Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

the state of the property was an interest the state of th

AUG 01 2012

James W. Fuhrmeister Judge of Probate

FORM 1 20120802000281680 1/1 \$.00 Shelby Cnty Judge of Probate, AL

08/02/2012 08:42:58 AM FILED/CERT Please Print in Ink or Type. Type of Report (check one) Political Party/Ballot Affiliation Name of Candidate or Elected Official Monthly Amended Monthly Republican Cerriplia Amended Weekly Weekly Office Sought or Held (include district or circuit number, if applicable) For Monthly Reports Hoover City Connact Month in which the July, 2012 Address Check box if reporting new address report is filed. 2153 Clearbrook Rd For Weekly Reports Date of Friday in the ZIP Code | Telephone Number State City week in which the Hoover 35226 report is filed. **Total Number of** Pages in Report Summary of activity since last filed report 641.80 Beginning balance (ending balance from previous filing) **Cash Contributions** Itemized cash contributions (total from Form 2) 2a Non-itemized cash contributions 2b Total cash contributions (add lines 2a and 2b) 0.00 In-Kind Contributions |3a| Itemized in-kind contributions (total from Form 3) **3**a 3b Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) 3c Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) 4a Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) 0.00 Expenditures Itemized expenditures (total from Form 5) **5**a 5b Non-itemized expenditures 5c Total expenditures (add lines 5a and 5b) O.00 6 641.80 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) Candidates for State Office: File this report with the Office of the Secretary of State. Candidates for County or Municipal Office: File this report with the Judge of Probate of the county in which the office is sought. 2111 Sworn to and subscribed before me this _____ 5/47 day of As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the . My commission expires of the year attached report(s) and the information contained herein are true and correct and that this information is a full and complete day of Cucust statement of all contributions, expenditures, and other required information during the applicable period of time.

17-31-12

Date

Signature of Notary Public

Print Notary's Name

Signature of Candidate of Elected Official