County Division Code: AL040 Inst. # 2017055769 Pages: 1 of 5 I certify this instrument filed on: 6/2/2017 11:03 AM

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 PROBATE COURT

THIS AREA FOR OFFICIAL USE ONLY

JUN 0 2 2017

ALAN L. KING Judge of Probate E.O.D.

	Please Print in Ink or Type.									
Name of Candidate or Elected Official Political P				Affiliation	Type of F	Report Monti	•	one) Amended Monthly		
Patricia Spigner McAdory Democrat				` 🖳			-		ed Weekly	
	ce Sought or Held (Include district or circuit number, if applicable)				Eas Mari	Week				
	mingham Member Board of Education District 7 ress				For Mon Month in	which i	•	May		
	O. Box 19204				report is					
City		Telephone Num	her		For Wee Date of F	-	•			
_	mingham, Alabama 35219	Totophoria Tati	DÇ1		week in v report is i		10	1		
					Total Nu		of			
					Pages in	Repo	rt	<u></u>		
S	ummary of activity since last filed report	" "		T						
1	Beginning balance (ending balance from previou	us filing)					1	- 2000	\$455.38	
	Cash Contributions		10.00							
2a	<u> </u>	· · · · · · · · · · · · · · · · · · ·	2a		_ 					
2b	Non-itemized cash contributions		2b		\$ 13	2.00				
2c	Total cash contributions (add lines 2a and 2b)	<u></u>					2c		\$132.00	
	In-Kind Contributions					-				
За	Itemized in-kind contributions (total from Form 3)	5)	За		\$	0.00				
3b	Non-itemized in-kind contributions		3b			•				
3c	Total in-kind contributions (add lines 3a and 3b)		3с		\$	0.00				
	Receipts from Other Sources									
4a	Itemized Receipts from Other Sources (total from	n Form 4)	4a	- · - · - · · - · · - · · · · · · · · ·	\$10	00.00				
4b	Non-itemized Receipts from Other Sources	<u></u>	4b							
4c	Total receipts from other sources (add lines 4a a	and 4b)					4c		\$100.00	
	Expenditures	<u> </u>								
5a	Itemized expenditures (total from Form 5)		5a		\$31	0.00				
	Non-itemized expenditures	· · · · · ·	5b		\$	0.00				
5c	Total expenditures (add lines 5a and 5b)						5c	· · · ·	\$310.00	
6	Ending balance (add lines 1, 2c, & 4c, then subtra	act line 5c)					6		\$377.38	
Ca	andidates for State Office: File this report with the Office	ce of the Se	cre	tary of State	€.					
	andidates for County or Municipal Office: File this rep					count	y in wh	ich the offi	ce is sought.	
swe atta true stat	required by the Alabama Fair Campaign Practices Act, I here ear or affirm to the best of my knowledge and belief that the information contained herein a and correct and that this information is a full and completement of all contributions, expenditures, and other requirement of during the applicable period of time.	the Jule	V		e year	<u> 20</u>		My commi	_day of ssion expires	
Sig	nature of Candidate or Elected Official. Date Date	7 Signa	ature	of Notary Pu	pile	C				

int Notary's Name

FORM REVISED 10.27.2011



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

FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Patricia Spigner McAdory

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) AMOUNT CONTRIBUTOR ADDRESS DATE (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) CONTRIBUTION OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED (mo./day/yr.) \$0.00 NA \$0.00 TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011



Shelby Cnty Judge of Probate, AL 06/09/2017 02:27:41 PM FILED/CERT

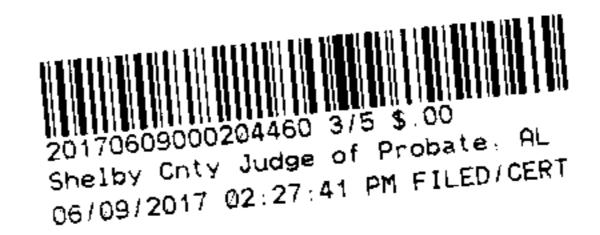
County Division Code: AL040 Inst. # 2017055769 Pages: 3 of 5

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: Patricia Spigner McAdory

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 loans on this form. Use Forms 2 and 4 for those listings. NATURE OF CONTRIBUTION SOURCE (CHECK ONE) (CHECK ONE) **AMOUNT** DATE ADDRESS CONTRIBUTOR (ADDRESS SHOULD INCLUDE CONTRIBUTION OF (INCLUDE FULL NAME) CONTRIBUTION STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED Officers of the Constitution of the Constituti (mo./day/yr.) \$0.00 NA \$0.00 TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011

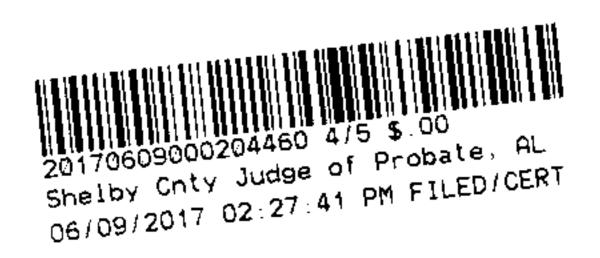


ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

FORM 4: Receipts from Other Sources loans, interest, and other sources of income

NAME OF CANDIDATE OR ELECTED OFFICIAL: Patricia Spigner McAdory

When total	-				.00, the FCPA requires all contributions from				to b	e iter	nized.	
	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT		4	COMPLETE THIS BLOCK IF RECEIPT		RECEIPT SOURCE (CHECK ONE)					
80URCE OF RECEIPT (INCLUDE FULL NAME)		interest		Officer	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN)	Lending	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
Patricia Spigner McAdory	363 Kingston Circle Birmingham, Alabama 35211		×		Patricia Spigner McAdory 363 Kingston Circle Birmingham, Al 35211			×			May 15, 20	\$100.00
-												
-		-								 		. <u> </u>
							-			-		<u></u>
	:		-							+-		
FORM REVISED 10.27.2011	TOTAL RECEIPTS THIS PAGE								E	\$100.00		



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: Patricia Spigner McAdory



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) PERSON/GROUP/BUSINESS ADDRESS **AMOUNT** DATE OF **OTHER** (ADDRESS SHOULD INCLUDE EXPENDITURE OF **RECEIVING EXPENDITURE** STREET OR P.O. BOX, CITY, STATE, AND ZIP) **EXPENDITURE** GNE (mo./daylyr.) (INCLUDE FULL NAME) BRIEF **EXPLANATION** S S 08 20 8 6 5 2 5 5 5 5 2328 South Hampton Drive Mac Mail Advertising May 1, 2017 \$310.00 × Hoover, Alabama 35226 **TOTAL EXPENDITURES THIS PAGE** \$310.00 FORM REVISED 10.27.2011



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