

FAIR CAMPAIGN PRACTICES ACT Shelby Cnty Judge of Probate, AL STATE OF ALABAMA 01/30/2013 12:23:52 PM FILED/CERT



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A FOR OFFICIAL USE ONLY

JAN 3 0 2013

Political Action Committee Campaign Finance Report SUMMARY FORM 1A

	Pieas	e Print in In	k or Type.				_				
P	ame of Political Committee (as appears of Nabaster Professiona)	Firefic	thters	Acronym for				ar Year d by this r	eport.	2012	, <u> </u>
Ad	A SSociation Political dress (as appears on Statement of Organical	nization)	Check how if repor	APFA	PHL				,—— ,		
	P.O. Box 2303		Officer box if repor	ung new aquie	:55					Amended Annual Rep	port
	F. C. GOX ZJOJ									ermination Report	
Cit	ty	State	ZIP Code	Telephone N	umber	 -		ages in F	•		
	Alabaster	AI	35007	(205)	a . 1 c	. .	Include your cou	this page	: in		
		<u> </u>			0 6	1//					
S	ECTION I - Summary of a	activity f	rom last file	ed report	thro	ugh	December	31 of 1	repoi	ting year	
1	Beginning balance (ending bal	lance from	previous filing)					1 4	9.490.74	
Í 	Cash Contributions							· !		1,110.11	<u>,</u>
2a	Itemized cash contributions (to	otal from Fo	rm 2)	······································	2a	3	5,560,0	OC			
2b	Non-itemized cash contribution	ns		·	2b		Ø				
2c	Non-itemized employee payro	II contributi	ons		2c	·	os				
2d				······································		·····			2d 🗯	5 610 00	
	In-Kind Contributions	<u> </u>						1	20	5,560.00	
3a	Itemized in-kind contributions	(total from f	Form 3)	······································	3a	- ·	Ø				
3b	Non-itemized in-kind contributi	ions			3b	<u> </u>	<u> </u>				
3с	Total in-kind contributions (add	l lines 3a ai	nd 3b)		3c		d				
	Receipts from Other Sources			· - · · · · · · · · · · · · · · · · · · 	 					•	
4a	Total itemized receipts from otl	her sources	(total from Fo	orm 4)	4a	<u>*</u>	19.77	·			
	Total non-itemized receipts from				4b		d				
	Total itemized receipts from other			and 4h)			<u> </u>			b 10 55	· · ·
	Expenditures		1000 11105 40	and 40)	-			4	c ·	- 17.//	
5a	Itemized expenditures (total from	om Form 5)	- 		5a	•	16 000				
	Non-itemized expenditures		**************************************	· · · · · · · · · · · · · · · · · · ·	5b		15,000.	30			
	Total expenditures (add lines 5	a and 5b)		· · · · · · · · · · · · · · · · · · ·	30					<u> </u>	
	Ending balance (add lines 1, 2c	· -	subtract line	50)	-				C E	15000.00	
									j 3	70.51	
7	Beginning balance (se of leave	activity it	or enfire te	porting y	ear -	Jar	nuary 1st th	rough	Dece	ember 31st	i
	Beginning balance (as of Janua		orting year)	···-·-					7 1	4 9,490.74	
	Total cash contributions for year		<u> </u>			·	······································		3	5,560.00)
	To the state of th	· · · · · · · · · · · · · · · · · · ·			9		Ø				
	Total expenditures for	es for year	<u> </u>	······································				1	0	* 19.77	7
	Total expenditures for year	0 40	¬===+		 			_ 1	1	* 15,000.0	0
12	Ending balance (add lines 7, 8,	& 10, then	subtract line	11)				1	2	\$ 70.51	
13	Total campaign debt (total debt	owed as o	f December 31		13		8				
mirm ne in s a fu	equired by the Alabama Fair Campaign to the best of my knowledge and belinformation contained herein are true an all and complete statement of all contribeted information during the applicable	ef that the att id correct and ibutions, expe	ached report(s) a that this informat enditures, and oth	ind ion year -	to and	<u>3_</u>	. My commission ex	$\frac{30}{130}$	1/2 do +K	ay of March	e of
Signa	ature of Chairperson or Treasurer of F	Political Com-		3	Notary's	de	1 0	(5)			

