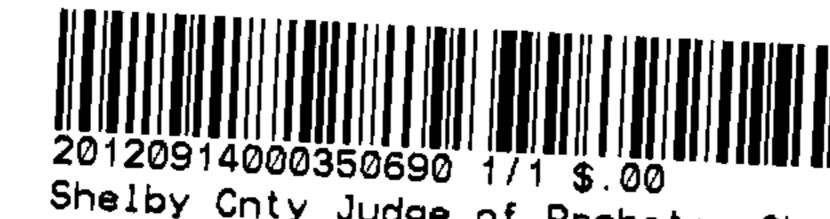
## Candidate & Elect Campaign Finance SUMMARY FORM 1 Candidate & Elected Official Campaign Finance Report

## RECEIVED

0.51 10 2012

James W. Fuhrmeister Judge of Probate

Please Print in Ink or Type.		Time of Bon	art (chack	one)
Matte of Calididate of Elected Cincia.	Party/Ballot Affiliation	Type of Report (check of Monthly		Amended Mont
JUANITA J. CHAMPION		Weekly		Amended Week
Office Sought or Held (include district or circuit number, if applicable)		For Monthly	Reports	
Address Check box if reporting new address		Month in whi report is filed		
		For Weekly		
P.O. Boy 247  City State ZIP Code Telephone Number		Date of Friday in the week in which the		8/17/12
CHELSEA A1 35043		report is filed	1.	
		Total Number Pages in Re		/
Summary of activity since last filed report				
1 Beginning balance (ending balance from previous filin	ıg)		1	715.28
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	0
In-Kind Contributions			<del></del>	
3a Itemized in-kind contributions (total from Form 3)	3a			
3b Non-itemized in-kind contributions	3b	5.94		
3c Total in-kind contributions (add lines 3a and 3b)	3c	5.94		
Receipts from Other Sources				
4a Itemized Receipts from Other Sources (total from Forr	n 4) 4a			
4b Non-itemized Receipts from Other Sources	4b			
4c Total receipts from other sources (add lines 4a and 4t	o)		4c	0
Expenditures			<u> </u>	
5a Itemized expenditures (total from Form 5)	5a			
5b Non-itemized expenditures	5b			
5c Total expenditures (add lines 5a and 5b)			5c	<b>O</b> **
6 Ending balance (add lines 1, 2c, & 4c, then subtract line	• 5c)		6	715.28
Candidates for State Office: File this report with the Office of the	ne Secretary of Sta	ite.		
Candidates for County or Municipal Office: File this report with			inty in wh	uch the office is so
As required by the Alabama Fair Campaign Practices Act, I hereby	Sworn to and subs	cribed before r	ne this	oh day o
swear or affirm to the best of my knowledge and belief that the	_Sept of	the year $\frac{\partial v}{\partial t}$	12.	My commission ex
attached report(s) and the information contained herein are true and correct and that this information is a full and complete	222	v of () (+	of the	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
statement of all contributions, expenditures, and other required		2		·
information during the applicable period of time.		Kyntt	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
Signature of Candidate or Elected Official Date	Signature of Notary P	ublic		
Signature of Candidate or Elected Official // Date '	VI	in T.	ATHE	il.
FORM REVISED 10.27.2011	Print Notary's Name			
		4		
				**************************************
franta J. Colomycon				**



Shelby Cnty Judge of Probate, AL 09/14/2012 12:59:31 PM FILED/CERT