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RECEIVED AUG 3 1 2012 James W. Fuhrmeister Judge of Probate

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type. Type of Report (check one) Name of Candidate or Elected Official Political Party/Ballot Affiliation Amended Monthly Monthly Amended Weekly Weekly Office Sought or Held (include district or circuit number, if applicable) Pelham City Council Place 4 For Monthly Reports Month in which the Address Check box if reporting new address report is filed. 267 Strathaven LN. For Weekly Reports Date of Friday in the ZIP Code Telephone Number week in which the 35/24 report is filed. **Total Number of** Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) **Cash Contributions** Itemized cash contributions (total from Form 2) Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) In-Kind Contributions Itemized in-kind contributions (total from Form 3) Non-itemized in-kind contributions Total in-kind contributions (add lines 3a and 3b) Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) 4a Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) Expenditures Itemized expenditures (total from Form 5) 40,00 Non-itemized expenditures Total expenditures (add lines 5a and 5b) 5c Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) 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. Sworn to and subscribed before me this day of

As required by the Alabama Fair Campaign Practic	es Act, I hereby
swear or affirm to the best of my knowledge and	I belief that the
ettached report(s) and the information contain	ed herein are
true and correct and that this information is a ful	
statement of all contributions, expenditures, and	other required
information during the applicable period of time.	, /
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Date

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Signature	e of Notary	Public				
Ci	Ndy	61a	55			
Print Not	ary's Name					

FORM REVISED 9.2.201

Signature of Candidate or Elected Official