ALABAMA FAIR CAMPAIGN PRACTICES ACT

CANDIDATE / ELECTED OFFICIAL

ANNUAL REPORT SUMMARY FORM 1A



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FEB 4 2010
James W. Fuhrmeister

Please Print in Ink or Type. Political Party/Ballot Affiliation Name of Candidate or Elected Official Office Sought or Held (include district or circuit number, if applicable) Address Check box/if reporting new address Type of Report (check one) Annual Report for Year 2009 ZIP Code Telephone Number **Termination Report** City State Amended Annual Report for Year SECTION I - Summary of activity from last filed report through December 31 of reporting year

	Beginning balance (ending balance from previous ming)				1755106
	Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a			
2b	Non-itemized cash contributions	2b	-		
2c	Total cash contributions (add lines 2a and 2b)			2c	
	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				
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	925.00		
5c	Total expenditures (add lines 5a and 5b)			5c	925,00
6	Ending balance (add lines 1, 2c, & 4, then subtract line 5c)			6	530.54
SI	ECTION II - Summary of activity for entire reporting y	/ea	r - January 1st throug	jh D	ecember 31st
7	Beginning balance (as of January 1 of reporting year)			7	1455,54
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	925.00
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)			12	530.56

Sworn to and subscribed before me this	<u> </u>	day of
February of the year 2010	My commi	ission expires
the 14th day of November of		
Pourbura H. Pa	ruch	

13 Total campaign debt (total debt owed as of December 31) 13

Signature of Notary Public

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

FORM REVISED 10.29.99

ALABAMA FAIR CAMPAIGN PRAC

COHECE
The ECDA requires that those contributions greater than \$100 he itemized DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.
Name of Candidate / Elected Official: OFOF

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	CONTRIBUTION RECEIVED (mo./day/yr.)	Returned	Other	Individual PAC	Corporation	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) sin Bu	CONTRIBUTOR (INCLUDE FULL NAME)
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Shelby Cnty Judge of Probate, AL

RECEIVED CANDIDATE OR ELECTED OFFICIAL

The FCPA requires that those contributions greater than \$100 be itemized. DO NOT LIST of	VAME OF CANDIDATE / ELECTED OFFICIAL:	
cash or loans on this form. Use Forms 2 and 4 for those listings.	PAGE OF	

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CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Other	PAC	Corporation Individual	Business/	Other	Transportation	Food Rent	Equipment	Polling	Advertising Consultants/	Administrative	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	CONTRIBUTOR (INCLUDE FULL NAME)
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ORM 4: RECEIPTS FROM OTHER SOURCES

LOANS/INTEREST/OTHER SOURCES OF INCOME TO CANDIDATE OR ELECTED OFFICIA

FCPA requires CANDIDATE that those ELECTED contributions greater than \$100 be itemized. DO NOT LIST cash OFFICIAL: or in-kind contributions on this form. Use Forms 2 and PAGE 3 for those listings.

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CANDIDATE

ELECTED

BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTION CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES

FORM REVISED 10.29.99									PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) STREE			NAME OF CANDIDATE / ELECTED OFFICIAL
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AGE									DATE OF EXPENDITURE (mo./day/yr.)			PAGE _
									AMOUNT OF EXPENDITURE			OF