

FAIR CAMPAIGN PRACTICES ACT

Shelby Cnty Judge of Probate, AL

07/30/2012 10:31:17 AM FILED/CERT

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## RECEIVED

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

Please Print in Ink or Type.			
Name of Candidate or Elected Official Political Party/	Ballot Affiliation	Type of Report (chec	ск one) — Amended Monthly
Resumbichois		Weekly	Amended Weekly
Office Sought or Held (include district or circuit number, if applicable)	$\wedge$	For Monthly Report	
Address Check box if reporting new address	J+ C	Month in which the	
		report is filed.	
City State ZIP Code Telephone Nymber		For Weekly Reports Date of Friday in the	
City  City  A  State  ZIP Code Telephone Nymber  A  A  STATE  Telephone Nymber		week in which the report is filed.	74,6013
		Total Number of	-4
		Pages in Report	
Summary of activity since last filed report			
1 Beginning balance (ending balance from previous filing)		1	730.55
Cash Contributions			
2a Itemized cash contributions (total from Form 2)	2a		
2b Non-itemized cash contributions	2b		
2c Total cash contributions (add lines 2a and 2b)		2c	
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		
5b Non-itemized expenditures	5b		
Total expenditures (add lines 5a and 5b)		5c	
6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)		6	730.55
Candidates for State Office: File this report with the Office of the Se	ecretary of State	<b>3.</b>	
Candidates for County or Municipal Office: File this report with the	e Judge of Prob	ate of the county in v	which the office is sought.
/ 1	orn to and subsc	ribed before me this	27th day of
swear or affirm to the best of my knowledge and belief that the	lus of th	ne year <u>2012</u>	My commission expires

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

Date

\_day of <u>March</u> of the year <u>2013</u>

Signature of Notary Public

Print Notary's Name