

REA FOR OFFICIAL USE ONLY

RECEIVED

SEP 27 2012

James W. Fuhrmeister Judge of Probate

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.					Type o	f Repor	t (check	cone)		
Nai	ie di Calididate di Elected Official	Political Party/	Ballot A	Affiliation	ر. آ	Mon			mended Mo	nthly
	Lell, Washburn			<u> </u>	L	 □ We∈	•		mended We	ekly
Office Sought of Held (include district or circuit number, if applicable)					For Mo	 onthly R	Reports		·	
Address The Check box if reporting new address					Month	in which	-			
			ſ		report i	s nied. ekly Re	enorts	[
City Code Telephone Number 100 State ZIP Code State			mber		Date of	f Friday	in the		1201	
Leeds AL 35094					week if report i	n which is filed.	tne		12011	
			·· <u>·</u>		Total N	otal Number of ages in Report			<u></u>	
S	ummary of activity since last filed report					•				
1	Beginning balance (ending balance from previous						1		15. 3 ⁴	
 '-	Cash Contributions		1				L	<u></u>		
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									
3a	Itemized in-kind contributions (total from Form 3)		3a			··,. <u>.</u>				
3b	Non-itemized in-kind contributions		3b		·					
3c	Total in-kind contributions (add lines 3a and 3b)		3c		<u></u>					
	Receipts from Other Sources			,		· <u>-</u>				
4a	Itemized Receipts from Other Sources (total from	Form 4)	4a	. <u> </u>						
4b	Non-itemized Receipts from Other Sources		4b			;				
4c	Total receipts from other sources (add lines 4a ar	nd 4b)					4c		>	
	Expenditures			. <u> </u>			•			
5a	Itemized expenditures (total from Form 5)		5a	.						
5b	Non-itemized expenditures		5b				<u></u>			
5c	Total expenditures (add lines 5a and 5b)						5c		<u> </u>	
6	Ending balance (add lines 1, 2c, & 4c, then subtrac	t line 5c)			-		6	75	5.34	
	ndidates for State Office: File this report with the Office andidates for County or Municipal Office: File this report					count	y in wh	ich the	office is s	ought.
swe	equired by the Alabama Fair Campaign Practices Act, I hereby ar or affirm to the best of my knowledge and belief that the ched report(s) and the information contained herein are	e _	rn to a	and subsc	ribect be c	ore me	(Mis	My cor	nmission e	of xpires

Signature of Notary

Print Notary's Name

Date

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.

Signature of Candidate or Elected Official