THIS AREA FOR OFFICIAL USE ONLY

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Shelby Cnty Judge of Probate, AL 09/14/2012 12:59:05 PM FILED/CERT Please Print in Ink or Type. Type of Report (check one) Political Party/Ballot Affiliation Name of Candidate or Elected Official Amended Monthly Monthly N/A Jeffrey M. Denton Amended Weekly Weekly Office Sought or Held (include district or circuit number, if applicable) Chelsea City Council, Place 4 For Monthly Reports Month in which the report is filed. P.O. Box 581 For Weekly Reports Date of Friday in the 09/14/2012 Telephone Number ZIP Code State City week in which the 35043 AL Chelsea report is filed. **Total Number of** Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) \$20.00 **Cash Contributions** Itemized cash contributions (total from Form 2) 2a Non-itemized cash contributions Total cash contributions (add lines 2a and 2b) **In-Kind Contributions** Itemized in-kind contributions (total from Form 3) За Non-itemized in-kind contributions 3b \$35.00 Total in-kind contributions (add lines 3a and 3b) \$35.00 Receipts from Other Sources Itemized Receipts from Other Sources (total from Form 4) 4a 4b Non-itemized Receipts from Other Sources Total receipts from other sources (add lines 4a and 4b) **Expenditures** Itemized expenditures (total from Form 5) Non-itemized expenditures Total expenditures (add lines 5a and 5b) \$20.00 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 attached report(s) and the information contained herein are statement of the year 1010. My commission expires true and correct and that this information Lian will and complete of the year day of statement of all contributions and enditures; and other required information during the applicable period of time Signature of Notary Public

Print Notary's Name

NOTARY PUBLIC STATE OF ALABAMA AT LARGE

BONDED THRU NOTARY PUBLIC UNDERWRITERS

MY COMMISSION EXPIRES: Apr 1, 2013

FORM REVISED 10.27.2011

Candidate or Elected Official

PUBLIU