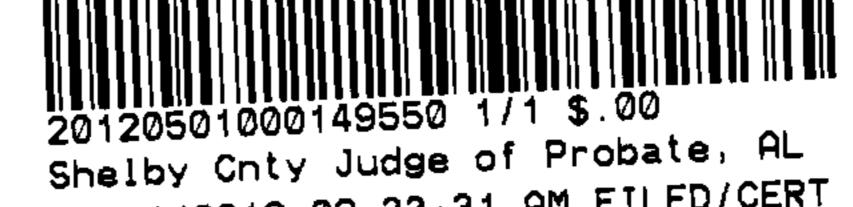


FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA



05/01/2012 08:33:31 AM FILED/CERT

FOR OFFICIAL USE ONLY

RECEIVED

APR 3 0 2012

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

| Please Print in Ink or Type. | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|
| Name of Candidate or Elegted Official Office Sought or Held (include district or circuit pumber, if applicable) Address Check box if reporting new address City State ZIP Code Telephone | Number | Type of Report (check Monthly Weekly For Monthly Reports Month in which the report is filed. For Weekly Reports Date of Friday in the | Amended Monthly Amended Weekly |
| Westoner AL 3514 | | week in which the report is filed. Total Number of Pages in Report | |
| Summary of activity since last filed report | | | |
| 1 Beginning balance (ending balance from previous filing |) | 1 | 22.2 |
| Cash Contributions | | \[\begin{align*} | |
| 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 |
| 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 | 3 | |
| 5b Non-itemized expenditures | 5b | | |
| 5c Total expenditures (add lines 5a and 5b) | | 5c | |
| 6 Ending balance (add lines 1, 2c, & 4c, then subtract line s | 5c) | 6 | 22.21 |
| Candidates for State Office: File this report with the Office of the Candidates for County or Municipal Office: File this report with | | | hich the office is sought. |
| swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are | hon of the | | 276 day of My commission expires he year 2014. |
| Signature of Cappidate or Elected Official Date | Signature of Notary Pub Print Notary's Name | lic Michael | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |