



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



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Shelby Cnty Judge of Probate, AL
08/06/2012 12:55:20 PM FILED/CERT

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AUG 03 2012

James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official

JACK K. COURSON

Political Party/Endorsement Affiliation

Type of Report (check one)

Monthly

Amended Monthly

☒ Weekly

Amended Weekly

Office Sought or Held (include district or precinct number, if applicable)

Leeds City Council District 5

City or County (check box if reporting on address)

PO Box 266

City

Leeds

State

AL

ZIP Code

35094

Telephone Number



For Monthly Reports

Month in which the report is filed

For Weekly Reports

Date of Friday in the week in which the report is filed

8-3-12

Total Number of Pages in Report

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	0
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	1000.00
2b	Non-itemized cash contributions	2b	0
2c	Total cash contributions (add lines 2a and 2b)	2c	1000.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	0
3b	Non-itemized in-kind contributions	3b	0
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	0
4b	Non-itemized Receipts from Other Sources	4b	0
4c	Total receipts from other sources (add lines 4a and 4b)	4c	0
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	600.00
5b	Non-itemized expenditures	5b	0
5c	Total expenditures (add lines 5a and 5b)	5c	600.00
6	Ending balance (add lines 1, 2c, & 4c then subtract line 5c)	6	400.00

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.

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

JACK K. COURSON 8-2-12

Date

Sworn to and subscribed before me this 2nd day of

August of the year 2012

My commission expires

the 25 day of January of the year

Signature of Notary Public

Larry R. Cate

Print Notary's Name



