

Political Action Committee Campaign Finance Report SUMMARY FORM 1

RECEIVED JUL 27 2012

James W. Fuhrmeister Judge of Probate

Please Print in Ink or Type.			Type of Report (check one) Monthly Amended Monthly		
Name of Political Committee (as appears on Statement of Organization) Alabaster Professional Firefighters	PAC	√C		Amended Weekly	
Association Political Action Committee APFA	· · · · · · · · · · · · · · · · · · ·	For Monthly R	eports		
Address (as appears on Statement of Organization) Check box if reporting new address		Month in which	the		
P.O. Box 2303		report is filed. For Weekly Re	ports		
City State ZIP Code Telephone Nu	ımber	Date of Friday i	n the		
Alcabaster AL 3500> (205)36		week in which t report is filed.	ne	07-27-12	
111010944	0 0 1	Total Number			
		Pages in Repo	ıπ		
Summary of activity since last filed report					
1 Beginning balance (ending balance from previous filing)			1	13,808,37	
Cash Contributions					
2a Itemized cash contributions (total from Form 2)	2a	8			
2b Non-itemized cash contributions	2b	92]		
2c Non-itemized employee payroll contributions	2c	8			
2d Total cash contributions (add lines 2a, 2b, and 2c)		<u> </u>	2d	6	
In-Kind Contributions	1		<u> </u>		
3a Itemized in-kind contributions (total from Form 3)	3a	\(\psi \)]		
3b Non-itemized in-kind contributions	3b	4			
3c Total in-kind contributions (add lines 3a and 3b)	3c	Ø			
Receipts from Other Sources					
4a Total itemized receipts from other sources (total from Form 4)	4a	9			
4b Total non-itemized receipts from other sources	4b	4			
4c Total receipts from other sources (total from Form 4)			4c	Ø	
Expenditures			· · · · · · · · · · · · · · · · · · ·		
5a Itemized expenditures (total from Form 5)	5a	6 (SOO) OO			
5b Non-itemized expenditures	5b	Ø			
5c Total expenditures (add lines 5a and 5b)			5c	6,000,00	
6 Ending balance (add lines 1, 2d, & 4c, then subtract line 5c)]	·	6	7.808.37	
Sworn to and subscribed before me this	swear attach true a staten	or affirm to the best of med report(s) and the integration of the integral of the state of the correct and that this in	ny kno format nforma expend	aign Practices Act, I hereby whedge and belief that the ion contained herein are tion is a full and complete ditures, and other required od of time.	
Signature of Notary Public	Signat	ure of Chairperson or Treasur	er of Po	olitical Com- Date	

mittee

Printed Name of Notar MANUY B. HANDLON
MY COMMISSION EXPIRES
MARCH 5, 2014

FORM REVISED 10.27..2011



20120730000272860 275 \$.00 Shelby Cnty Judge of Probate, AL 07/30/2012 09:10:16 AM FILED/CERT

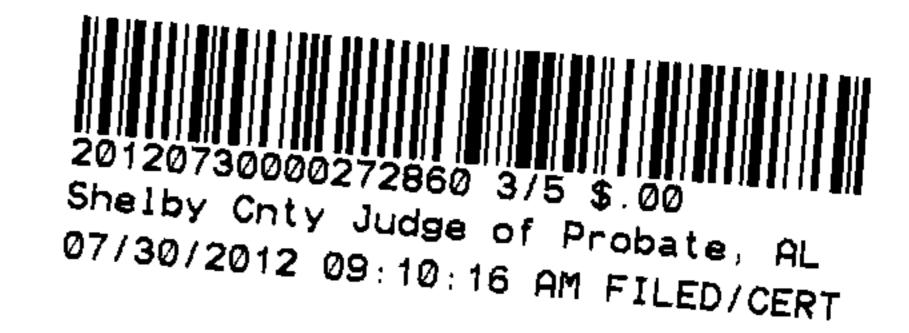
ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

FORM 2: Contributions received by political action committee

FORM REVISED 10.27.2011

NAME OF POLITICAL ACTION COMMITTEE: Alaborster Professional Five fighters Political Action Committee