FORM 2: Contributions received by political action committee

NAME OF POLITICAL ACTION COMMITTEE: Alabaster Professional Firefighters Association Political Action Committee

	ONTRIBUTOR		kind contributions on this form. Use For		SC F CON) UR(CE	ON	
(INC	CLUDE FULL NAME)	STREET	DDRESS SHOULD INCLUDE OR PO BOX, CITY, STATE, AND ZIP)	Business or Corporation	Individual	PAC	Other	CONTRIBUTION (mo /day.	JTION OF CONTRIBUTION
	Professional SS Association	P.O. Box Alabaster	2303 AL 35007				X	01-11-1	2 1.720.0
• •							X	03-12-1	# ^
1 1	1						X	05-25-	
1							X	07-11-12	
1			!				×	09-10-	1.260.0
	······································								
<u> </u>									
RM REVISED 9	0.2.2011		TOTAL CASH	CONTRIE	3UT	O	NS -	THIS PAGE	5.560.

FORM 3: In-Kind Contributions received by political action committee

NAME OF POLITICAL ACTION COMMITTEE: Alabashe Professional Fire Supples Association Political Action Committee

When total	al contributions from a single source exceed \$100.0 DO NOT LIST cash or in-kind contribution	00, th	ie Fi	CPA	(ACI	iroe :	all co	antrik	a utio	no fre	2 mg 44			e to be itemized.	
CONTRIBUTOR	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR PO BOX, CITY, STATE, AND ZIP)		NAT	URE (ONT:		JTION	\	•	SOU CHEC			DATE CONTRIBUTION RECEIVED (mo /day/yr)	AMOUNT OF CONTRIBUTION
(INCLUDE FULL NAME)		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other		
			_												
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REVISED 9 2 2011		TO	TA	L IN	I-KI	ND	CC	TNC	RIE	3UT	101	VS	THI	S PAGE	Ø

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FORM 4: Receipts from Other Sources loans, interest, and other sources of income

NAME OF POLITICAL ACTION COMMITTEE: Alabashe Professional Firefighter Association Political Action Committee

SOURCE OF RECEIPT	ADDRESS		FOR		ON this form. Use Forms 2 and 3 for the COMPLETE THIS BLOCK IF RECEIPT IS A LOAN		ECEI	PT S					
(INCLUDE FULL NAME)	(ADDRESS SHOULD INCLUDE STREET OR PO. BOX, CITY, STATE, AND ZIP)	Interest	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending Institution	Lending Institution	PAC	Individual	Business	Other	RECEIVED (mo /day/yr)	
		X DORSING OR GUARANTEEING LOAN) DOS-1	03-31-12	# 8.									
		X									06-30-12	9 9.2	
		X									09.30-12	# 2.1	
······································													
												<u> </u>	
<u> </u>													
REVISED 9 2 2011					TOTAL RECE	IPT	ST	HIS	S PA	AGE	≘	19 -	



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FORM 5: Expenditures by political action committee

NAME OF POLITICAL ACTION COMMITTEE: Alabaser Professional Finishes Asserted Ballion Assert Counties

ABAAA

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PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR PO BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	Contribution	DO0	undraising	oan epayment	odging	ransportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo /day/yr.)	AMOUNT OF EXPENDITURE
Mary Handlon	413 Sterling Park Cir Alabastar, Al 35007				X	ш.		ے مد		Ţ		07-24-12	B 6,000,0
Morry Hendley	413 Sterling Pork Cir Alabane AL 35007				X								
Nomded women	P.O. BOX 758 517 Topeka, 16cmsas 66675										Charity		Z.000.00
Mary Honelon for Meyor	413 Starling Pork Cir Alabaster, AL 35007				X								\$ Z,500,06
													
RM REVISED 9 2 2011					TO	ΤΔΙ		X DI	= NIF	ידו	JRES THIS P	A C F	<u> </u>



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