

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

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|  | Please Print in link or Type.  |  |                                |  |  |          | •                                      |
|--|--|--|--------------------------------|--|--|----------|--|
|  |  | Political Party/ N/A                   | tical Party/Ballot Affiliation |  | Type of Report (check of Monthly                         |          | one)  Amended Monthly                  |
|  |  |  | _                              |  | Weekly   |          | Amended Weekly                         |
| Office Sought or Held (include district or circuit number, if applicable)  Alabaster City Council - Ward 4 |  |  |                                |  | For Monthly Reports  Month in which the report is filed. |          |  |
| Address Check box if reporting new address   |  |  | <del></del>                    |  |  |          | May 2012                               |
| 109 Shalimar Trace   |  |  |                                |  | For Weekly Re  | ports    |  |
| City State ZIP Code Telephone Num Alabaster, AL 35007  |  |  | mber                           |  | Date of Friday in the week in which the report is filed. |          |  |
|  |  |  |                                |  |  |          |  |
|  |  |  |                                |  | Total Number Pages in Repo                               |          |  |
| S  | ummary of activity since last filed report   |  |                                |  |  |          |  |
| 1  | Beginning balance (ending balance from previo  | us filing)                             |                                |  |  | 1        | \$357.60                               |
|  | Cash Contributions   |  |                                |  |  | L        | Ψ001.00                                |
| 2a   | Itemized cash contributions (total from Form 2)  | ······································ | 2a                             |  | \$0.00   |          |  |
| 2b   | Non-itemized cash contributions  |  | 2b                             |  | \$0.00   |          |  |
| 2c   | Total cash contributions (add lines 2a and 2b)   |  |                                | · · · · · · · · · · · · · · · · · · ·  |  | 2c       | \$0.00                                 |
|  | In-Kind Contributions  | <u></u>                                |                                |  |  |          | —————————————————————————————————————— |
| 3a   | Itemized in-kind contributions (total from Form 3  | 3)                                     | 3a                             | ·····                                  | \$0.00   |          |  |
| 3b   | Non-itemized in-kind contributions   | · · · · · · · · · · · · · · · · · · ·  | 3b                             |  | \$0.00   |          |  |
| 3с   | Total in-kind contributions (add lines 3a and 3b)  | · · · · · · · · · · · · · · · · · · ·  | 3c                             |  | \$0.00   |          | 4                                      |
|  | Receipts from Other Sources  |  |                                | <del></del>                            |  | j        |  |
| 4a   | Itemized Receipts from Other Sources (total from   | m Form 4)                              | 4a                             | ······································ | \$0.00   |          |  |
| 4b   | Non-itemized Receipts from Other Sources   | · · · · · · · · · · · · · · · · · · ·  | 4b                             | <del></del>                            | \$0.00   |          |  |
| 4c   | Total receipts from other sources (add lines 4a  | and 4b)                                |                                | <del></del>                            |  | 4c       | \$0.00                                 |
|  | Expenditures   |  |                                |  |  | <u> </u> |  |
| 5a   | Itemized expenditures (total from Form 5)  |  | 5a                             |  | \$0.00   |          |  |
| 5b   | Non-itemized expenditures  |  | 5b                             |  |  |          |  |
| 5c   | Total expenditures (add lines 5a and 5b)   |  |                                |  |  | 5c       | \$0.00                                 |
| 6  | Ending balance (add lines 1, 2c, & 4c, then subtra   | act line 5c)                           |                                |  |  | 6        | \$357.60                               |
| Ca   | ndidates for State Office: File this report with the Offi  | ce of the Se                           | creta                          | ry of State                            |  |          |  |
| Ca   | ndidates for County or Municipal Office: File this re  | port with the                          | Jud                            | ge of Proba                            | ite of the count   | y in wh  | ich the office is sought.              |
|  | equired by the Alabama Fair Campaign Practices Act, I here   |  | rn to                          | and subscri                            | bed before me  | this     | 294k day of                            |
|  | ar or affirm to the best of my knowledge and belief that the ched report(s) and the information contained herein a | the M                                  | XII                            | of the                                 | year <b>3013</b>   |          | My commission expires                  |
| true   | and correct and that this information is a full and compl  | ete the                                | 10                             | day o                                  | f March  | of the   | year <u>2013</u> .                     |
| state  | ement of all contributions, expenditures, and other requiremental of the applicable period of time.                | l <del>e</del> u                       | _                              | 1 21                                   |  | <u> </u> | , your <u>o-o ; c</u> .                |
| /  | 15 ) 4 (10/20/20/20/20/20/20/20/20/20/20/20/20/20  |  | in                             | US                                     | lass   |          |  |
| <i>L</i><br>Sign   | nature of Candidate or Elected Official Date   | Signa                                  | ature (                        | f Notary Publ                          | ic   |          |  |
| ~  |  |  | iN                             | du (                                   | <u>0</u> /055  |          |  |
| FORM REVISED 10.27.2011  |  |  |                                |  |  |          | · · · · · · · · · · · · · · · · · · ·  |