

Shelby Cnty Judge of Probate, AL 09/28/2012 01:54:16 PM FILED/CERT REA FOR OFFICIAL USE ONLY

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

Please Print in Ink or Type.		T	(-b1
Name of Candidate or Elected Official Political Party/	Ballot Affiliation	Type of Report  Month	`
David M. Frings  Office Severble and Minde district or circular type of populacidades		Week	· · · · · · · · · · · · · · · · · · ·
Office Sought or Held (include district or circuit number, if applicable)		For Monthly Re	
Address Check box if reporting new address		Month in which treport is filed.	he
City  City  State  ZIP Code Telephone Number 1997		For Weekly Rep Date of Friday in	1
City State ZIP Code Telephone Null Alabate At. 35007	mber	week in which the report is filed.	
		Total Number o Pages in Repor	
Summary of activity since last filed report			
1 Beginning balance (ending balance from previous filing)			1 5.719.45
Cash Contributions			
2a Itemized cash contributions (total from Form 2)	2a	750.00	
2b Non-itemized cash contributions	2b	0.00	
2c Total cash contributions (add lines 2a and 2b)			2c 1 750,00
In-Kind Contributions		<b></b>	
3a Itemized in-kind contributions (total from Form 3)	3a	0.00	
3b Non-itemized in-kind contributions	3b	0.00	
3c Total in-kind contributions (add lines 3a and 3b)	3c	0.00	
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)		4	1c 0.00
Expenditures		<b>_</b>	
5a Itemized expenditures (total from Form 5)	5a -# 3	468.97	
5b Non-itemized expenditures	5b	0.00	
5c Total expenditures (add lines 5a and 5b)			5c # 3,468,97
6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			6 3.000.48
Candidates for State Office: File this report with the Office of the Se	ecretary of State.		
Candidates for County or Municipal Office: File this report with the	e Judge of Proba	te of the county	in which the office is sought.
As required by the Alabama Fair Campaign Practices Act, I hereby Swo	rn to and subscril	oed before me t	his 38th day of
swear or affirm to the best of my knowledge and belief that the $\mathcal{L}_{\mathcal{A}}$			My commission expires
true and correct and that this information is a full and complete	1 th down	MOACH	-64b-11
statement of all contributions, expenditures, and other required	day of	1, 1	_ Of the year <u>Coor</u> .
statement of all contributions, expenditures, and other required information during the applicable period of time.  Signature of Candidate or Elected Official  Signature of Candidate or Elected Official	inde L	Hass	
Signature of Candidate or Elected Official  JARIAU 2 Signature  Jarian Signature of Candidate or Elected Official	ature of Notary Public	C	
Signature of Candidate of Elected Chicial	LINdu	0/255	

Print Notary's Name



ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Devi & M. Frings

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

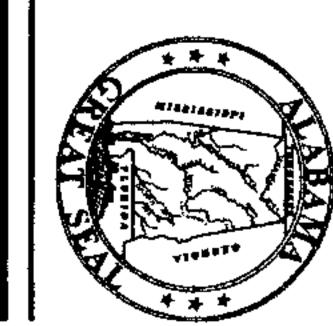
DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

750.00	HIS PAGE	- 1	SNO	UT	RIB	TOTAL CASH CON	FORM REVISED 10.27.2011
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200.00	9/27/2012					Alexander City Al. 35010	ALIANT/PAC
50,00	9/27/2012					Alabaster A 35007	Pavid & Carolyn Stewart
500,00	9/25/2012		<b>X</b>			1673 mortgonery they Joy MB112 Birningham Al. 35216 MB112	Alabana Economic Development PAC
CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Returned	PAC Other	Individual	Business or Corporation	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
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## ALABAMA FAIR CAMPAIGN PRACT **ICES** ACT CAMPAIGN FINANCE REPORT FOR ANDID ELEC. TED

#### FORM 3: In-Kind **n** 0 ntri O ions received ĥф candidate 9 ected official

NAME OF CANDIDATE OR ELECTED When total contributions from a single s OFFICIAL: source exceed \$100.00, 3 8 the **FCPA** requires contributions from that source ರ be itemized.



FORM REVISED 10.27.2011 CONTRIBUTOR (INCLUDE FULL NAME) STREET ADDRESS (ADDRESS SHOULD INCLUDE T OR P.O. BOX, CITY, STATE, AND ZIP) cash or loans Shelby Cnty Judge of Probate, AL 09/28/2012 01:54:16 PM FILED/CERT on this form. Administrative TOTAL **NATURE** Advertising Use Consultants/ Polling Form マナ (CHEC Equipment ONTRIBUTION KONE) S Food N and Rent CONTRIBUTIONS ₫ Transportation Other Business/ listings. Corporation SOURCE (CHECK ONE) Individual PAC THS Other ONTRIBUTION **PAGE** RECEIVED (mo./day/yr.)

# ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

# Receipts from O ther Sources loans, interest, and other sources <u>o</u> incor

NAME OF CANDIDATE OR ELECTED OFFICIAL: When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source **DO NOT LIST** cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings. David Pr. 300 to be itemized.

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RECEIPT	RECEIVED (mo./day/yr.)	Business Other	Individual	PAC	Lending Institution	GUARANTORS  [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Other	Interest Loan	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
		JRCE	CK ON	CEIP	ᇛ	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	RMCEIPT	우 RE		

# ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE Qο ELECTED OFFICIAL

### NAME OF CANDIDATE OR ELECTE FORM 5: Expendit O ures by OFFICIAL: candidate or elected official



When total expenditures to a single recipient exceed \$100.00, the FCPA requires Fring

all expenditures

to that recipient be itemized.

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