## FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

Please Print in Ink or Type.							
Nan	ne of Candidate or Elected Official	Political Party/	Bailot Affiliation	Type of Repor	•	-	d Monthly
	MRK HALL	Kep		Wee	-	Amende	d Weekly
	Sought or Held (include district or circuit number, if applicable)  WAYOR TO HELD  Tess Check box if reporting new address		For Monthly Reports  Month in which the report is filed.		SEPTEM	RER	
6	207 St Chala IN		For Weekly Re	-			
City		mber	Date of Friday week in which				
ł	-leleng - Az 35080	4		report is filed.	~£		
	•			Total Number Pages in Repo		1	
S	ummary of activity since last filed report						
	Beginning balance (ending balance from previo	ous filing)			1	1.60) 4	9
	Cash Contributions				_		
2a	Itemized cash contributions (total from Form 2)	<del> </del>	2a 7				
1	Non-itemized cash contributions		2b				
	Total cash contributions (add lines 2a and 2b)				2c		
	In-Kind Contributions					• •	
3a	Itemized in-kind contributions (total from Form	3)	3a 0				
3b	Non-itemized in-kind contributions	·	3b '				
3c	Total in-kind contributions (add lines 3a and 3b)	)	3c	,, , , , , , , , , , , , , , , , , , ,			
	Receipts from Other Sources		,		1		
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		
	Expenditures	,		<u></u>	<b>T</b>		
5a	Itemized expenditures (total from Form 5)		5a /	<u></u>			
5b	Non-itemized expenditures		5b /		<u> </u>		
	Total expenditures (add lines 5a and 5b)			•	5c		5
6	Ending balance (add lines 1, 2c, & 4c, then subtra	act line 5c)			6	4601	
Ca	ndidates for State Office: File this report with the Off	ice of the Se	ecretary of State	<u>ئ</u>			
Ca	ndidates for County or Municipal Office: File this re	eport with the	Judge of Prob	ate of the coun	ly in whi	ch the office	is sought.
Asr	equired by the Alabama Fair Campaign Practices Act, I her			ribed before me			
swe atta	ar or affirm to the best of my knowledge and belief that ched report(s) and the information contained herein	are S	pr. of th	e year 2012		My commissi	on expires
true and correct and that this information is a full and complete the LU day of TANUX of the year LAL.							
statement of all contributions expenditures, and other required information during the applicable period of time.							
	11/1/1/1/1/1/1/2011					<u> </u>	
Sign	ature of Candidate or Elected Official Date		ature of Notary Pul	1.00			`
-		<u> </u>	VATT VI	MI WC	71 J	<del>, , , , , , , , , , , , , , , , , , , </del>	
FORM	MY COMMISSION EXPIRES: June 11, 2 BONDED THRU NOTARY PUBLIC UNDERWRI	014	Notary's Name				

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Shelby Cnty Judge of Probate, AL

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