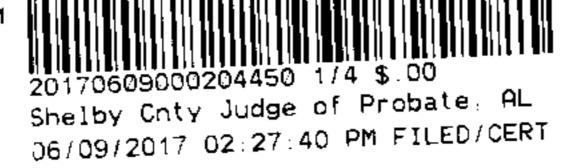
PROBATE COURT

JUN 0 2 2017

Judge of Probate

E.O.D.

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	Please Print in Ink or Type.			·			
L	Political Party/	Ballot /	Affiliation	Type of Report Mont	hly	k one) Amended N Amended V	
Office Sought or Held (Include district or circuit number, If applicable) Bir Mina Many Garage Company District of Circuit number, If applicable) Address Checkbox if reporting new address			For Monthly R Month in which report is filed.			May	
_	35211 35211	mber		For Weekly Re Date of Friday i week in which t report is filed. Total Number Pages in Repo	n the he of	4	
S	ummary of activity since last filed report					·	
1	Beginning balance (ending balance from previous filing)				1	31 9. 29	
	Cash Contributions	·	· · ·				
2a	Itemized cash contributions (total from Form 2)	2a	50.	o 9			40.00
2b	Non-itemized cash contributions	2b			<u> </u>		
2c	Total cash contributions (add lines 2a and 2b)	}	•		2c	50.	
	In-Kind Contributions]		•		- '.	,
За	Itemized in-kind contributions (total from Form 3)	3a					
3b	Non-itemized in-kind contributions	3b		· · · · · · · · · · · · · · · · · · ·		•	
3c	Total in-kind contributions (add lines 3a and 3b)	3c				•	·
	Receipts from Other Sources	\Box			,	,	
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	520	<i>D</i> D]	. •	
$ldsymbol{eta}$	Non-itemized Receipts from Other Sources	4b				•	
4c		 			4c	630 JE	
	Expenditures	1		• •			
5а	Itemized expenditures (total from Form 5)	5a	520	\(\) \(\)]		
5b		5b		<u>`</u>	1		
5c	Total expenditures (add lines 5a and 5b)		· · · · · · · · · · · · · · · · · · ·		5c	320°	,
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)				6	769,29	
	ndidates for State Office: File this report with the Office of the Sendidates for County or Municipal Office: File this report with the	ecret			ty in w		s sought
swe atta true stat info	ar or affirm to the best of my knowledge and belief that the ched report(s) and the information contained herein are and correct and that this information is a full and complete ement of all contributions, expenditures, and other required rimation during the applicable period of time.	7	of the day of the of Notary Put	of April unil	17	. My commission he year	_
FOR	u REVISED 10.27.201 Prin	t Nota	ıry's Name				

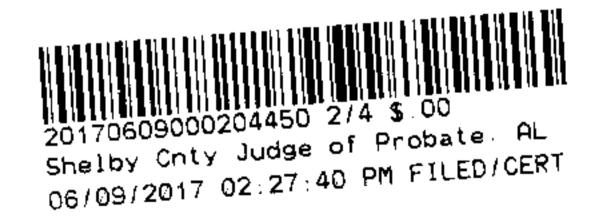


ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: LONNIE. | LONNIE.

	DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 at	nd 4 fo	or the	ose	isting	J S.		-		
CONTRIBUTOR	400000	OF	SOURCE OF CONTRIBUTION (CHECK ONE)					AMOUNT OF CONTRIBUTION		
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)		Corporation Individual PAC		Other		DATE CONTRIBUTION RECEIVED (mo./day/yr.)			
George Smith	225 Kingston Circle Bham, AL35211		1				5/26/17	50,00		
					_			<u> </u>		
·										
<u></u>										
								, 		
	·						<u></u>			
·										
, FORM REVISED 10.27.2011	TOTAL CASH CONTRIBUTIONS THIS PAGE									



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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: NAME OF 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 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) **AMOUNT SOURCE OF RECEIPT** ADDRESS DATE (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) **GUARANTORS** RECEIVED STREET OR P.O. BOX, Lending Institution PAC Individual Business (mo./day/yr.) RECEIPT Interest Loan Other FCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) PLETE ADDRESS OF INDIVIDUAL(S) EN-Bham AL35211 Lannie Malone TOTAL RECEIPTS THIS PAGE FORM REVISED 10.27.2011



Shelby Cnty Judge of Probate, AL 06/09/2017 02:27:40 PM FILED/CERT

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: DYNIE MAIDINE



PURPOSE OF EXPENDITURE (CHECK ONE) PERSON/GROUP/BUSINESS **ADDRESS AMOUNT** DATE OF OTHER (ADDRESS SHOULD INCLUDE EXPENDITURE **OF** RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) GIVE (mo./day/yr.) **EXPENDITURE** (INCLUDE FULL NAME) **BRIEF** \$ \$ 88 58 E E E E E The Sign Geoks 450 Tarrant Rd AL, 35071 TOTAL EXPENDITURES THIS PAGE FORM REVISED 10.27.2011

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

20170609000204450 4/4 \$.00 20170609000204450 4/4 \$.00 Shelby Cnty Judge of Probate. AL 06/09/2017 02:27:40 PM FILED/CERT