

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

NOV 06 2012

James W. Fuhrmeister Judge of Probate

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het	Δ - Δ - Δ	cal Party/B	allot Affiliation	Type of Report (che	eck one)
	MELISSA B. Hosetta	-		Monthly	Amended Monthly
Of	fice Sought or Held (include district or circuit number if applicable)			Weekly	Amended Weekly
	TOUN Council			For Monthly Repor	ts
Ad	Idrass Check box if reporting new address			Month in which the report is filed.	(t.
CII	State ZIP Code Telepi	hone Num	ber	For Weekly Reports Date of Friday in the week in which the report is filed.	1
				Total Number of Pages in Report	
S	ummary of activity since last filed report				
1	Beginning balance (ending balance from previous fil	ling)		1	
	Cash Contributions			<u> </u>	
2a	Itemized cash contributions (total from Form 2)		2a		
2b	Non-itemized cash contributions		2b		
	Total cash contributions (add lines 2a and 2b)	-		2c	
	In-Kind Contributions			[20]	
3a	Itemized in-kind contributions (total from Form 3)		a		`
***************************************	Non-itemized in-kind contributions	 	b		
	Total in-kind contributions (add lines 3a and 3b)		C		
	Receipts from Other Sources				
	Itemized Receipts from Other Sources (total from For	rm 4) 4	la	······································	
	Non-itemized Receipts from Other Sources		b		
· · · · · · · · · · · · · · · · · · ·	Total receipts from other sources (add lines 4a and 4				
	Expenditures	+5)		4c	
·	Itemized expenditures (total from Form 5)		а]	
	Non-itemized expenditures		b		
	Total expenditures (add lines 5a and 5b)		D		
-		ne 5c)		5c	
		· · · · · · · · · · · · · · · · · · ·	······································	0	
	ndidates for State Office: File this report with the Office of		•		
	ndidates for County or Municipal Office: File this report w			······································	
18P We	equired by the Alabama Fair Campaign Practices Act, I hereby ar or affirm to the best of my knowledge and belief that the			ribed before me this	
attached report(s) and the information contained herein are NOVEMBE of the year <u>&O/&</u> . My commission expires					
rue and correct and that this information is a full and complete $+ $					
statement of all contributions, expenditures, and other required the <u>IIII day of Peb,</u> of the year <u>XVIT</u> . Information during the applicable period of time.					
			Kay 7	n. Kau	
Sign	ature of Candidate or Elected Official Date	Signatu	ire of Notary Pul	olic	······································
		K	an M	Ray	
QRM	1 REVISED 10.27.2011	Print No	otary's Name		