



**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

20120705000235260 1/5 \$.00
Shelby Cnty Judge of Probate, AL
07/05/2012 08:46:04 AM FILED/CERT

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RECEIVED
JUL 2 2012
James W. Fuhrmeister
Judge of Probate

DAILY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official David Miller		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) MAYOR LEEDS			
Address ☐ Check box if reporting new address 7011 Briarwood Lane			
City Leeds	State AL	ZIP Code 35094	Telephone Number

Date Covered by Report **6/30/12**

☐ Amended Daily Report

Total Number of Pages in Report **5**

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		1 284.99
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a 300.00	
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	300.00
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 252.30	
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	252.30
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	332.69

Candidates for State Office and State Elected Officials: File this report with the Office of the Secretary of State.

Candidates for County or Municipal Office and County and Municipal Elected Officials: 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 **David Miller** Date **6/30/12**

Sworn to and subscribed before me this **30** day of **JUN** of the year **2012**. My commission expires the **2** day of **May** of the year **2016**.

Signature of Notary Public **Mary Catherine Williams**

Print Notary's Name **Mary Catherine Williams**



Dana Miller

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 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: David Miller

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
VISTA PRINT	45 HAYDEN AVE LEXINGTON MA 02421		✓									6/23/12	252.30
TOTAL EXPENDITURES THIS PAGE												252.30	



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