Print Form

FOR OFFICIAL USE ONLY

MONTHLY & WEEKLY

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official	Political Party/Office Affiliation
[redacted]	[redacted]

Office Sought or Held (include district or circuit number, if applicable)

[redacted]

Address ☐ Check box if reporting new address

[redacted]

City	State	ZIP Code	Telephone Number
[redacted]	[redacted]	[redacted]	[redacted]

Type of Report (check one)

☐ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

For Monthly Reports Month for which the report is filed. [redacted]

For Weekly Reports Date of Friday in the week for which the report is filed.

Total Number of Pages in Report [redacted]

Summary of activity since last filed report					
1	Beginning balance (ending balance from previous filing)			1	[redacted]
	Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	[redacted]		
2b	Non-itemized cash contributions	2b	[redacted]		
2c	Total cash contributions (add lines 2a and 2b)			2c	[redacted]
	In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	[redacted]		
3b	Non-itemized in-kind contributions	3b	[redacted]		
3c	Total in-kind contributions (add lines 3a and 3b)	3c	[redacted]		
	Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	[redacted]		
4b	Non-itemized Receipts from Other Sources	4b	[redacted]		
4c	Total receipts from other sources (add lines 4a and 4b)			4c	[redacted]
	Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	[redacted]		
5b	Non-itemized expenditures	5b	[redacted]		
5c	Total expenditures (add lines 5a and 5b)			5c	[redacted]
	Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a	[redacted]		
6b	Non-itemized expenditures	6b	[redacted]		
6c	Total expenditures on credit (add lines 6a and 6b)	6c	[redacted]		
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	[redacted]

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are 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.

John G. Rudd — 7/2/20
Signature of Candidate or Elected Official — Date

Sworn to and subscribed before me this 2ND day of JULY of the year 2020. My commission expires the 4 day of FEBRUARY of the year 2020

Lenice June Richardson
Signature of Notary Public

LENICE JUNE RICHARDSON
Print Notary's Name

FORM REVISED 06 30 2017

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: John B. Lyda

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
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[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
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[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]	✓					[illegible]	[illegible]
	TOTAL CASH CONTRIBUTIONS THIS PAGE							[illegible]

FORM REVISED 10.27.2011

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: John B. Lyda

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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CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo day yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]	✓					[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
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[illegible]	[illegible]	✓					[illegible]	[illegible]
	TOTAL CASH CONTRIBUTIONS THIS PAGE							[illegible]

FORM REVISED 10.27.2011

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: John B. Lyda

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
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[illegible]	[illegible]	✓					[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
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	TOTAL CASH CONTRIBUTIONS THIS PAGE							[illegible]

FORM REVISED 10.27.2011

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: John B. Lyons

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo/day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
[illegible]	[illegible]	✓					[illegible]	[illegible]
[illegible]	[illegible]			✓			[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]	✓					[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
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	TOTAL CASH CONTRIBUTIONS THIS PAGE							[illegible]

FORM REVISED 10.27.2011

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: John B. Lyda

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo/day/yr)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
[illegible]	[illegible]	✓					[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
	TOTAL CASH CONTRIBUTIONS THIS PAGE							[illegible]

FORM REVISED 10.27.2017

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: John B. Lyda

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Personal		
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]		✓				[illegible]	[illegible]
[illegible]	[illegible]			✓			[illegible]	[illegible]
	TOTAL CASH CONTRIBUTIONS THIS PAGE							[illegible]

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: John B. Lyon

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.

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT: Interest	Loan	Other	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN — GUARANTORS (FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN)	RECEIPT SOURCE (CHECK ONE): Lobbyist Interest	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
[illegible]	[illegible]		✓		[illegible]			✓			[illegible]	[illegible]
											TOTAL RECEIPTS 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: John B. Lyda

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

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)										DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
[illegible]	[illegible]				✓							[illegible]	[illegible]
[illegible]	[illegible]				✓							[illegible]	[illegible]
[illegible]	[illegible]				✓							[illegible]	[illegible]
FORM REVISED 10.27.2011	TOTAL EXPENDITURES THIS PAGE												[illegible]

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: [illegible]

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

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY STATE AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)										DATE OF EXPENDITURE (mo/day/yr)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/ Polling	Campaign Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
[illegible]	[illegible]						✓						55
[illegible]	[illegible]	✓											
[illegible]	[illegible]	✓											
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