


**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

20121115000439050 1/1 \$.00
Shelby Cnty Judge of Probate, AL
11/15/2012 01:59:03 PM FILED/CERT

Print Form

FOR OFFICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

NOV 07 2012

James W. Fuhrmeister,
Judge of Probate

Please Print in Ink or Type.

Name of Candidate or Elected Official <u>Mark McLaughlin</u>		Political Party/Ballot Affiliation <u>N/A</u>	
Office Sought or Held (include district or circuit number, if applicable) <u>Mayor of Westover</u>			
Address <input type="checkbox"/> Check box if reporting new address <u>250 McLaughlin Lane</u>			
City <u>Westover</u>	State <u>AL</u>	ZIP Code <u>35147</u>	Telephone Number <u>[REDACTED]</u>

Type of Report (check one)

☒ Monthly

Amended Monthly

Weekly

Amended Weekly

For Monthly Reports

Month in which the
report is filed.September 2012

For Weekly Reports

Date of Friday in the
week in which the
report is filed.Total Number of
Pages in Report

1	Beginning balance (ending balance from previous filing)		1	<u>32.21</u>
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	<u>0</u>	
2b	Non-itemized cash contributions	2b	<u>0</u>	
2c	Total cash contributions (add lines 2a and 2b)	2c	<u>0</u>	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	<u>0</u>	
3b	Non-itemized in-kind contributions	3b	<u>0</u>	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<u>0</u>	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<u>0</u>	
4b	Non-itemized Receipts from Other Sources	4b	<u>0</u>	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<u>0</u>	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	<u>0</u>	
5b	Non-itemized expenditures	5b	<u>0</u>	
5c	Total expenditures (add lines 5a and 5b)	5c	<u>0</u>	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<u>32.21</u>	

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

Date

Sworn to and subscribed before me this 1st day of
November of the year 2012. My commission expires
the 16th day of April of the year 2014.

Signature of Notary Public

Print Notary's Name