



# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

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OCT - 6 2014

James W. Fuhrmeister  
Judge of Probate

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OCT - 6

James W. Fuhrmeister  
Judge of Probate

Please Print in Ink or Type.

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 <input type="checkbox"/> 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>

## Type of Report (check one)

☐ Monthly☐ Amended Monthly☒ Weekly☐ Amended WeeklyFor 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*10-6-2014**5*

## Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	<i>279.00</i>
<b>Cash Contributions</b>				
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>	
<b>In-Kind Contributions</b>				
3a	Itemized in-kind contributions (total from Form 3)	3a	<i>1,000.00</i>	
3b	Non-itemized in-kind contributions	3b	<i>0</i>	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<i>1,000.00</i>	
<b>Receipts from Other Sources</b>				
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>1,000.00</i>	
<b>Expenditures</b>				
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.

*Diana Steele New* *10/6/14*  
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this *6<sup>th</sup>* day of *October* of the year *2014*. My commission expires the *16<sup>th</sup>* day of *March* of the year *2015*.

*Kimberly A. Melton*  
Signature of Notary Public

*Kimberly A. Melton*  
Print Notary's Name

# FORM 2: Contributions received by candidate or elected official



**When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.**

**DO NOT LIST** in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

[illegible]



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: \_\_\_\_\_



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  (Donated)
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other		
Dale D. New New Advertising	891 Longhorn Lane Columbiana, AL 35051		X								X			10-04-14	(Donated) 10' X 24' (X 4) Billboards continued 250.00 X 4 = 1,000.00
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE														1,000.00	

20141007000315360 3/5 \$.00  
 Shelby Cnty Judge of Probate, AL  
 10/07/2014 02:00:53 PM FILED/CERT

NAME OF CANDIDATE OR ELECTED OFFICIAL: Diana Steele New

**DO NOT LIST** cash or in-kind contributions on this form. Use Forms 2 and 3 for those listings.

[illegible]

NAME OF CANDIDATE OR ELECTED OFFICIAL: Diana Steele New

**PERSON/GROUP/BUSINESS  
RECEIVING EXPENDITURE  
(INCLUDE FULL NAME)**

**ADDRESS**  
(ADDRESS SHOULD INCLUDE  
STREET OR P.O. BOX, CITY, STATE, AND ZIP)

**PURPOSE OF EXPENDITURE**  
(CHECK ONE)

**DATE OF  
EXPENDITURE**  
(mo./day/yr.)

**AMOUNT  
OF  
EXPENDITURE**

20141007000315360 5/5 \$.00  
Shelby Cnty Judge of Probate: AL  
10/07/2014 02:00:53 PM FILED/CERT

**TOTAL EXPENDITURES THIS PAGE**

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