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FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Officiale Campaign Finance
SUMMARY FORM 1 Campaign Finance Report

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Please Print in Ink or Type.	Shelby Chty Judge of 08/20/2012 09:00:24 A	M FILED/CERT	
Name of Candidate or Elected Official	Political Party/Ballot Affiliation	ighe or report (check	
JUANITA J. CHAMPION		Monthly	Amended Monthly Amended Weekly
Office Sought or Held (include district or circuit number, if applicable)		Weekly	Alliended veckly
COUNCI		For Monthly Reports Month in which the	
		report is filed.	
Date of Frie		For Weekly Reports Date of Friday in the	8/17/12
State ZIP Code felephone Number week in		week in which the	
CHECSEA A/ 35043		report is filed. Total Number of	
		Pages in Report	/
Summary of activity since last filed report			
1 Beginning balance (ending balance from previou	ıs filing)	1	517.08
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	-0-
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	1 Form 4) 4a		
4b Non-itemized Receipts from Other Sources	4b		
4c Total receipts from other sources (add lines 4a a	ind 4b)	4c	0
Expenditures			
5a Itemized expenditures (total from Form 5)	5a		
5b Non-itemized expenditures	5b		
5c Total expenditures (add lines 5a and 5b)		5c	, - 0 -
6 Ending balance (add lines 1, 2c, & 4c, then subtract	ct line 5c)	6	19517.08
Candidates for State Office: File this report with the Office	ce of the Secretary of State	2	
Candidates for County or Municipal Office: File this rep			ch the office is sought.
As required by the Alabama Fair Campaign Practices Act, I herel	by Sworn to and subsc	ribed before me this/	72h day of
swear or affirm to the best of my knowledge and belief that the	he Amount of the	e year 20/2.	
attached report(s) and the information contained remain, a true and correct and that this information is a full and dampite			
true and correct and that this information is a full and damplete statement of all contributions, expenditures Cand other regions information during the applicable period of line OTAR 10 BONDED THRU NOTARY PUBLIC UNDERWRITERS			
intermation during the applicable period of the OlAR	2 Diche	1 C. Han	der
recutar, le trascipion // Signature of Notary Public			
Signature of Candidate of Elected Official Date OUBLIC	Si Honk	(Lar	ders
FORM REVISED 10 27.2011	Print Notary's Name	/	