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Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

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Please Print in Ink or Type. Type of Report (check one) Name of Candidate or Elected Official Political Party/Ballot Affiliation Amended Monthly Monthly Maurice Mercer Amended Weekly Weekly Office Sought or Held (include district or circuit number, if applicable) P.O. Box 1175 For Monthly Reports Month in which the Check box if reporting new address report is filed. For Weekly Reports Date of Friday in the City State ZIP Code Telephone Number 08/31/2012 week in which the Pelham, AL 35124 report is filed. Total Number of Pages in Report Summary of activity since last filed report Beginning balance (ending balance from previous filing) \$316.27 **Cash Contributions** Itemized cash contributions (total from Form 2) 2a \$0.00 Non-itemized cash contributions 2b \$250.00 Total cash contributions (add lines 2a and 2b) 2c \$250.00 **In-Kind Contributions** Itemized in-kind contributions (total from Form 3) |3a| \$0.00 Non-itemized in-kind contributions 3b \$0.00 3c Total in-kind contributions (add lines 3a and 3b) \$0.00 **Receipts from Other Sources** 4a Itemized Receipts from Other Sources (total from Form 4) 4a \$0.00 4b Non-itemized Receipts from Other Sources \$0.00 4c Total receipts from other sources (add lines 4a and 4b) \$0.00 4c **Expenditures** 5a Itemized expenditures (total from Form 5) 5a \$0.00 | 5b | Non-itemized expenditures \$1.75 Total expenditures (add lines 5a and 5b) \$1.75 5c Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) \$564.52 Candidates for State Office: File this report with the Office of the Secretary of State.

wear or affirm to the best of my knowledge and belief that the tached report(s) and the information contained herein are use and correct and that this information is a full and complete atement of all contributions, expenditures, and other required formation during the applicable period of time. 8 30 12 Signature of Notary Public Signature of Notary P	Candidates for County or Municipal Office: File this report w	ith the Judge of Probate of the county in which the office is sought.
EIRIA TOUT	required by the Alabama Fair Campaign Practices Act, I hereby wear or affirm to the best of my knowledge and belief that the tached report(s) and the information contained herein are use and correct and that this information is a full and complete atement of all contributions, expenditures, and other required formation during the applicable period of time.	Sworn to and subscribed before me this 30 day of 100 of the year 30 . My commission expires the 30 day of 30 of the year 30 .
RM REVISED 10.27 2011		EIRA H. CAN Print Notary's Name