

MONTHLY &amp; WEEKLY


**FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA**

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1


 20141031000344850 1/5 \$.00  
 Shelby Cnty Judge of Probate: AL  
 10/31/2014 03:56:19 PM FILED/CERT

 RECEIVED  
 OCT 31 2014  
 James W. Fuhman  
 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  
☒ Weekly  
☐ Amended Monthly  
☐ 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**

<i>10-31-2014</i>
<i>5</i>

**Summary of activity since last filed report**

1	Beginning balance (ending balance from previous filing)	1	<i>230.05</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>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>
<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>0</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>230.05</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.

<i>Diana Steele New</i>	<i>10/31/14</i>
Signature of Candidate or Elected Official	Date

 Sworn to and subscribed before me this *31st* day of *October* of the year *2014*. My commission expires the *8th* day of *May* of the year *2016*.

<i>Lisa J. Morgan</i>
Signature of Notary Public

<i>Lisa T. Morgan</i>
Print Notary's Name

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 in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.**

[illegible]

NAME OF CANDIDATE OR ELECTED OFFICIAL: Diana Steele New

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.**

[illegible]



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

**When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.**

[illegible]