



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20200803000328330 1/6 \$.00
Shelby Cnty Judge of Probate, AL
08/03/2020 04:25:33 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Derrick Morrisette		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) City Council Ward 3 Alabaster			
Address ☐ Check box if reporting new address 364 Lacey Ave			
City Maylene	State Alabama	ZIP Code 35114	Telephone Number [REDACTED]

Type of Report (check one)

☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly

For Monthly Reports
Month for which the
report is filed.

July

For Weekly Reports
Date of Friday in the
week for 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	\$0.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$150.00	
2b	Non-itemized cash contributions	2b	\$1,520.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$1,670.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a		
3b	Non-itemized in-kind contributions	3b		
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$0.00	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a		
4b	Non-itemized Receipts from Other Sources	4b		
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$0.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	\$1,062.24	
5b	Non-itemized expenditures	5b	\$236.05	
5c	Total expenditures (add lines 5a and 5b)	5c	\$1,298.29	
Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a		
6b	Non-itemized expenditures	6b		
6c	Total expenditures on credit (add lines 6a and 6b)	6c	\$0.00	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	\$371.71	

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.

Derrick Morrisette 8/3/2020
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this 3 day of August of the year 2020. My commission expires the 22 day of February of the year 2022.

Jessica L. Holland
Signature of Notary Public
Jessica L. Holland
Print Notary's Name

NAME OF CANDIDATE OR ELECTED OFFICIAL: Derrick Morrisette

DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

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NAME OF CANDIDATE OR ELECTED OFFICIAL: Derrick Morrisette

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.

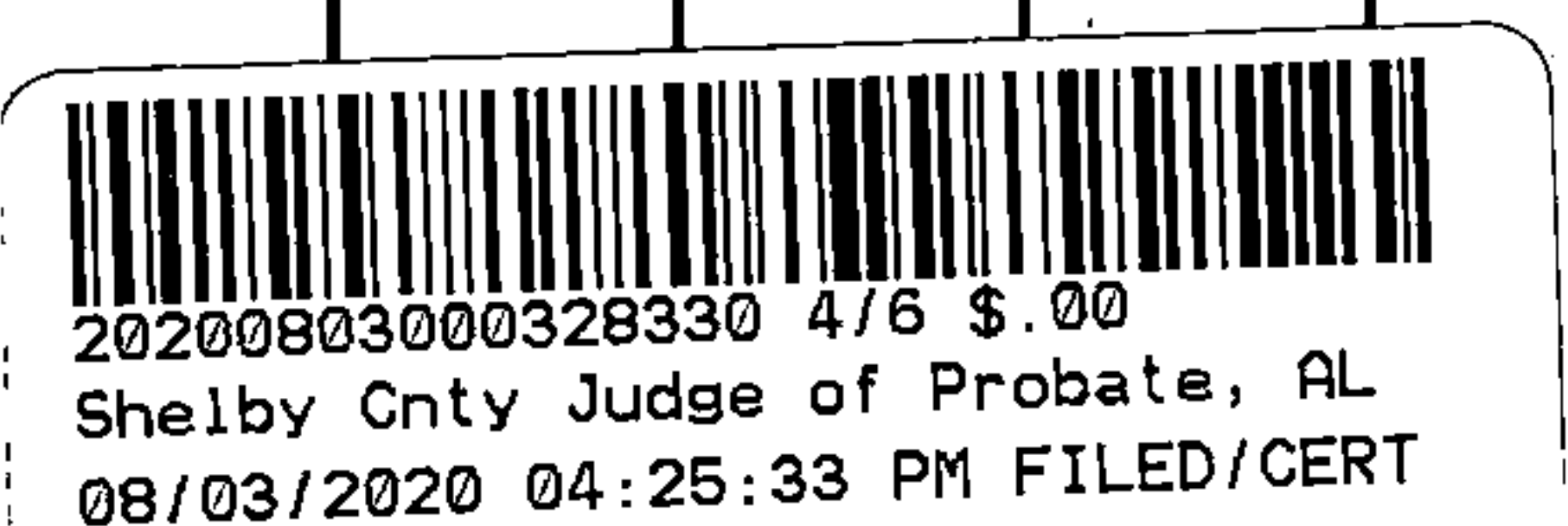
DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.

DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.

[illegible]

NAME OF CANDIDATE OR ELECTED OFFICIAL: Derrick Morrisette

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: Derrick Morrisette

**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**

[illegible]

TOTAL EXPENDITURES THIS PAGE

\$0.00



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