FORM REVISED 10.27.2011

Juanita J. Cotrampeon

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

RECEIVED

SEP 1 0 2012

James W. Fuhrmeister Judge of Probate

Please Print in Ink or Type.	Shelby Cnty 09/14/2012	-		FILED/CERT		
Name of Candidate or Elected Official Political Party/		allot A	ffiliation	Type of Repor	•	
JUANITA S. CHAMPION				Mon		Amended Monthly
Office Sought or Held (include district or circuit number, if applicable)			· · · · · · · · · · · · · · · · · · ·	Wee	-	Amended Weekly
Council				For Monthly R Month in which	•	
Address			report is filed.			
P.O. 1304 247			For Weekly Re Date of Friday	•		
City State ZIP Code Telephone Number			week in which		7/27/12	
CHELSEA A/ 35043				report is filed.  Total Number	of	
				Pages in Repo		2
Summary of activity since last filed report						
1 Beginning balance (ending balance from previo	ous filing)				1	615.28
Cash Contributions				, ,,	-	
2a Itemized cash contributions (total from Form 2)		2a				
2b Non-itemized cash contributions		2b	18	0.00		
2c Total cash contributions (add lines 2a and 2b)					2c	7/5.28
In-Kind Contributions		······································	······		-	
3a Itemized in-kind contributions (total from Form	3)	3a	17	3.76)		
3b Non-itemized in-kind contributions		3b	9	3.26		
3c Total in-kind contributions (add lines 3a and 3b	) (	3c	9	3.26		
Receipts from Other Sources			•		_	
4a Itemized Receipts from Other Sources (total fro	m Form 4)	4a				
4b Non-itemized Receipts from Other Sources		4b				
4c Total receipts from other sources (add lines 4a	and 4b)				4c	0
Expenditures					_	
5a Itemized expenditures (total from Form 5)		5a	C			
5b Non-itemized expenditures		5b				
5c Total expenditures (add lines 5a and 5b)					5c	- 0 -
6 Ending balance (add lines 1, 2c, & 4c, then subtr	ract line 5c)		<u></u>		6	7/5.28
Candidates for State Office: File this report with the Of	fice of the Sec	creta	ry of Sta	ite		
Candidates for County or Municipal Office: File this re						
As required by the Alabama Fair Campaign Practices Act, I her	reby Swori	n to	and subs	cribed before me	this _	day of
swear or affirm to the best of my knowledge and belief that attached report(s) and the information contained herein		Jer	of 1	the year	<u>J</u>	My commission expires
true and correct and that this information is a full and comp	olete the	2	m da	v of - Oct	of th	e year <u>3013</u>
statement of all contributions, expenditures, and other requires the applicable period of time	uired	<del> </del>	$10^{\circ}$			<del></del>
information during the applicable period of time.						
Signature of Candidate or Elected Official Date  Signature of Notary Rublic						
John Con Contragate of Encountry			100	ISTI T. AM	NELL	

Print Notary's Name