FOR OFFICIAL USE ONLY

_ My commission expires

of the year 2016

RECEIVED

MAR 2 9 2012

James W. Fuhrmeister Judge of Probate

Candidate & Elected Official Campaign Finance SUMMARY FORM 1 Campaign Finance Report

Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) In-Kind Contributions Itemized in-kind contributions (total from Form 3) Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) Non-itemized Receipts from Other Sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.		Please Print in Ink or Type.					
1 Beginning balance (ending balance from previous filing) Cash Contributions 2a Itemized cash contributions (total from Form 2) 2b Non-itemized cash contributions 2c Total cash contributions (add lines 2a and 2b) In-Kind Contributions 3a Itemized in-kind contributions (total from Form 3) 3b Non-itemized in-kind contributions 3c Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources 4a Itemized Receipts from Other Sources (total from Form 4) 4b Non-itemized Receipts from Other Sources (add lines 4a and 4b) Expenditures 5a Itemized expenditures (total from Form 5) 5a Itemized expenditures (add lines 5a and 5b) 5c Total expenditures (add lines 5a and 5b) 5c Finding balance (add lines 1, 2c, 8, 4c, then subtract line 5c)	Office Add	ress Check box if reporting/new address State Candidate or Elected Official Political Party/ Polit	4	ffiliation	For Monthly For Month in which report is filed. For Weekly Robate of Friday week in which report is filed. Total Number	ekly eports in the the of	Amended Monthly
Cash Contributions 2a Itemized cash contributions (total from Form 2) 2b Non-itemized cash contributions 2c Total cash contributions (add lines 2a and 2b) 2c In-Kind Contributions 3a Itemized in-kind contributions (total from Form 3) 3b Non-itemized in-kind contributions 3c Total in-kind contributions (add lines 3a and 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) 4b Non-itemized Receipts from Other Sources 4c Total receipts from other sources (add lines 4a and 4b) Expenditures 5a Itemized expenditures (total from Form 5) 5b Non-itemized expenditures 5c Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State	Sı	ummary of activity since last filed report					
Itemized cash contributions (total from Form 2) 2a 3c 3c 3c 3c 3c 3c 3c 3	1	Beginning balance (ending balance from previous filing)				1	22.2
Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) In-Kind Contributions In-Kind Contributions Itemized in-kind contributions (total from Form 3) Itemized in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) Non-itemized Receipts from Other Sources (total from Form 4) Non-itemized Receipts from Other Sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	(Cash Contributions				· · · · · · · · · · · · · · · · · · ·	
In-Kind Contributions (add lines 2a and 2b) In-Kind Contributions 3a Itemized in-kind contributions (total from Form 3) 3b Non-itemized in-kind contributions 3c Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources 4a Itemized Receipts from Other Sources (total from Form 4) 4b Non-itemized Receipts from Other Sources 4c Total receipts from other sources (add lines 4a and 4b) Expenditures 5a Itemized expenditures (total from Form 5) 5b Non-itemized expenditures 5c Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	2a	Itemized cash contributions (total from Form 2)	2a	+	}		
In-Kind Contributions 3a Itemized in-kind contributions (total from Form 3) 3b Non-itemized in-kind contributions 3c Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources 4a Itemized Receipts from Other Sources (total from Form 4) 4b Non-itemized Receipts from Other Sources 4c Total receipts from other sources (add lines 4a and 4b) Expenditures 5a Itemized expenditures (total from Form 5) 5b Non-itemized expenditures 5c Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	2b	Non-itemized cash contributions	2b	4	<u> </u>		
Itemized in-kind contributions (total from Form 3) 3a Contributions (add lines 3a and 3b) 3c Total in-kind contributions (add lines 3a and 3b) 3c Receipts from Other Sources	2c	Total cash contributions (add lines 2a and 2b)			., <u>. </u>	2c	0
Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.		In-Kind Contributions				<u> </u>	
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) Expenditures 5a Itemized expenditures (total from Form 5) 5a 6 Non-itemized expenditures (add lines 5a and 5b) 5c Total expenditures (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	3a	Itemized in-kind contributions (total from Form 3)	3a		0		
Receipts from Other Sources 4a Itemized Receipts from Other Sources (total from Form 4) 4a 4b Non-itemized Receipts from Other Sources 4c Total receipts from other sources (add lines 4a and 4b) Expenditures 5a Itemized expenditures (total from Form 5) 5b Non-itemized expenditures 5c Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	3b	Non-itemized in-kind contributions	3b		3		
Itemized Receipts from Other Sources (total from Form 4) 4a Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	3с	Total in-kind contributions (add lines 3a and 3b)	3с				
Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.		Receipts from Other Sources					
Total receipts from other sources (add lines 4a and 4b) Expenditures 5a Itemized expenditures (total from Form 5) 5b Non-itemized expenditures 5c Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	4a	Itemized Receipts from Other Sources (total from Form 4)	4a	(
Expenditures 5a Itemized expenditures (total from Form 5) 5b Non-itemized expenditures 5c Total expenditures (add lines 5a and 5b) 6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	4b	Non-itemized Receipts from Other Sources	4b	<u>ب</u>)		
Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	4c	Total receipts from other sources (add lines 4a and 4b)		_		4c	9
Non-itemized expenditures Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.		Expenditures			······································		
Total expenditures (add lines 5a and 5b) Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State.	5a	Itemized expenditures (total from Form 5)	5a	(9		
6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) 6 20.0 Candidates for State Office: File this report with the Office of the Secretary of State.	5b	Non-itemized expenditures	5b		}		
Candidates for State Office: File this report with the Office of the Secretary of State.	5c	Total expenditures (add lines 5a and 5b)				5c	
	6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)				6	22.2
As required by the Alabama Fair Campaign Practices Act, I hereby Sworn to and subscribed before me this 27 th day of							

As required by the Alabama Fair Campaign Practices Act, Thereby 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 Zapaldate or Elected Official

Signature of Notary Public

March of the year 20

day of

Print Notary's Name

FORM REVISED 9 2.0011