



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

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AUG 10 2012

 James W. Fuhrmeister,
 Judge of Probate

 20120810000296020 1/5 \$.00
 Shelby Cnty Judge of Probate, AL
 08/10/2012 12:55:22 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official David Nichols		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) Mayor - Montevallo			
Address ☐ Check box if reporting new address P.O. Box 202			
City Montevallo	State AL	ZIP Code 35115	Telephone Number [REDACTED]

Type of Report (check one)

☐ Monthly☐ Amended Monthly☒ Weekly☒ Amended WeeklyFor Monthly Reports
Month in which the
report is filed.For Weekly Reports
Date of Friday in the
week in which the
report is filed.
Aug. 10, 2012
Total Number of
Pages in Report
5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	\$ 360.00
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	0
2b	Non-itemized cash contributions	2b	0
2c	Total cash contributions (add lines 2a and 2b)	2c	0
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	0
5b	Non-itemized expenditures	5b	0
5c	Total expenditures (add lines 5a and 5b)	5c	0
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	\$ 360.00

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.

David Nichols

Signature of Candidate or Elected Official

Date

 Sworn to and subscribed before me this **9** day of
August of the year **2012**. My commission expires
 the _____ day of **MY COMMISSION EXPIRES MAY 4, 2014**.

Kathy L. Yancy

Signature of Notary Public

Kathy L. Yancy

Print Notary's Name

FORM 2: Contributions received by candidate or elected officialNAME OF CANDIDATE OR ELECTED OFFICIAL: David Nichols

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>n/a</i>	<i>0</i>						<i>n/a</i>	<i>0</i>
							TOTAL CASH CONTRIBUTIONS THIS PAGE	<i>0</i>

FORM REVISED 9.2.2011



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David Nichols

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

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When total expenditures to a single recipient exceed \$100,000, the FCPA requires all expenditures to that recipient be itemized.

[illegible]

TOTAL EXPENDITURES THIS PAGE

FORM REVISED 3.2.2011



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