

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

James W. Fuhrmeister Judge of Probate

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Please Print in Ink or Type.	Political Party/E			Type of Report	t (check	one)
Traine of Carlanda of Library			/ (IIIIRZEOII	Mon		Amended Monthly
Office Sought or Held (include district or circuit number, if applicable)	repui	راه	Can	Wee	kly	Amended Weekly
Shelby County Coroner				For Monthly R	eports	
Address			•	Month in which report is filed.	the	April 2014
			į.	For Weekly Re	ports	
19429 River Drive City State ZIP Code	Telephone Nur	nber		Date of Friday	in the	
5 Nella 35143				week in which to report is filed.	iie	
			<u> </u>	Total Number	of	
			·	Pages in Repo	ort	
Summary of activity since last filed report					<u> </u>	· · · · · · · · · · · · · · · · · · ·
1 Beginning balance (ending balance from previo	us filing)				1	300.00
Cash Contributions	<u> </u>				7	
2a Itemized cash contributions (total from Form 2)	<u>.</u>	2a		8		•
2b Non-itemized cash contributions		2b		DE .		
2c Total cash contributions (add lines 2a and 2b)	<u> </u>				2c	<u>8</u>
In-Kind Contributions	<u> </u>				-	
3a Itemized in-kind contributions (total from Form 3	3)	3a	<u> </u>	8		
3b Non-itemized in-kind contributions		3b	·			
3c Total in-kind contributions (add lines 3a and 3b)		3с		9	j	
Receipts from Other Sources					•	
4a Itemized Receipts from Other Sources (total from	m Form 4)	4a				
4b Non-itemized Receipts from Other Sources		4b		0		
4c Total receipts from other sources (add lines 4a	and 4b)				4 c	<u> </u>
Expenditures				·	_	
5a Itemized expenditures (total from Form 5)		5a		D		
5b Non-itemized expenditures	· · · · · · · · · · · · · · · · · · ·	5b		0		·
5c Total expenditures (add lines 5a and 5b)					5c	
6 Ending balance (add lines 1, 2c, & 4c, then subtra	act line 5c)				6	<u> 200</u>
Candidates for State Office: File this report with the Offi	ice of the Se	cret	ary of State.			
Candidates for County or Municipal Office: File this re	port with the	Juc	ige of Probat	e of the count	ty in wh	ich the office is sought.
As required by the Alabama Fair Campaign Practices Act, I here	eby Swo	m to	and subscrib	ed before me	this	29th day of
swear or affirm to the best of my knowledge and belief that	the 1	لما	u 0 of the	vear 20	14	My commission expires
attached report(s) and the information contained herein true and correct and that this information is a full and complete	lata	_				
statement of all contributions, expenditures, and other requi			aay ot		1 of the	e year <u>2016</u> .
information during the applicable period of time.	, .		1/201	Maria	▼	
(1) and Stule New 14/29/	Sign	ature	of Notary Publi	c	<u> </u>	<u></u>
Signature of Candidate or Elected Official Date		1	\			

Print Notary's Name

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE Qο ECTED OFFICIAL

Contributions received by candidate 9 ted ficial

NAME OF CANDIDATE OR ELECTED OFFICIAL: When total contributions from a single source exceed \$100.00, the FCPA Stea contributions from that source ០ þ

DO NOT LIST in-kind contributions or loans on this form

Use

Forms

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those listings

itemized

FORM REVISED 10.27.2011 (INCLUDE FULL NAME) ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND TOTA ASH CONTRIBUTIONS **Business** or **Q** Corporation SOURCE CONTRIBUTION (CHECK ONE) Individual PAC Other Returned TIS (mo./day/yr.) PAGE RIBUTIO EIVED ONTRIBUTION

201405050000133260 2/5 \$.00 201405050000133260 2/5 \$.00 Shelby Cnty Judge of Probate, AL 05/05/2014 12:44:34 PM FILED/CERT

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

Contributions received by ca indidate or elected

NAME OF CANDIDATE OR ELECT ED OFFICIAL: official

When total contributions from a single source exceed \$100.00, the FCPA requires

DO NOT LIST cash or loans on this form. Use Forms 2 Use Forms 2 and 4 for those listings. all contributions from that source to be itemized

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e, AL													
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CONTRIBUTION	CONTRIBUTION RECEIVED (mo./day/yr.)	PAC Other	Individual	Business/ Corporation	Other	Transportation	Food Rent	Equipment	Consultants/ Polling	Advertising	Administrative	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	(INCLUDE FULL NAME)
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ALABAMA FAIR CAMPAIGN PRAC TICES ACT CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

下の取工 4: Receipts rom 9 Sour 00 S loai ns, interest, and other sources of

NAME OF CANDIDATE OR ELECT OFFICIAL Vtool o

FORM REVISED 10.27.2011 SOURCE OF RECEIPT (INCLUDE FULL NAME) When total contributions from a single (ADDRESS STREET CITY, ST 0 IST AND ZIP) cash INCLUDE BOX, Source or in-kind contributions on this form exceed 읶 Interest RECEIPT Loan \$100.00, Other the F FCPA REQUIRES FULL NAME AND COM-PLETE ADDRESS OF INDIVIDUAL(S) EN-DORSING OR GUARANTEEING LOAN] COMPLETE **GUARANTORS** equires THIS BLOCK IF RECEIPT IS A LOAN Use Forms 2 and 3 for those listings. all contributions TOTAL RECEIPTS from that source Lending Institution RECEIPT SOURCE (CHECK ONE) PAC THIS Individual ថ Business be PAGE Other itemizeo (mo RIC EIVED 20140505000133260 4/5 \$.00 Shelby Cnty Judge of Probate, AL 05/05/2014 12:44:34 PM FILED/CERT

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

NAME OF CANDIDATE OR ELECTED OFFICIAL: FORM 5: 5: Expenditures by candidate or elected official Note or elected official Note or elected official Note or elected official Note or elected official numbers of the control of the control

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EXPENDITURE	EXPENDITURE (mo./day/yr.)	OTHER GIVE BRIEF EXPLANATION	Transportation	Repayment Lodging	Fundraising Loan	Food	Charitable Contribution	Consultants/ Polling	Advertising	Administrative	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)
		RE	בום	K ONE)	OSE OF EX	RPOS	P					