


**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

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Shelby Cnty Judge of Probate, AL
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Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

RECEIVED

JUL 10 2012

 James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Denise (Dee) A. Woodham</i>		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) <i>Montevallo City Council, District 5</i>			
Address ☐ Check box if reporting new address <i>PO Box 149</i>			
City <i>Montevallo</i>	State <i>AL</i>	ZIP Code <i>35115</i>	Telephone Number <i>[REDACTED]</i>

 Calendar Year
covered by this report.

- ☐ Amended Annual Report
☐ Termination Report

 Total Pages in Report
Include this page in
your count.

SECTION I - Summary of activity from last filed report through December 31 of reporting year

1	Beginning balance (ending balance from previous filing)		1	<i>0</i>
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	<i>0</i>	
2b	Non-itemized cash contributions	2b	<i>0</i>	
2c	Total cash contributions (add lines 2a and 2b)	2c	<i>0</i>	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	<i>0</i>	
3b	Non-itemized in-kind contributions	3b	<i>0</i>	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<i>0</i>	
Receipts from Other Sources				
4a	Total itemized receipts from other sources (total from Form 4)	4a	<i>0</i>	
4b	Total non-itemized receipts from other sources	4b	<i>0</i>	
4c	Total itemized receipts from other sources (add lines 4a and 4b)	4c	<i>0</i>	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	<i>0</i>	
5b	Non-itemized expenditures	5b	<i>0</i>	
5c	Total expenditures (add lines 5a and 5b)	5c	<i>0</i>	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<i>0</i>	

SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

7	Beginning balance (as of January 1 of reporting year)	7	<i>0</i>
8	Total cash contributions for year	8	<i>0</i>
9	Total in-kind contributions for year	9	<i>0</i>
10	Total receipts from other sources for year	10	<i>0</i>
11	Total expenditures for year	11	<i>0</i>
12	Ending balance (add lines 7, 8, & 10, then subtract line 11)	12	<i>0</i>
13	Total campaign debt (total debt owed as of December 31)	13	

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.

Denise C. Woodham
Signature of Candidate or Elected Official

7-9-12
Date

Sworn to and subscribed before me this _____ day of _____ of the year _____. My commission expires the _____ day of _____ of the year _____.

[Signature]
Signature of Notary Public

Berry Woodham
Print Notary's Name

Comm Exp. 5/7/14



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Denise (Dee) A. Warden

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.
DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

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		
<i>None</i>								
TOTAL CASH CONTRIBUTIONS THIS PAGE								<i>0</i>



FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Denise (Dee) A. Woodham

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.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)									SOURCE (CHECK ONE)				DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION	
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other				
None																	
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																	

FORM REVISED 9.2.2011

0



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FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Dezra A. L. L. L.

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		
<i>me</i>													
TOTAL EXPENDITURES THIS PAGE												0	

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