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## Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.							•		
me of Candidate or Elected Official Political Party/E		aliot Affiliation Type		Type of	_	•			
Town Picklesined				<u></u>	Monthly			Amended Monthly	
Office Sought or Held (include district or circuit number, if applicable)				<u></u>	Week	-	Amer	ided Weekly	
City Council				For <b>Mo</b> n Month in	•	•			
Address Check box if reporting new address				report is filed.  For Weekly Reports Date of Friday in the week in which the report is filed.  Total Number of Pages in Report				· · · · · · · · · · · · · · · · · · ·	
1578 TANA DIVIVE								- <i>L</i> '	
City State ZIP Code Telephone Number 35051							8-31-12		
Summary of activity since last filed report									
1 Beginning balance (ending balance from previou	us filing)					1	35	R 100	
Cash Contributions									
2a Itemized cash contributions (total from Form 2)		2a							
2b Non-itemized cash contributions		2b		· · · · · · · · · · · · · · · · · · ·					
2c Total cash contributions (add lines 2a and 2b)						2c	-E		
In-Kind Contributions									
3a Itemized in-kind contributions (total from Form 3)		3a							
3b Non-itemized in-kind contributions		3b		<u> </u>					
3c Total in-kind contributions (add lines 3a and 3b)		3c							
Receipts from Other Sources									
4a Itemized Receipts from Other Sources (total from Form 4)		4a	<u> </u>						
4b Non-itemized Receipts from Other Sources		4b	·						
4c Total receipts from other sources (add lines 4a a	and 4b)					4c	6		
Expenditures									
5a Itemized expenditures (total from Form 5)		5a							
5b Non-itemized expenditures		5b							
5c Total expenditures (add lines 5a and 5b)						5c	-6		
6 Ending balance (add lines 1, 2c, & 4c, then subtra	ect line 5c)					6	358	,00	
Candidates for State Office: File this report with the Office									
Candidates for County or Municipal Office: File this rep			<i>'</i>		county	in wh	nich the of	fice is sough	

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the	Sworn to and subscribed before r	
attached report(s) and the information contained herein are	0/3/	
statement of all contributions, expenditures, and other required information during the applicable period of time.	the day of	X /
Signature of Candidate or Elected Official Date	Signature of Notary Public	

Date

My commission expires Signature of Notary Public Drink blakende bleese