



**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

THIS AREA FOR OFFICIAL USE ONLY



20200807000338970 1/6 \$.00
Shelby Cnty Judge of Probate, AL
08/07/2020 02:00:31 PM FILED/CERT

DAILY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official Joyce Jones		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) Mayor of Montevallo			
Address ☐ Check box if reporting new address 531 Tecumseh Street			
City Montevallo	State AL	ZIP Code 35115	Telephone Number [REDACTED]

Date Covered by Report

☐ Amended Daily Report

Total Number of Pages
in Report

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	\$598.50
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$1,000.00	
2b	Non-itemized cash contributions	2b	\$623.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$1,623.00	
In-Kind Contributions				
3a	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	\$0.00	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a		
4b	Non-itemized Receipts from Other Sources	4b		
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$0.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	\$671.00	
5b	Non-itemized expenditures	5b	\$161.25	
5c	Total expenditures (add lines 5a and 5b)	5c	\$832.25	
Expenditures on Line of Credit				
6a	Itemized expenditures on line of credit (total from Form 6)	6a		
6b	Non-itemized expenditures on line of credit	6b		
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c	\$0.00	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	\$1,389.25	

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.

Joyce Jones
Signature of Candidate or Elected Official

8/7/2020
Date

Sworn to and subscribed before me this 7th day of August of the year 2020. My commission expires the 26th day of Sept. of the year 2020.

Tracy M. Whitfield
Signature of Notary Public

Tracy M. Whitfield
Print Notary's Name

[illegible]

\$1,000.00

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.

[illegible]

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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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)								SOURCE (CHECK ONE)				DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other		
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE															\$0.00

NAME OF CANDIDATE OR ELECTED OFFICIAL: Joyce Jones

DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

[illegible]

TOTAL RECEIPTS THIS PAGE

\$0.00



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

[illegible]

NAME OF CANDIDATE OR ELECTED OFFICIAL: Joyce Jones

[illegible]

TOTAL EXPENDITURES THIS PAGE

\$0.00

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