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## RECEIVED

OCT 26 2012

James W. Fuhrmeister Judge of Probate

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

	Please Print in Ink or Type.						
Office Sought or Held (include district or circuit number, if applicable)  MAUN			Type of Report (check   Monthly     Weekly   For Monthly Reports   Month in which the		one)  Amended Monthly  Amended Weekly		
Address Check box if reporting new address  City Sea A 35143			Total Number		ports n the he	10-2	6-17
S	ummary of activity since last filed report			Pages in Repo			
1	Beginning balance (ending balance from previous filing)				1	10111 6	$\mathbf{C}$
	Cash Contributions					11076	
·	Itemized cash contributions (total from Form 2)	2a					
	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					
<del></del>	Non-itemized in-kind contributions	3b	<del>,,_,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>				
3c	Total in-kind contributions (add lines 3a and 3b)	3c					
	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)				4c		
Expenditures							
5a	Itemized expenditures (total from Form 5)	5a					
5b	Non-itemized expenditures	5b		7972V77U2 86 771872/18 7728874 (1974)			
5c	Total expenditures (add lines 5a and 5b)				5c		
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c	;)			6	1846	7
Car	didates for State Office: File this report with the Office of the S	Secreta	ry 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

Signature of Candidate or Elected Official

October of the year 2012. My commission expires NOTARY PUBLIC STATE OF ALABAMA AT LARGE MY GOMMISSION EXPIRES: Apr the West the BONDED/THRU NOTARY, PUBLIC UNDERWRITERS Signature of Notary Public

Print Notary's Name