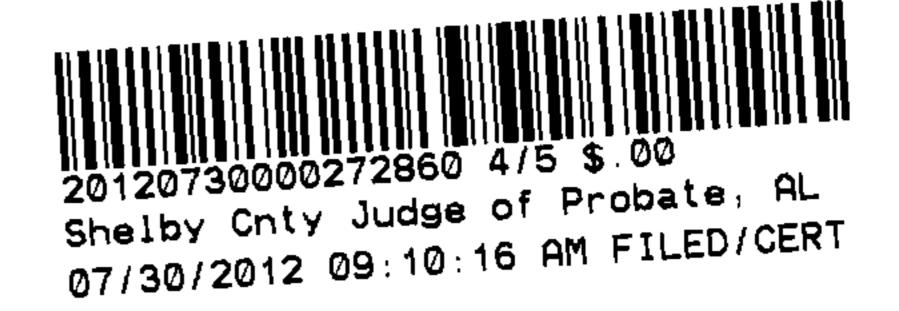
When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST in-kind contributions or loands on this form. Use Forms 3 and 4 for those listings. SOURCE OF CONTRIBUTION (CHECK ONE) **AMOUNT** ADDRESS DATE CONTRIBUTOR CONTRIBUTION OF (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED (mo./day/yr.) TOTAL CASH CONTRIBUTIONS THIS PAGE



ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

FORM 3: In-Kind Contributions received by political action committee NAME OF POLITICAL ACTION COMMITTEE: Alabastac Five Fightage Assertation Colline Action Committee

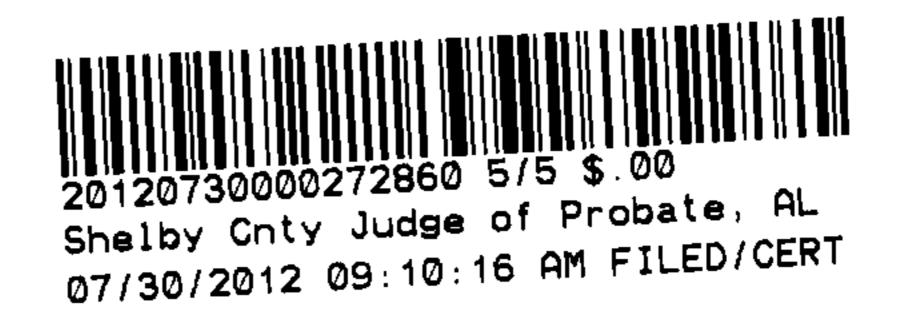
When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST cash contributions or loans on this form. Use Forms 2 and 4 for those listings. SOURCE NATURE OF CONTRIBUTION (CHECK ONE) (CHECK ONE) **AMOUNT** DATE **ADDRESS** CONTRIBUTOR OF CONTRIBUTION Consultants/ Polling Equipment Corporation Individual Other (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) Business (not a corpora STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED (mo./day/yr.) Food Rent TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011



ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

FORM 4: Receipts from Other Sources loans, interest, and other sources of income NAME OF POLITICAL ACTION COMMITTEE: Alabour Professional Freficher Assessing Political Action Countries

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 in-kind contributions on this form. Use Forms 2 and 3 for those listings. COMPLETE THIS BLOCK IF RECEIPT FORM RECEIPT SOURCE IS A LOAN OF RECEIPT (CHECK ONE) AMOUNT DATE ADDRESS SOURCE OF RECEIPT OF RECEIVED (ADDRESS SHOULD INCLUDE GUARANTORS (INCLUDE FULL NAME) (mo./day/yr.) RECEIPT STREET OR P.O. BOX, [FCPA REQUIRES FULL NAME AND CITY, STATE, AND ZIP) Other COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN] TOTAL RECEIPTS THIS PAGE FORM REVISED 10.27.2011

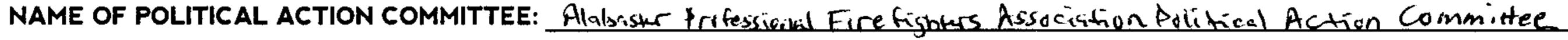


TOTAL EXPENDITURES THIS PAGE

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

FORM 5: Expenditures by political action committee

FORM REVISED 10.27.2011



When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

PURPOSE OF EXPENDITURE (CHECK ONE) PERSON/GROUP/BUSINESS **ADDRESS AMOUNT** DATE OF Administrative **OTHER** (ADDRESS SHOULD INCLUDE OF EXPENDITURE RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) **EXPENDITURE** GIVE (INCLUDE FULL NAME) **BRIEF EXPLANATION** 413 Sterling Darkein Alglosser, Al 35007 Mary Handlon 07-24-12