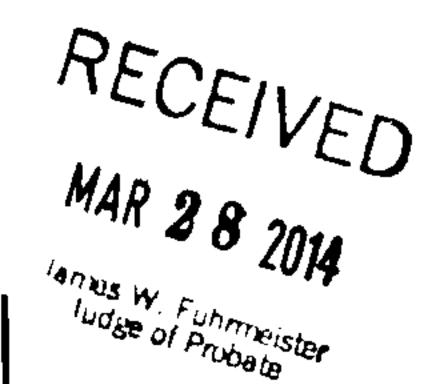
FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report



	She	1by Cnty Judge of Probate	, AL	
Please Print in Ink or Type.		31/2014 02:21:56 PM FILED		
Name of Candidate or Elected Official Diana Steele New Repub		Allination	thly	Amended Weekly
Office Sought or Held (include district or circuit number, if applicable) Shelby Contact Coronel		For Monthly R	,	L
Address Check box if reporting new address		Month in which report is filed.	-	March 2014
19429 River Drive		For Weekly Re	-	
City State ZIP Code Telephone Num Shelby At 35143	mber	Date of Friday week in which report is filed.		
		Total Number Pages in Repo		5
Summary of activity since last filed report				
1 Beginning balance (ending balance from previous filing)			1	300,00
Cash Contributions				
2a Itemized cash contributions (total from Form 2)	2a	D		
2b Non-itemized cash contributions	2b	P	1	
2c Total cash contributions (add lines 2a and 2b)			2c	Ø
In-Kind Contributions				
3a Itemized in-kind contributions (total from Form 3)	3a	D		
3b Non-itemized in-kind contributions	3b	D		
3c Total in-kind contributions (add lines 3a and 3b)	3c	8		
Receipts from Other Sources		<u> </u>	J	
4a Itemized Receipts from Other Sources (total from Form 4)	4a	D		
4b Non-itemized Receipts from Other Sources	4b	Ø		
4c Total receipts from other sources (add lines 4a and 4b)			4c	D
Expenditures			<u> </u>	
5a Itemized expenditures (total from Form 5)	5a	D		
5b Non-itemized expenditures	5b	Ø	1	
5c Total expenditures (add lines 5a and 5b)			5c	B
6 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			6	300,00
Candidates for State Office: File this report with the Office of the Se	ecret	ary of State.		
Candidates for County or Municipal Office: File this report with the			y in w	hich the office is sought.
swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are	AC	and subscribed before me of the year 00/ day of Macce	<u>↓</u>	. My commission expires
1) in Stule new 1122014		of Wotery Public		

Date

Print Notary's Name

Signature of Candidate or Elected Official

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE ELECTED OFFICIAL

Contribu utions received by candidate or elected official

NAME OF CANDIDATE OR ELECT TED OFFICIAL: Diana Steele requires all contributions from that source to be itemized

	HIS PAGE	サ	SNO		RIBC	TOTAL CASH CONTRI		RM REVISED 10.27.2011
CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	Returned	Other	PAC	Individual	Business or Corporation	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
AMOUNT		<u>2</u>	ONE)	OURC ECK O	်င္ဝင္တ	QF.		
	to be itemized.	urce s.	nat so listing	m tha	s fro	00, the FCPA requires all contributions ins on this form. Use Forms 3 and 4 for	ons from a single source exceed \$100.00, the FCPA red NOT LIST in-kind contributions or loans on this form.	When total contribution DO

20140331000090800 2/5 \$.00 Shelby Cnty Judge of Probate, AL 03/31/2014 02:21:56 PM FILED/CERT

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

FORM 3: In-Kind Contributions received by candidate or elected official NAME OF CANDIDATE OR ELECTED OFFICIAL: Diana Steele New

DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those hattings.	ingle source exceed \$100.00, the FCPA requires all contributions	

	HIS PAGE		RIBUTIONS			S N			=		7					ORM REVISED 10.27.2011
20140331000																
										<u></u> -						
CONTRIBUTION	CONTRIBUTIO RECEIVED (mo./day/yr.)	PAC Other	Individual	Business/ Corporation	Other	Transportation	Rent	Food	Polling Equipment	Consultants/	Advertising	Administrative	ADDRESS S SHOULD INCLUDE BOX, CITY, STATE, AND 2	(ADDRESS SHET OR P.O. BOX	STRE	(INCLUDE FULL NAME)
-	4	ONE)	SOUR(<u>က</u> ် (၃		NOIL	(m)	$\mathcal{Q}^{\mathbf{Z}}$	CHECK	TURE	N N					

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ALABAMA FAIR CAMPAIGN PRACTICES ACT CAMPAIGN FINANCE REPOR. FOR CANDIDATE/ELECTED OFFICIAL

FORM 4: Receipts rom 9 ources loa sources 9

NAME OF CANDIDATE OR ELECTED OFFICIAL: \$100.00, the FCPA requires all contributions from that source to be itemizec

When total contrib

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source

exceed

Use

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FORM REVISED 10.27.2011 SOURCE OF RECEIPT (INCLUDE FULL NAME) (ADI ADDRESS

DDRESS SHOULD INCLUDE

STREET OR P.O. BOX,

CITY, STATE, AND ZIP) DO NOT LIST cash or in-kind contributions on this form OF RECEIPT Interest Loan Other [FCPA REQUIRES FULL NAME AND COM-PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] COMPLETE **GUARANTORS** IS A LOAN TOTAL RECEIPT RECEIPTS Lending Institution RECEIPT SOURC (CHECK ONE) PAC SIHT Individual **Business** PAGE Other (mo RECEIPT

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ALABAMA FAIR CAMPAIGN PRAC TICES MPAIGN FINANCE REPORT FOR NDIDATE Qο

FORM 5: Expenditures by candidate or elected offi

NAME OF CANDIDATE OR ELECTED OFFICIAL: DIQUA Steele

When total expenditures

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CPA

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expenditures

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FORM REVISED 10.27.2011 PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) STREET INCLUDE STATE, AND ZIP) Administrative Advertising Consultants/ Polling Charitable Contribution PURPOSE OF E JATO. Food Fundraising EXPENDITURE Loan EXPENDITURE KONE) Repayment Lodging Transportation OTHER GIVE BRIEF LANATION S **HIS** PA DATE G П EXPENDITURE

20140331000090800 5/5 \$.00 Shelby Cnty Judge of Probate, AL 03/31/2014 02:21:56 PM FILED/CERT