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JUL 20 2012

James W. Fuhrmeister Judge of Probate

## Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

|                                                                   | Please Print in Ink or Type.                                                                                   |                                         |               |              |                          | _     |          |                                         |                 |
|-------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------|--------------|--------------------------|-------|----------|-----------------------------------------|-----------------|
|                                                                   |                                                                                                                | Political Party/                        | Ballot Af     | filiation    | Type of F                | -     | •        |                                         | ended Monthly   |
| Maurice Mercer                                                    |                                                                                                                |                                         |               |              | Mont<br>Wee              | •     |          | ended Weekly                            |                 |
|                                                                   | Sought or Held (include district or circuit number, if applicable)  am City Council Place 4                    |                                         |               |              | For Mont                 |       | •        |                                         |                 |
| Addre                                                             | · · · · · · · · · · · · · · · · · · ·                                                                          |                                         |               |              | For Mont<br>Month in     | •     | •        |                                         |                 |
|                                                                   | t_i                                                                                                            |                                         |               |              | report is f              |       |          | <u></u>                                 |                 |
| P.O. Box 1175 Pelham, AL 35124  City State ZIP Code Telephone Num |                                                                                                                |                                         | For Weekly Re |              |                          | -     |          |                                         |                 |
| 1                                                                 | am, AL 35124                                                                                                   | relephone rau                           | INDCI         |              | week in w<br>report is f |       | he       | puly 20,                                | 2012            |
|                                                                   | T                                                                                                              |                                         |               |              | Total Nur                |       | of       | 1                                       |                 |
|                                                                   |                                                                                                                |                                         |               |              | Pages in                 | Repo  | rt       |                                         |                 |
| Su                                                                | mmary of activity since last filed report                                                                      |                                         |               |              |                          |       |          |                                         |                 |
| 1 1                                                               | Beginning balance (ending balance from previous                                                                | us filing)                              |               |              |                          |       | 1        |                                         | \$1,351.73      |
| С                                                                 | ash Contributions                                                                                              |                                         |               | <u> </u>     |                          |       | _        |                                         |                 |
| 2a                                                                | temized cash contributions (total from Form 2)                                                                 | _                                       | 2a            |              | •                        |       |          |                                         |                 |
| 2b                                                                | Non-itemized cash contributions                                                                                |                                         | 2b            |              | \$100                    | 0.00  |          |                                         |                 |
| 2c -                                                              | Total cash contributions (add lines 2a and 2b)                                                                 |                                         |               |              |                          |       | 2c       |                                         | \$100.00        |
| Ir                                                                | -Kind Contributions                                                                                            | •                                       |               |              |                          |       |          |                                         |                 |
| 3a I                                                              | temized in-kind contributions (total from Form 3                                                               | 3)                                      | 3a            |              |                          |       |          |                                         |                 |
| 3b                                                                | Non-itemized in-kind contributions                                                                             |                                         | 3b            |              |                          |       |          |                                         |                 |
| 3c -                                                              | Total in-kind contributions (add lines 3a and 3b)                                                              |                                         | 3c            |              |                          |       |          |                                         |                 |
| R                                                                 | eceipts from Other Sources                                                                                     |                                         |               |              |                          | ·. ·  |          |                                         |                 |
| 4a                                                                | temized Receipts from Other Sources (total from                                                                | n Form 4)                               | 4a            |              | <del> </del>             |       |          |                                         |                 |
| 4b                                                                | Non-itemized Receipts from Other Sources                                                                       | · ••• • • • • • • • • • • • • • • • • • | 4b            |              |                          |       |          |                                         |                 |
| 4c                                                                | Total receipts from other sources (add lines 4a a                                                              | and 4b)                                 |               |              | •                        |       | 4c       |                                         | <u> </u>        |
| Ε                                                                 | xpenditures                                                                                                    |                                         |               |              |                          | Ł     | <b></b>  |                                         |                 |
| 5a I                                                              | temized expenditures (total from Form 5)                                                                       |                                         | 5a            | <del></del>  | •                        |       |          |                                         |                 |
| 5b 1                                                              | Von-itemized expenditures                                                                                      |                                         | 5b            |              | \$3                      | 3.50  |          |                                         |                 |
| 5c -                                                              | Total expenditures (add lines 5a and 5b)                                                                       |                                         |               |              |                          |       | 5c       | · , <u> </u>                            | \$3.50          |
| 6 I                                                               | Ending balance (add lines 1, 2c, & 4c, then subtra                                                             | ct line 5c)                             |               |              |                          | !     | 6        |                                         | \$1,448.23      |
| Cano                                                              | didates for State Office: File this report with the Office                                                     | ce of the Se                            | cretar        | v of State.  |                          |       | <u> </u> |                                         |                 |
|                                                                   | didates for County or Municipal Office: File this rep                                                          |                                         |               |              |                          | count | y in wh  | ich the of                              | fice is sought. |
| Asred                                                             | uired by the Alabama Fair Campaign Practices Act, I here                                                       | eby Swo                                 | rn to a       | nd subscri   | bed before               | e me  | this     | 2014                                    | day of          |
| swear                                                             | or affirm to the best of my knowledge and belief that t                                                        | the 🥆                                   |               |              |                          |       |          | ··· - · - · - · - · - · - · · - · · · · | nission expires |
|                                                                   | ed report(s) and the information contained herein and correct and that this information is a full and complete | 31C                                     |               |              |                          |       |          | -                                       | •               |
| staten                                                            | nent of all contributions, expenditures, and other requir                                                      |                                         | 23            | day o        | i <u>Sæder</u>           | MARK  | of the   | year                                    | 2012            |
| inform                                                            | nation during the applicable period of time.                                                                   | 7 1                                     |               |              |                          |       |          |                                         | •               |
|                                                                   | 7/am 4. 17/20                                                                                                  | Signa                                   | ature of      | Notary Publi | ic                       |       |          |                                         | <del></del>     |
| Signat                                                            | ure of Candidate or Elected Official Date                                                                      |                                         |               |              |                          |       |          |                                         |                 |

Course Deuce Jr.

Print Notary's Name