Office Sought or Held (include district or circuit number, if applicable) |

Check box if reporting new address

Name of Candidate or Elected Official

THIS AREA FOR OFFICIAL USE ONLY

CANDIDATE / ELECTED OFFICIAL ANNUAL REPORT SUMMARY FORM 1A

Please Print in Ink or Type.

State

03/09/2010 10:38:01 AM FILED/CERT

RECEIVED

JAN 21 2010

	James W. Fuhrmeister Judge of Probate
^	Type of Report (check one)
	nnual Report for Year SCO
T	ermination Report
$\overline{\Box}$ A	mended Annual Report for Year

<u> </u>	5i2ming ham 17435212059	95-8	39	Amended	Annual	Report for Year
SE	ECTION I - Summary of activity from last filed report	throu	gh Dec	ember 31 o	frep	orting year
1	Beginning balance (ending balance from previous filing)				1	
	Cash Contributions				b	······································
2a	Itemized cash contributions (total from Form 2)	2a		••	7	
2b	Non-itemized cash contributions	2b				
2c	Total cash contributions (add lines 2a and 2b)		-	· ·	2c	\$0.00
	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					•
4	Total receipts from other sources (total from Form 4)				4	
	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
6	Ending balance (add lines 1, 2c, & 4, then subtract line 5c)				6	
SE	ECTION II - Summary of activity for entire reporting y	ear - J	anuar	1st throug	h De	cember 31st
7	Beginning balance (as of January 1 of reporting year)				7	701.45
8	Total cash contributions for year			•	8	
9	Total in-kind contributions for year	9				
10	Total receipts from other sources for year				10	·
11	Total expenditures for year				11	THE PARTY OF THE P
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)				12	701.55
13	Total campaign debt (total debt owed as of December 31)	13	·			

Political Party/Ballot Affiliation

ZIP Code | Telephone Number

Sworn to and subscribed bef	fore me this つと	day of
January of the year	2010 My co	mmission expires
the 25th day of A	_4	

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.