



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



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Shelby Cnty Judge of Probate, AL
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James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Sophie Martin</i>		Political Party/Ballot Affiliation	Type of Report (check one) ☐ Monthly ☐ Amended Monthly ☐ Weekly ☐ Amended Weekly
Office Sought or Held (include district or circuit number, if applicable) <i>Alabaster City Council Ward 1</i>			
Address ☐ Check box if reporting new address <i>219 Broadmoor Circle</i>			
City <i>Alabaster</i>	State <i>AL</i>	ZIP Code <i>35007</i>	Telephone Number [REDACTED]
For Monthly Reports Month in which the report is filed.			
For Weekly Reports Date of Friday in the week in which the report is filed.			<i>Aug. 31, 2012</i>
Total Number of Pages in Report			<i>1</i>

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<i>\$472.22</i>
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	
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	
3b	Non-itemized in-kind contributions	3b	
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	
4b	Non-itemized Receipts from Other Sources	4b	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	
6	Ending balance (add lines 1, 2c, & 4c. then subtract line 5c)	6	<i>\$472.22</i>

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 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.

Sophie Martin
Signature of Candidate or Elected Official
Date *9.11.12*

Sworn to and subscribed before me this *11th* day of *September* of the year *2012*. My commission expires the *6th* day of *March* of the year *2013*.

Cindy Glass
Signature of Notary Public
Cindy Glass
Print Notary's Name