

MONTHLY & WEEKLY


**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

20120309000083330 1/5 \$.00
Shelby Cnty Judge of Probate, AL
03/09/2012 03:49:11 PM FILED/CERT

FOR OFFICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

MAR - 8 2012

 James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Timothy Mitchell</i>		Political Party/Ballot Affiliation <i>Republican</i>	
Office Sought or Held (include district or circuit number, if applicable) <i>Probate Judge</i>			
Address ☐ Check box if reporting new address <i>116 First St. South</i>			
City <i>Alabaster</i>	State <i>AL</i>	ZIP Code <i>35007</i>	Telephone Number <i>[REDACTED]</i>

Type of Report (check one)

- ☐ Monthly
☒ Weekly
☐ Amended Monthly
☐ 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

<i>3.9.12</i>
<i>5</i>

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<i>- 0 -</i>
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	<i>13736³⁵</i>
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	<i>13736³⁵</i>
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	
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	<i>13736³⁵</i>
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	<i>13736³⁵</i>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<i>- 0 -</i>

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 of Candidate or Elected Official *Timothy Mitchell* Date *3/7/12*

Sworn to and subscribed before me this 7 day of March of the year 2012. My commission expires the 3 day of 29 of the year 2012.

Signature of Notary Public *Stacy Ashby*
Print Notary's Name STACY ASHBY



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total contributions from a single source exceed \$100,000, the FCPA requires all contributions from that source to be itemized.

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		
THOMAS MITCHELL	116 FIRST ST S ARABASTER, AL 35007						3-1-12	13736
							3-1-12	13736

FORM REVISED 9.2.2011



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FORM 4: Receipts from Other Sources loans, interest, and other sources of income

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 cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)				DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
						Lending Institution	PAC	Individual	Business			Other
		Interest	Loan	Other								
TOTAL RECEIPTS THIS PAGE												

FORM REVISED 8.2.2011

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



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Timothy L. McTebell

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		
Master Image	P.O. Box 59056 Birmingham, AL 35259	✓										3-5-12	\$ 11,736.35
Master Image	P.O. Box 59056 Birmingham, AL 35259	✓										3-5-12	\$ 2,000
TOTAL EXPENDITURES THIS PAGE												13,736.35	