



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

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JAN 03 2012

James W. Fuhrmeister
Judge of Probate20120103000003660 1/5 \$.00
Shelby Cnty Judge of Probate, AL
01/03/2012 04:10:48 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official CORLEY ELLIS		Political Party/Ballot Affiliation REPUBLICAN	
Office Sought or Held (include district or circuit number, if applicable) Shelby County Commission DISTRICT 1			
Address ☐ Check box if reporting new address P.O. Box 1177			
City COLUMBIANA	State AL	ZIP Code 35051	Telephone Number 205- [REDACTED]

Type of Report (check one)

☒ Monthly☐ Amended Monthly☐ Weekly☐ Amended WeeklyFor Monthly Reports
Month in which the
report is filed.**DEC 2011**For Weekly Reports
Date of Friday in the
week in which the
report is filed.Total Number of
Pages in Report**5**

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		43.72
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	0
2b	Non-itemized cash contributions	2b	0
2c	Total cash contributions (add lines 2a and 2b)	2c	0
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	0
3b	Non-itemized in-kind contributions	3b	0
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	0
4b	Non-itemized Receipts from Other Sources	4b	0
4c	Total receipts from other sources (add lines 4a and 4b)	4c	0
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	3.00
5b	Non-itemized expenditures	5b	0
5c	Total expenditures (add lines 5a and 5b)	5c	3.00
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	40.72

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.

[Signature] **12/30/11**
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this **30th** day of **December** of the year **2011**. My commission expires the **2TH** day of **October** of the year **2013**.

[Signature]
Signature of Notary Public

KEVIN T. ATWELL
Print Notary's Name

NAME OF CANDIDATE OR ELECTED OFFICIAL: CORLEY ELLIS

DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

[illegible]

TOTAL CASH CONTRIBUTIONS THIS PAGE



20120103000003660 2/5 \$.00
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NAME OF CANDIDATE OR ELECTED OFFICIAL:

Copy Error

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 loans on this form. Use Forms 2 and 4 for those listings.

[illegible]

FORM REVISED 9.2.2011

TOTAL IN-KIND CONTRIBUTIONS THIS PAGE



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NAME OF CANDIDATE OR ELECTED OFFICIAL:

CORLEY ELVIS

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.

[illegible]

FORM REVISED 9.2.2011

TOTAL RECEIPTS THIS PAGE



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The seal of the State of Alabama is a circular emblem. It features a central shield depicting a landscape with a river, a bridge, and a rising sun. The shield is flanked by the words "AGRICULTURE" on the left and "COMMERCE" on the right. Above the shield is a banner with the motto "DEWEY". The entire shield is encircled by a border containing the text "GREAT SEAL OF THE STATE OF ALABAMA" and three stars at the top and bottom.

NAME OF CANDIDATE OR ELECTED OFFICIAL:

CORLEY ELVIS

**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

BRYANT BANK

P.O. Box 247
Columbia, AL 35051

X

Administrative
Advertising
Consultants/ Polling
Contribution
Food
Fundraising
Loan Repayment
Lodging
Transportation

OTHER
GIVE
BRIEF
EXPLANATION

Service Charge

12/12/11

W
O

TOTAL EXPENDITURES THIS PAGE

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3.00



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