

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

FILED
MAY 19 2014

BOBBY M. JUNKINS
JUDGE OF PROBATE

3-12

Please Print in Ink or Type.

Name of Candidate or Elected Official LANA GASKIN BELLEW		Political Party/Ballot Affiliation REPUBLICAN	
Office Sought or Held (include district or circuit number, if applicable) COUNTY COMMISSIONER DISTRICT 4			
Address <input type="checkbox"/> Check box if reporting new address 308 ROSELAND DR.			
City PRC	State AL	ZIP Code 35906	Telephone Number (256) 481-2082

Type of Report (check one)

- Monthly Amended Monthly
 Weekly Amended Weekly

For Monthly Reports
Month in which the report is filed.

MAY

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

MAY 9

Total Number of Pages in Report

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	48 ⁰⁰
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	500 ⁰⁰	
2b	Non-itemized cash contributions	2b	500 ⁰⁰	
2c	Total cash contributions (add lines 2a and 2b)	2c	1000 ⁰⁰	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	227.79	
3b	Non-itemized in-kind contributions	3b	0	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	227.79	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	1500 ⁰⁰	
4b	Non-itemized Receipts from Other Sources	4b	0	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	1500 ⁰⁰	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	2012 ⁰⁰	
5b	Non-itemized expenditures	5b	0	
5c	Total expenditures (add lines 5a and 5b)	5c	2012 ⁰⁰	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	536 ⁰⁰	

Candidates for State Office: File this report with the Office of the Secretary of State.
Candidates for County or Municipal Office: File this report with the Judge of Probate of the county in which the office is sought.

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.

Lana Gaskin Bellew 5/19/14
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this 19 day of May of the year 2014. My commission expires the 29 day of April of the year 2018.

Stephanie A. Downey
Signature of Notary Public
Stephanie A. Downey
Print Notary's Name



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: LANA GASCIN BELEW

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		
DR. TONY & TRACEY CATOZZARO	429 SOUTH BERRY GADSDEN, AL 35901						5/6/14	100 ⁰⁰
DR. CHARLES & PAM NEWMAN	419 SOUTH 5TH STREET GADSDEN, AL 35901						5/6/14	100 ⁰⁰
MR. JAY HOWELL	PO BOX 9 CENTRE, AL 35960						5/3/14	100 ⁰⁰
TRUIT THASHER & JENNY	3053 STEELE STATION RD. RUC, AL 35906						5/3/14	200 ⁰⁰
							TOTAL CASH CONTRIBUTIONS THIS PAGE	500 ⁰⁰



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: LAW GASKIN BEULEW

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						
CHARLES WILSON	120 CUTOFF RD SOMEVILLE, AL 35670													<input checked="" type="checkbox"/>				5/4/14	167.79
CHRIS TREWA CLAYBURN	560 MORGAN PLACE GADSDEN, AL 35901		<input checked="" type="checkbox"/>											<input checked="" type="checkbox"/>				5/4/14	60.00
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																227.79			



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Lana Gaskin Bellev

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			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)				DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business			Other
Lana GASKIN BELEV	308 ROSELAND DR. RASCAL 35906				Lana G. Bellev 308 ROSELAND DR. 35906				<input checked="" type="checkbox"/>			1500.00
TOTAL RECEIPTS THIS PAGE											1500.00	

