

MONTHLY & WEEKLY


**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

 20120820000306460 1/5 \$.00
 Shelby Cnty Judge of Probate, AL
 08/20/2012 09:47:36 AM FILED/CERT

ICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

AUG 17 2012

James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official Leigh Hulsey		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) City Council Helena Place			
Address ☐ Check box if reporting new address 241 Chadwick Ln			
City Helena	State AL	ZIP Code 35080	Telephone Number

Type of Report (check one)

- ☐ Monthly ☐ Amended Monthly
☒ Weekly ☐ Amended Weekly

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.

8.17.12

Total Number of
Pages in Report

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	579.92
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	200
2b	Non-itemized cash contributions	2b	50
2c	Total cash contributions (add lines 2a and 2b)	2c	250
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	108
3b	Non-itemized in-kind contributions	3b	0
3c	Total in-kind contributions (add lines 3a and 3b)	3c	108
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	75
5c	Total expenditures (add lines 5a and 5b)	5c	75
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	754.92

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

Date

8/16/12

Sworn to and subscribed before me this 16th day ofAugust, My Commission Expires February 8, 2013. My commission expires

the _____ day of _____ of the year _____.

Patricia Parris Brown

Signature of Notary Public

Patricia Parris Brown

Print Notary's Name

FORM 2: Contributions received by political action committeeNAME OF POLITICAL ACTION COMMITTEE: Leigh Hulsay

When total contributions from a single source exceed \$100.00, the FCRA requires all contributions from that source to be itemized.
DO NOT LIST cash or in-kind contributions on this form. Use Forms 2 and 3 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		
Gail Houts	5913 Tule Dr Concord AL 35		✓				8.14.12	200.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								200.00



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NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)									DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation		
		TOTAL EXPENDITURES THIS PAGE										2

FORM REVISED 9.2.2011

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