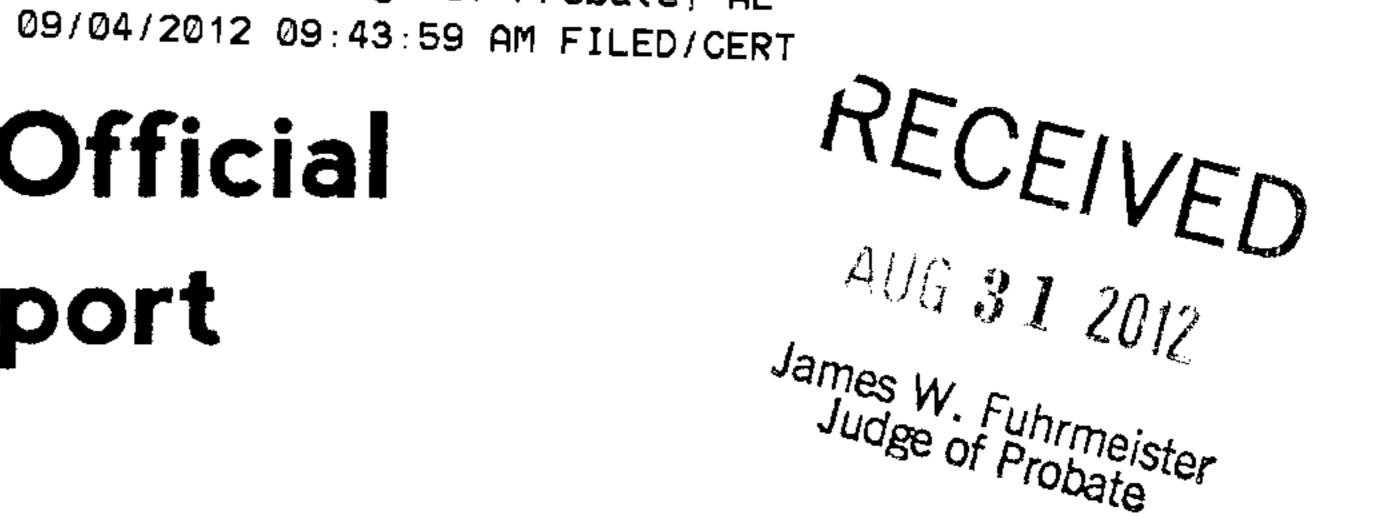
\$0.00

\$0.00

\$11,083.37



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 Charles W. Penhale Amended Monthly Monthly Weekiy Amended Weekly Office Sought or Held (include district or circuit number, if applicable) Mayor of Helena For Monthly Reports Month in which the Address Check box if reporting new address report is filed. P O Box 613 For Weekly Reports Date of Friday in the City State ZIP Code Telephone Number 08/31/2012 week in which the Helena 35080 AL report is filed. **Total Number of** Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) \$11,083.37 **Cash Contributions** Itemized cash contributions (total from Form 2) \$0.00 Non-itemized cash contributions \$0.00 Total cash contributions (add lines 2a and 2b) \$0.00 In-Kind Contributions Itemized in-kind contributions (total from Form 3) 3a \$0.00 Non-itemized in-kind contributions 3b \$0.00 Total in-kind contributions (add lines 3a and 3b) 3c \$0.00 Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) |4a \$0.00 Non-itemized Receipts from Other Sources \$0.00

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

Total receipts from other sources (add lines 4a and 4b)

Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)

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.

Itemized expenditures (total from Form 5)

Total expenditures (add lines 5a and 5b)

Non-itemized expenditures

Signature of Candidate or Elected Official

Sworn to and subscribed before me this day of
20/ Substant Hillie My commission Expires
the PATRICIA J. CHILDERS
ALABAMA STATE AT LARGE
THY COMMISSION EXPIRES JAN. 19, 2016
Signature of Notary Public I I I I I I I I I I I I I I I I I I I
PHTRICHU J. CIII GET

\$0.00

\$0.00

Print Notary's Name

5a

5b

Expenditures