



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

SEP 21 2012

Please Print in Ink or Type.

James W. Fuhrmeister
Judge of Probate

Name of Candidate or Elected Official David M. Frings		Political Party/Ballot Affiliation N/A		Type of Report (check one) ☐ Monthly ☒ Weekly ☐ Amended Monthly ☐ Amended Weekly	
Office Sought or Held (include district or circuit number, if applicable) Mayor of City of Alabaster					
Address ☐ Check box if reporting new address 2122 Diane Circle					
City Alabaster, AL	State AL	ZIP Code 35007	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.	
				Total Number of Pages in Report	
				5	

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	5,493.36
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	500.00	
2b	Non-itemized cash contributions	2b	0.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	500.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	0.00	
3b	Non-itemized in-kind contributions	3b	67.00	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	67.00	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	0.00	
4b	Non-itemized Receipts from Other Sources	4b	0.00	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	0.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	184.71	
5b	Non-itemized expenditures	5b	89.20	
5c	Total expenditures (add lines 5a and 5b)	5c	273.91	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	5,719.45	

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.

David M. Frings
 Signature of Candidate or Elected Official
 Date **9/21/2012**

Sworn to and subscribed before me this **21st** day of **September** of the year **2012**. My commission expires the **8th** day of **May** of the year **2016**.

Lisa Traywick Morgan
 Signature of Notary Public
Lisa Traywick Morgan
 Print Notary's Name

David M. Frings

NAME OF CANDIDATE OR ELECTED OFFICIAL:

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.

DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
Donald & Barbara Hazard	1090 Crest Road Leeds, AL 35094		X				9/18/2012	500.00
							TOTAL CASH CONTRIBUTIONS THIS PAGE	500.00



20120921000361800 2/5 \$.00
Shelby Cnty Judge of Probate, AL

FORM REVISED 10.27.2011



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Shelby Cnty Judge of Probate, AL
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ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL



FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: David M. Frings

When total contributions from a single source exceed \$100.00, the FCRA requires all contributions from that source to be itemized.
DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)									SOURCE (CHECK ONE)				DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other			
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																0.00

20120921000361800 3/5 \$.00
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ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: David M. Frings

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)										DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
		Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
FedEx office	3260 Galleria Cir. Hoo Wee Bay AL 35244		X										184.71
TOTAL EXPENDITURES THIS PAGE												184.71	