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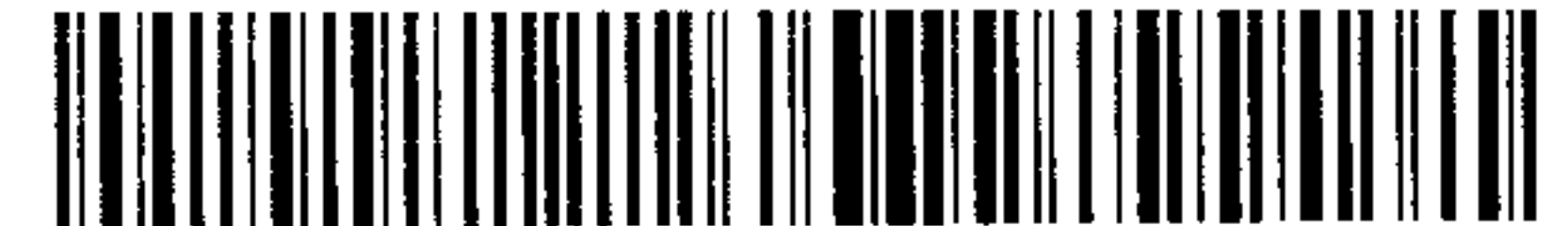

**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

MONTHLY & WEEKLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED

MAY 30 2014

James W. Fuhrmeister
Judge of Probate
 20140602000164930 1/5 \$.00
 Shelby Cnty Judge of Probate, AL
 06/02/2014 01:40:47 PM FILED/CERT

Please Print in Ink or Type.

Type of Report (check one)

- ☐ Monthly ☐ Amended Monthly
☒ Weekly ☐ Amended Weekly

For Monthly Reports

Month in which the report is filed.

For Weekly Reports

Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

Name of Candidate or Elected Official <i>Diana Steele New</i>		Political Party/Ballot Affiliation <i>Republican</i>	
Office Sought or Held (include district or circuit number, if applicable) <i>Shelby County Coroner</i>			
Address ☐ Check box if reporting new address <i>19429 River Drive</i>			
City <i>Shelby</i>	State <i>AL</i>	ZIP Code <i>35143</i>	Telephone Number <i>[REDACTED]</i>

*5-30-2014**5*

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	<i>279.00</i>
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	<i>0</i>
2b	Non-itemized cash contributions	2b	<i>0</i>
2c	Total cash contributions (add lines 2a and 2b)	2c	<i>0</i>
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	<i>0</i>
3b	Non-itemized in-kind contributions	3b	<i>0</i>
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<i>0</i>
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	<i>0</i>
4b	Non-itemized Receipts from Other Sources	4b	<i>0</i>
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<i>0</i>
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	<i>0</i>
5b	Non-itemized expenditures	5b	<i>0</i>
5c	Total expenditures (add lines 5a and 5b)	5c	<i>0</i>
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<i>279.00</i>

Candidates for State Office: File this report with the Office of the Secretary of State.

Candidates for County or Municipal Office: File this report with the Judge of Probate 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 30th day of May of the year 2014. My commission expires the 25th day of Oct of the year 2017.

[Signature]
Signature of Notary Public

Kristi T. Atwell
Print Notary's Name

Diana Steele New *5-30-14*
Signature of Candidate or Elected Official Date



FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: *Diana Steele New*

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)								SOURCE (CHECK ONE)				DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other		
		TOTAL IN-KIND CONTRIBUTIONS THIS PAGE													



FORM REVISED 10.27.2011

