

WEEKLY & MONTHLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA



20120827000319920 1/5 \$.00
Shelby Cnty Judge of Probate, AL
08/27/2012 09:15:45 AM FILED/CERT

Print Form

IR OFFICIAL USE ONLY

Political Action Committee Campaign Finance Report SUMMARY FORM 1

RECEIVED

AUG 24 2012

James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Political Committee (as appears on Statement of Organization) Alabaster Professional Firefighters Association Political Action Committee		Acronym for PAC APFAPAC	
Address (as appears on Statement of Organization) ☐ Check box if reporting new address P.O. Box 2303			
City Alabaster	State AL	ZIP Code 35007	Telephone Number (205) 988-1234

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.

Total Number of Pages in Report

08-24-12

5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	\$ 3,308.37
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	0	
2b	Non-itemized cash contributions	2b	0	
2c	Non-itemized employee payroll contributions	2c	0	
2d	Total cash contributions (add lines 2a, 2b, and 2c)	2d	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	Total itemized receipts from other sources (total from Form 4)	4a	0	
4b	Total non-itemized receipts from other sources	4b	0	
4c	Total receipts from other sources (total from Form 4)	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, 2d, & 4c, then subtract line 5c)	6	\$ 3,308.37	

Sworn to and subscribed before me this 24th day of Aug of the year 2012. My commission expires the 5th day of March of the year 2014.

Marty B. Handlon
Signature of Notary Public

MARTY B. HANDLON
Printed Name of Notary Public
MY COMMISSION EXPIRES MARCH 5, 2014

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]
Signature of Chairperson or Treasurer of Political Committee
Date 08-24-12



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ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

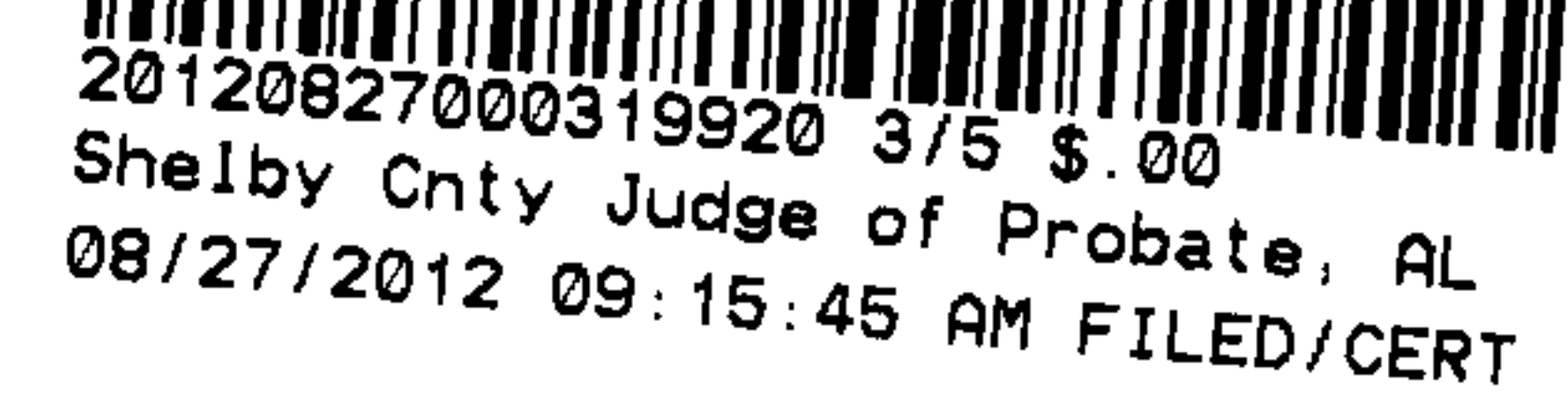
FORM 2: Contributions received by political action committee

NAME OF POLITICAL ACTION COMMITTEE: Alabaster Professional Firefighters Association Political Action Committee

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 (not a corporation)	Corporation	Individual	Other	Returned		
TOTAL CASH CONTRIBUTIONS THIS PAGE								0

FORM REVISED 10.27.2011

**FORM 3: In-Kind Contributions** received by political action committee

DO NOT LIST cash contributions or loans on this form. Use Forms 2 & 4 for those listings.												
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE AND ZIP.)	NATURE OF CONTRIBUTION (CHECK ONE)								SOURCE (CHECK ONE)	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Hiring	Equipment	Food	Rent	Transportation	Other			
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE												Ø

FORM REVISED 10-27-2011



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ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

FORM 4: Receipts from Other Sources loans, interest, and other sources of income

NAME OF POLITICAL ACTION COMMITTEE: Alabaster Professional Firefighters Association Political Action Committee

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 in-kind contributions on this form. Use Forms 2 and 3 for those listings.

DO NOT LIST cash or in-kind contributions on this form. Use Form 2 and 3 for those listings.								
SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX CITY STATE AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	RECEIPT SOURCE (CHECK ONE)	DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other	GUARANTORS [FOIPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSENG OR GUARANTEEING LOAN]	Lending Institution		
								TOTAL RECEIPTS THIS PAGE
FORM REVISED 10-27-2011 X								

FORM REVISED 10-27-2017

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

FORM 5: Expenditures by political action committee

NAME OF POLITICAL ACTION COMMITTEE: Alabama Professional Firefighters Association Political Action Committee



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	Consultant/Political	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
TOTAL EXPENDITURES THIS PAGE													