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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 Weekly Amended Weekly Office Sought or Held (include district or circuit number, if applicable) For Monthly Reports Month in which the Address Check box if reporting new address report is filed. Tandowood For Weekly Reports 1 itug : 31,2012 | Date of Friday in the ZIP Code Telephone Number State week in which the labaster 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 53.54 Total cash contributions (add lines 2a and 2b) **In-Kind Contributions** Itemized in-kind contributions (total from Form 3) 3a 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) 4C **Expenditures** Itemized expenditures (total from Form 5) Non-itemized expenditures 5b Total expenditures (add lines 5a and 5b) 170.00 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.

As required by the Alabama Fair Campaign Practices Act, I hereby Sworn to and subscribed before me this \_\_\_\_\_\_ day of

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

mons o	f the year <u>a01a</u>	My commission expires
the 6	ay of March of	the year <u>2013</u> .
Cindu	Hlass	
Signature of Notary	Public	
Cindu	G1a55	

Print Notary's Name