

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

FILED

AUG 24 2020

Political Action Committee Campaign Finance Report SUMMARY FORM 1

Type of Report (check one)
 Monthly
 Weekly
 Amended Monthly
 Amended Weekly

SCOTT W. HASSELL
JUDGE OF PROBATE

For Monthly Reports
Month for which the report is filed.

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

Total Number of Pages in Report

—

8-24-20

Please Print in Ink or Type.

Name of Political Action Committee (as appears on statement of Organization) <u>Mccain Gibraltar</u>		Acronym for PAC	
Address (as appears on Statement of Organization) <u>307 Wain Drive</u>		<input type="checkbox"/> Check box if reporting new address	
City <u>Rainbow City</u>	State <u>AL</u>	ZIP Code <u>35906</u>	Telephone Number <u>256-689-7099</u>

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	\$525.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a		
2b	Non-itemized cash contributions	2b		
2c	Non-itemized employee payroll contributions	2c		
2d	Total cash contributions (add lines 2a, 2b and 2c)	2d		\$0.00
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	\$475	
3b	Non-itemized in-kind contributions	3b	\$50	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$525.00	\$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		
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c		\$0.00
Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a		
6b	Non-itemized expenditures	6b		
6c	Total expenditures on credit (add lines 6a and 6b)	6c		\$0.00
7	Ending balance (add lines 1, 2d, & 4c, then subtract line 5c)	7		\$0.00

Sworn to and subscribed before me this 24th day of August of the year 2020. My commission expires the 1st day of November of the year 2020.

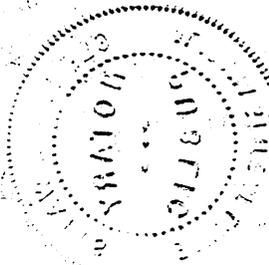
Glenda S. Watts
Signature of Notary Public

Glenda S. Watts
Print Notary's Name

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.

Mani Que
Signature of Chairperson or Treasurer of Political Committee

08-24-20
Date



08-1-10

1200
120
1012

1898:00

1898:00

1898:00

1898:00

JUDGE OF PROBATE
SCOTT W. HASSELL

1898:00

1898:00



FORM 3: In-Kind Contributions received by political action committee

NAME OF POLITICAL ACTION COMMITTEE: _____

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 contributions 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 (not a corporation)	Corporation	Individual	Other			
Classic Printing and signs	924 6th Ave. North Birmingham AL.		<input checked="" type="checkbox"/>								<input checked="" type="checkbox"/>				07-25-20	\$475
McCain Gilbreath	307 wain Drive Rainbow city, AL 35906								<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			07-21-20	\$50
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																\$525.00



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

NAME OF POLITICAL ACTION COMMITTEE: _____

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	RECEIPT SOURCE (CHECK ONE)				DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	Lending Institution	Individual	Business	Other		
TOTAL RECEIPTS THIS PAGE											\$ 0.00



FORM 5: Expenditures by political action committee

NAME OF POLITICAL ACTION COMMITTEE: _____

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	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
TOTAL EXPENDITURES THIS PAGE													\$ 0.00

