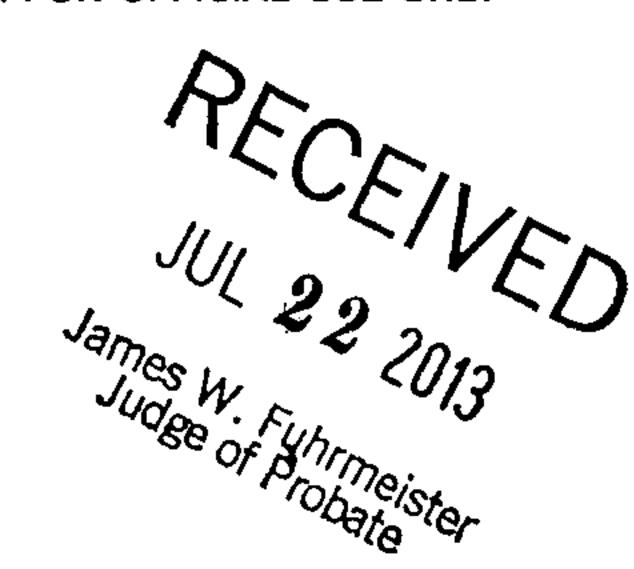
Signature of Candidate or Elected Official

FORM REVISED 10.27.2011



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



	Please Print in Ink or Type.			•
Nar	ne of Candidate or Elected Official Political ACAMIN Political	itical Party/Ballo Affiliation	Type of Report (check of Monthly Weekly	ne) Amended Monthly Amended Weekly
	ress = Check box if reporting new address		For Monthly Reports Month in which the	June 2
400	250 MS/aughlinLane	2	report is filed. For Weekly Reports Date of Friday in the	
City	Jester John AL 35147	ephone Number	week in which the report is filed. Total Number of	
		•	Pages in Report	
S	ummary of activity since last filed report			
1	Beginning balance (ending balance from previous	filing)	1	24.71
	Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a —		
2b	Non-itemized cash contributions	2b	0	
2c	Total cash contributions (add lines 2a and 2b)		2c	2
	In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a - C		
3b	Non-itemized in-kind contributions	3b -		
3c	Total in-kind contributions (add lines 3a and 3b)	3c		
	Receipts from Other Sources		Chalby Cn	00298700 1/1 \$.00 ty Judge of Probate, Al
4a	Itemized Receipts from Other Sources (total from F	Form 4) 4a	07/23/201	3 08:10:16 AM FILED/CE
4b	Non-itemized Receipts from Other Sources	4b		
4c	Total receipts from other sources (add lines 4a and	d 4b)	4c	-0-
	Expenditures		······································	
5a	Itemized expenditures (total from Form 5)	5a		-
5b	Non-itemized expenditures	5b	0	
5c	Total expenditures (add lines 5a and 5b)		5c	
6	Ending balance (add lines 1, 2c, & 4c, then subtract	line 5c)	6	24.71
State Office of the Secretary of State. State 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. Sworn to and subscribed before me this				

Signature of Notar Public

Print Notary's Name