

MONTHLY & WEEKLY



**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**



20120914000350470 1/3 \$.00
Shelby Cnty Judge of Probate, AL
09/14/2012 12:59:09 PM FILED/CERT

ICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

RECEIVED
SEP 14 2012

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Mari Morrison</i>		Political Party/Ballot Affiliation _____	
Office Sought or Held (include district or circuit number, if applicable) <i>PL 3 Hoover City Council</i>			
Address <input type="checkbox"/> Check box if reporting new address <i>310 Paradise Lake Lane</i>			
City <i>Hoover</i>	State <i>AL</i>	ZIP Code <i>35244</i>	Telephone Number [REDACTED]

Type of Report (check one)

☒ Monthly☐ Amended Monthly☐ Weekly☐ Amended Weekly

For Monthly Reports

Month in which the report is filed.

8/31/12

For Weekly Reports

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

Total Number of Pages in Report

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	<i>329.90</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>11,262.72</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>11,262.72</i>	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	<i>11,592.92</i>	
5b	Non-itemized expenditures	5b	<i>0</i>	
5c	Total expenditures (add lines 5a and 5b)	5c	<i>11,592.92</i>	
6	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	6	<i>0</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.

Signature of Candidate or Elected Official *Mari Morrison* Date *9/12/12*
William Trenton Hall

FORM REVISED 9.2.2011

**MY COMMISSION EXPIRES
MARCH 11, 2015**

Sworn to and subscribed before me this 5th day of September of the year 2012. My commission expires the 11th day of March of the year 2015.

Signature of Notary Public *[Signature]*

Print Notary's Name *William Trenton Hall*



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

FORM 4: Receipts from Other Sources loans, interest, and other sources of income



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 in-kind contributions on this form. Use Forms 2 and 3 for those listings.

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)						DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other			
Mari Morrison	310 Paradise Lakes Hoover, AL 35244		<input checked="" type="checkbox"/>		SAME			<input checked="" type="checkbox"/>				8/24/12	9000.00
Friends of Retirees	450 S. Union St. Montgomery, AL 36104			<input checked="" type="checkbox"/>	FOPPAL 450 S. Union St. Montgomery, AL 36104			<input checked="" type="checkbox"/>				8/20/12	200.00
Judy Edmiston	1811 South Lake Ave Birmingham, AL 35244			<input checked="" type="checkbox"/>	SAME				<input checked="" type="checkbox"/>			8/31/12	100.00
Mari Morrison	310 Paradise Lakes Hoover, AL 35244		<input checked="" type="checkbox"/>		SAME				<input checked="" type="checkbox"/>			8/27/12	812.02
Wilson Dinsmore	Ste. 200 31075 th Ave N Bham 35203			<input checked="" type="checkbox"/>	SAME				<input checked="" type="checkbox"/>			8/9/12	1000.00
Ruth & Nick Peters	Paradise Acres Bham, 35244			<input checked="" type="checkbox"/>	SAME				<input checked="" type="checkbox"/>			8/4/12	100.00
FORM REVISED 10.27.2011													TOTAL RECEIPTS THIS PAGE

1268.72



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: _____

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

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
		Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
Master Image	PO Box 39056 Birmingham AL 35259		✓	✓								8/28/12	3272.50
Master Image	PO Box 39056 Birmingham AL 35259		✓	✓								8/20/12	8320.42
TOTAL EXPENDITURES THIS PAGE												11,592.92	



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