FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA



20121022000405140 1/1 \$.00 Shelby Cnty Judge of Probate, AL 10/22/2012 02:38:12 PM FILED/CERT OR OFFICIAL USE ONLY

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OCT 15 2012

James W. Fuhrmeister Judge of Probate

Candidate	& Elect	ed Official
Campaign	Finance	Report
SUMMARY	FORM 1	

Please Print in Ink or Type.					
	Political Party/Ballo	•	Type of Report (check Monthly		ck one) Amended Monthly
Jimmy UL-BICE Repub		CAN	Weekly For Monthly Reports Month in which the report is filed.		Amended Weekly
Office Sought or Held (include district or circuit number, if applicable) Sheliy Co., Bol., B. Ed. Place Address Ckeck box if reporting new address		<u>. </u>			<u> </u>
130 Thiple B-D1-			For Weekly Re	ports	\
City State ZIP Code Telephone Number			Date of Friday i week in which t		
Montevallo Al. 35115		report is filed. Total Number of			
			Pages in Repo		
Summary of activity since last filed report					
1 Beginning balance (ending balance from previou	s filing)			1	1278,64
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	
In-Kind Contributions					
3a Itemized in-kind contributions (total from Form 3)	3a				
3b Non-itemized in-kind contributions	3b				
3c Total in-kind contributions (add lines 3a and 3b)					
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 a	nd 4b)			4c	
Expenditures					
5a Itemized expenditures (total from Form 5)	5a				
5b Non-itemized expenditures	5b				
5c Total expenditures (add lines 5a and 5b)				5c	···
6 Ending balance (add lines 1, 2c, & 4c, then subtract	ct line 5c)			6/	1278,64
Candidates for State Office: File this report with the Office		•			
Candidates for County or Municipal Office: File this rep					
As required by the Alabama Fair Campaign Practices Act, I herek swear or affirm to the best of my knowledge and belief that the			cribed before me	_	· · · · · · · · · · · · · · · · · · ·
attached report(s) and the information contained herein a			_		My commission expires
true and correct and that this information is a full and complet statement of all contributions, expenditures, and other require	te the 8	day	y of YY Cu	4 of t	the year 2016.
information during the applicable period of time.	~ <u> </u>)	1) L	
Jumy M. Bue 10/19/12 Signature of Notary Public Over					/1/2/ga-
Signature of Candidate or Elected Official Date					
		Sa I	Muich	<u> </u>	Norgan

Print Notary's Name

FORM REVISED 9.2.2011