. ALABAMA FAIR CAMPAIGN PRACTICES ACT

Name of Candidate or Elected Official

Signature of Notary Public

Print Notary's Name

CANDIDATE / ELECTED OFFICIAL ANNUAL REPORT SUMMARY FORM 1A

RECEIVED 16N 0 9 2018

Please Print in Ink or Type.

Ji	m Fuhrmeister Re	ep.		ŀ		20180	11200	0014030 1/5 \$ 00	
	ice Sought or Held (include district or circuit number, if applicable) Lelby County Judge of Probate		•			Sueip	y Cht	y Judge of Probate, AL 02:32:46 PM FILED/CERT	
Add	dress Check box if reporting new address Box 1266				X	Туре	of Re	eport (check one) or Year2017	
Cit		lephone Nu	mber			Termination	n Rep	ort	
<u></u>	lumbiana AL 35051					Amended A	Annua	Report for Year	
SI	ECTION I - Summary of activity from last filed	report	thro	ugh De	cem	ber 31 o	rep	orting year	
1	Beginning balance (ending balance from previous	filing)					1	\$185.9	6
	Cash Contributions						_		
2 a	Itemized cash contributions (total from Form 2)		2a			\$0.00			
2b	Non-itemized cash contributions		2b			\$0.00			
2c	Total cash contributions (add lines 2a and 2b)				•		2c	\$0.00	ַם
	In-Kind Contributions								
3a	Itemized in-kind contributions (total from Form 3)		3a		•	\$0.00			
3b	Non-itemized in-kind contributions		3b			\$0.00			
3с	Total in-kind contributions (add lines 3a and 3b)		3с			\$0.00			1
	Receipts from Other Sources					-	,		
4	Total receipts from other sources (total from Form	4)					4	\$0.00	5
	Expenditures								
5a	Itemized expenditures (total from Form 5)		5a						
5b	Non-itemized expenditures	_	5b			\$0.00			
5c	Total expenditures (add lines 5a and 5b)						5c	\$0.00	Ŋ
6	Ending balance (add lines 1, 2c, & 4, then subtract l	line 5c)					6	\$185.96	5
SE	ECTION II - Summary of activity for entire repo	orting y	ear	- Januar	y 1:	st throug	h De	cember 31st	
7	Beginning balance (as of January 1 of reporting ye	ear)					7	\$185.96	5
8	Total cash contributions for year						8	\$0.00	7
9	Total in-kind contributions for year		9	_		\$0.00			٦
10	Total receipts from other sources for year		-				10	\$0.00	기
11	Total expenditures for year						11	<u></u>	1
12	Ending balance (add lines 7, 8, & 10, then subtract l	line 11)					12	\$185.96	;
	Total campaign debt (total debt owed as of December					\$0.00			
L	orn to and subscribed before me this day of My commission exp	•	hereb	y swear or	affiri	m to the bes	t of my	ampaign Practices Act, knowledge and belief the	at

Political Party/Ballot Affiliation

statement of all contributions, expenditures, and other required

FORM REVISED 10.29.99

the attached report(s) and the information contained herein are

true and correct and that this information is a full and complete

information during the applicable period of time.

Signature of Candidate or Elected Official

FORM 2: CONTRIBUT SNOI RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Jim Fuhrmeister PAGE

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The FCPA requires that those contributions greater than \$100 be itemized. DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

FORM REVISED 10.29.99		2018 She II 01/12	01120000 by Cnty 3 2/2018 02	4030 2/5 udge of :32:46 P	\$.00 Probate FILED/O	AL		N/A	UDE FULL 1			
TOTAL CASH CONT									(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)		
				· ———					Business or Corporation	유		
RIBUTIONS									Individual	ର ପ		
Ö									PAC	SOURCE ONTRIBU		
ſ									Other	RIBUTION K ONE)		
THIS	<u> </u>								Returned	z		
S PAGE									DATE CONTRIBUTION RECEIVED (mo./day/yr.)			
\$0.00									AMOUNT OF CONTRIBUTION			

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FORM 3: IN-KIND NTRIBU RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Jim Fuhrmeister

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FORM REVISED 10.29.99 N/A The FCPA requires that those contributions greater than \$100 20180112000014030 3/5 \$.00 Shelby Cnty Judge of Probate. AL 01/12/2018 02:32:46 PM FILED/CERT (INCLUDE FULL NAME) CONTRIBUTOR (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) **ADDRESS** be itemized. **TOTAL IN-KIND CONTRIBUTIONS THIS** Administrative 00 NATURE OF CONTRIBUTION (CHECK ONE) Advertising NOT Consultants/ Polling LIST Equipment Food cash Rent or loans Transportation Other on this form. Business/ Corporation SOURCE (CHECK ONE) Individual PAC Other Use CONTRIBUTION Forms PAGE (mo./day/yr.) RECEIVED N and 4 for those listings. AMOUNT OF CONTRIBUTION \$0.00

Alabama Fair Campaign Practices Act

FORM 4: RECEIPTS FROM SOURCES

NAME OF CANDIDATE / ELECTED OFFICIAL: Jim Fuhrmeister

The FCPA requires that those contributions greater than \$100 be itemized. DO NOT LIST cash or in-kind contributions

LOANS/INTEREST/OTHER SOURCES OF INCOME TO CANDIDATE OR ELECTED OFFICIAL

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on this form. Use

Forms

2 and 3 for those listings.

FORM REVISED 10.29.99 N/A SOURCE OF RECEIPT (INCLUDE FULL NAME) Judge of Probate, AL PM FILED/CERT 02:32:46 (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) **ADDRESS** 유 Interest FORM Loan Other (FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN) COMPLETE GUARANTORS THIS BLOCK IF **TOTAL RECEIPTS** RECEIPT Lending Institution RECEIPT SOURCE (CHECK ONE) PAC **THIS PAGE** Individual **Business** Other DATE RECEIVED (mo./day/yr.) \$0.00 OF RECEIPT **AMOUNT**

Alabama Fair Campaign Practices Act

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BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTI CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES OTHER

The FCPA requires that expenditures over \$100 he itemized	ME OF CANDIDATE / ELECTED OFFICIAL: Jim Fuhrmeister
	PAGE 5 OF
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FORM REVISED 10.29.99			Shelby	Onty Jud	330 5/5 g dge of Pm 32.46 PM	obate: ALFILED/CER	RT	N/A	PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) STREE	
									ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	
									Advertising	
		\rightarrow							Advertising Consultants/	
		+					<u> </u>		Polling	- I
TOTAL	 							 	Contribution	밁
Α̈́	-								Food	PURPOSE
EX		-+							Fundraising Loan	유 유
EXPEN				<u></u>					Repayment	X E
B			!						Lodging	END
					•				Transportation	E OF EXPENDITURE
VDITURES THIS PAGE									OTHER GIVE BRIEF EXPLANATION	m
AGE									DATE OF EXPENDITURE (mo./day/yr.)	
\$0.00									AMOUNT OF EXPENDITURE	