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City

MAYOR

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

DEC 27 2011

James W. Fuhrmeister Judge of Probate

Amended Monthly

Amended Weekly

Please Print in Ink or Type.

Type of Report (check one) Name of Candidate or Elected Official Political Party/Ballot Affiliation Monthly Weekly Office Sought or Held (include district or circuit number, if applicable) For Monthly Reports EUSIGNU) D Month in which the Address Check box if reporting new address report is filed. For Weekly Reports Date of Friday in the ZIP Code State Telephone Number week in which the

Shelby Cnty Judge of Probate, AL

12/28/2011 11:00:43 AM FILED/CERT

	90 NS 1205 AA (SUMVIE)	1	report i	s filed.	
				lumber of in Report	
S	ummary of activity since last filed report				1
1	Beginning balance (ending balance from previous filing)			1	
	Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	$\omega \mathcal{L}$	က	
2b	Non-itemized cash contributions	2b			
2c	Total cash contributions (add lines 2a and 2b)			2c	2000
	In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a			
3b	Non-itemized in-kind contributions	3b			
3с	Total in-kind contributions (add lines 3a and 3b)	3c			
	Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a			
4b	Non-itemized Receipts from Other Sources	4b	<u> </u>		
4c	Total receipts from other sources (add lines 4a and 4b)			4c	1471.75
	Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	1203.16		
5b	Non-itemized expenditures	5b			
5c	Total expenditures (add lines 5a and 5b)			5c	1203.16
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			6	468.59

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.

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.

Signature of Candidate or Elected Official

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Sworn to and	d subscribed	before n	າe this <u> </u> ໌	み / 王	day of
Decemb					ission expires
the		<u> </u>		e year <u>2</u>	013
		n. Cr	161		
Signature of N	otary Public	te	1001		
		22	11		

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

FORM 2: Contributions received by candidate 9 official

NAME OF CANDIDATE OR ELECT When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemiz TED OFFICIAL: 1 7

98	SPAGE	TH:	S	TIO	RIBU	CONTR	TOTAL CASH	FORM REVISED 9.2.2011
								12/2
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CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Returned	Other	PAC	Corporation Undividual	Business or	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
		S N		NTI	of co			
		js.	listings	nose l	for #	ns 3 and 4	O NOT LIST in-kind contributions or loans on this form. Use Forms	Q

ABAMA FAIR AMPAIGN PRACTICES ACT CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

W 大 ind ontri butions received by candidate 9 elected official





When total contributions from a single source DO NOT LIST cash or loans exceed \$100.00, the on this form. FCPA requires all contributions from that source Use Forms 2 and 4 for those listings. ರ be itemized.

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CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Other	PAC	Individual	Business/ Corporation	Other	Transportation	Rent	Food	Equipment	Consultants/ Polling	Advertising	Administrative	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
		m ""	JRCE X ONE)	SOU (CHEC			NOITI	TRIBU	CC ON	OF C	URE	NAT			

ABAMA A R AMPAIGN PRA TICES ACT CAMPAIGN FINANCE REPOR' FOR CANDIDATE/ELECTED OFFICIAL

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source exceed \$100.00, the FCPA r requires contributions from that source ರ be itemized.

Shelby Cnty Judge of Probate, AL FORM REVISED 12/28/2011 11:00:43 AM FILED/CERT (INCLUDE F 9.2.2011 RECEIPT LL NAME) ADDRESS

DDRESS SHOULD INCLUDE

STREET OR P.O. BOX,

CITY, STATE, AND ZIP) DO NOT LIST cash or in-kind contributions on this form. とろ ダダ 유 Interest FORM Loan Other [FCPA REQUIRES FULL NAME AND COM-PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] COMPLETE **GUARANTORS** THIS BLOCK IF I Use Forms TOTAL and 3 for those RECEIPT RECEIPTS Lending listings. Institution RECEIPT SOURCE (CHECK ONE) PAC SIHT Individual Business PAGE Other PATE RECEIVED (mo./day/yr.)

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or placted off	FINANCE REPORT
	FOR CANDIDATE

ELECTED

OFFICIAL

FORM 5:	Expenditures by	candidate or ele	elected official
NAME OF CANDIDA	ATE OR ELECTED OFFICIAL:	イケアスト	17 d/64

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

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I 77	Shelby (inty Judg	e of Pro	bate, AL ILED/CER		Sign (Sephic)	Dowlina (Destinos	715614 Jussel	PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	
						(c) mhow 70	7	And To	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	
									Administrative	
					•				Advertising Consultants/	
									Polling	
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E)									Fundraising Loan	CHECK
PE					. ,-				Repayment Lodging	X EXP
					 			<u> </u>	Transportation	
ITURES THIS									OTHER GIVE BRIEF BRIEF EXPLANATION	XPENDITURE ONE)
PAGE									EXPENDITURE (mo./day/yr.)	
2000						77236	シノノショ	7550	AMOUNT OF EXPENDITURE	