

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY



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Shelby Cnty Judge of Probate, AL
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JUL 03 2012

James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official <u>Toney D. Abernathy</u>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <u>Leeds, City Council District 1</u>			
Address ☒ Check box if reporting new address <u>PO Box 802</u>			
City <u>Leeds</u>	State <u>AL</u>	ZIP Code <u>35094</u>	Telephone Number <u>[REDACTED]</u>

Type of Report (check one)

☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

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

Total Number of Pages in Report

4

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<u>0</u>
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	<u>3050.00</u>
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	<u>3050.00</u>
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	
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	<u>0</u>
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	<u>901.00</u>
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	<u>901.00</u>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<u>2149.00</u>

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.

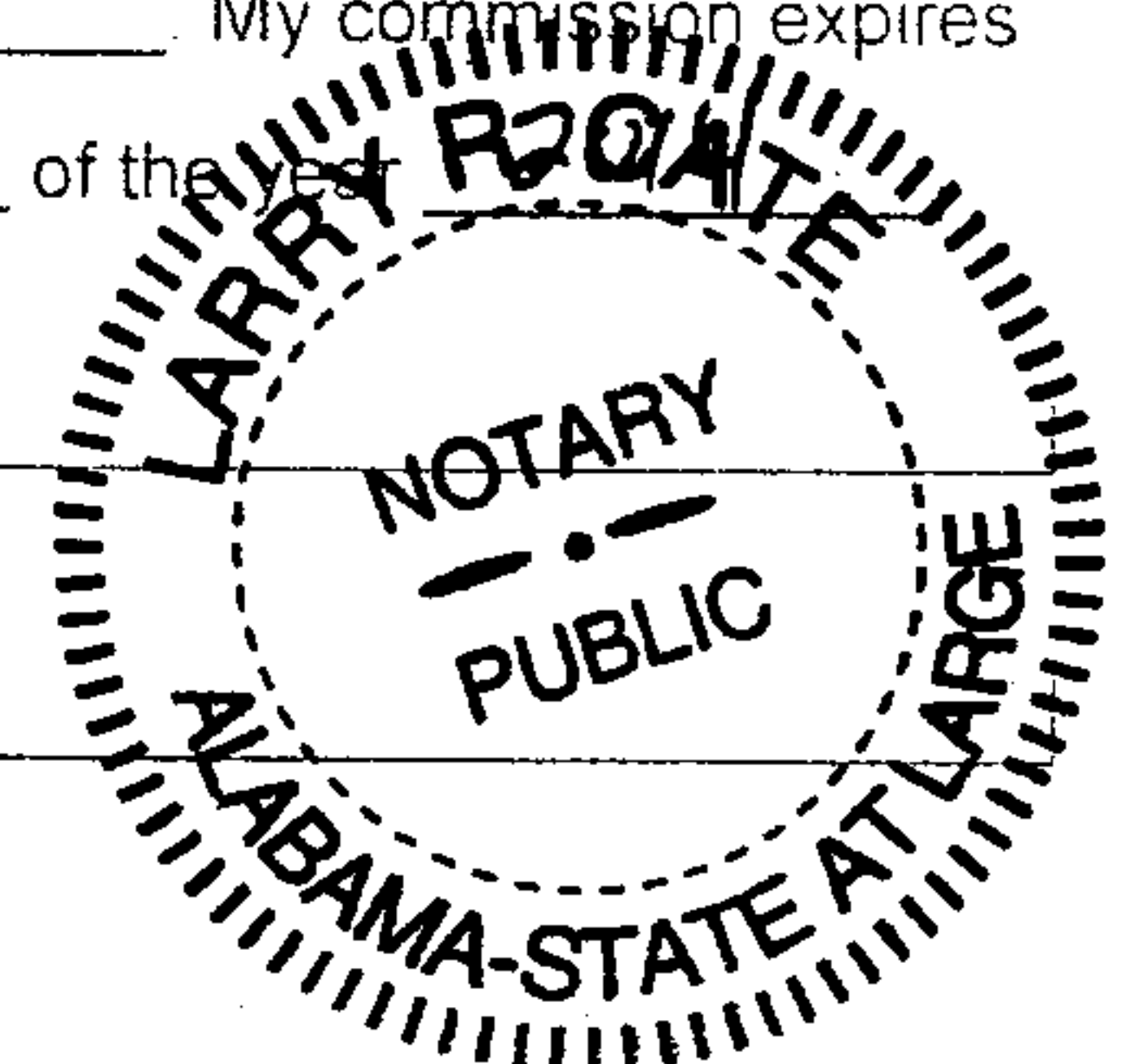
As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures, and other required information during the applicable period of time.

Toney D. Abernathy 7 3 12
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this 3 day of July of the year 2012. My commission expires the 26 day of January of the year 2013.

Larry R. Cate
Signature of Notary Public

Larry R. Cate
Print Notary's Name



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:



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		
Bernard Bowden	7908 Haydentberry Court Nashville, Tenn. 37221		X				7-2-12	\$850. ⁰⁰
Alabama Electric Motor Service	7324 Parkway Drive Leeds, AL 35094	X					6-18-12	\$500. ⁰⁰
Stanley Teague	144 Shaw Road Pell City, AL 35122		X				6-8-12	\$100. ⁰⁰
Arthur Struggs	109 Moss Rock Lane Bham, AL 35210		X				7-1-12	\$50. ⁰⁰
Linda Struggs	109 Moss Rock Lane Bham, AL 35210		X				7-1-12	\$50. ⁰⁰
Toney D. Abernathy	8040 Washington Ave Leeds, AL 35094		X				7-2-12	\$1500. ⁰⁰
TOTAL CASH CONTRIBUTIONS THIS PAGE								\$3050.⁰⁰



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Toney D. Abernathy

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		
Lawson Signs	Montgomery Hwy Hoover, AL		X									7-2-12	750. ⁰⁰
WDG	Parkway Drive Leeds, AL 35094					X						7-2-12	151. ⁰⁰
TOTAL EXPENDITURES THIS PAGE												901. ⁰⁰	