



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20200821000365130 1/6 \$.00
Shelby Cnty Judge of Probate, AL
08/21/2020 03:04:48 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 Alabaster Ward 3			
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
☒ Weekly
☐ Amended Monthly
☐ Amended Weekly

For Monthly Reports

Month for which the report is filed.

For Weekly Reports

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

Total Number of Pages in Report

8/21/2020

6

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	\$785.77
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$0.00	
2b	Non-itemized cash contributions	2b	\$50.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$50.00	
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	\$0.00	
5b	Non-itemized expenditures	5b	\$92.54	
5c	Total expenditures (add lines 5a and 5b)	5c	\$92.54	
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	\$743.23	

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

Date

Sworn to and subscribed before me this 21 day of Aug of the year 2020. My commission expires the 22 day of Feb of the year 2022.

Signature of Notary Public

Print Notary's Name

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** in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned		
		TOTAL CASH CONTRIBUTIONS THIS PAGE						\$0.00



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FORM REVISED 10.27.2011

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\$0.00



FORM 3: In-Kind Contributions received by candidate or elected official

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.

[illegible]

\$0.00

TOTAL IN-KIND CONTRIBUTIONS THIS PAGE

FORM REVISED 10.27.2011



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The seal of the Georgia Institute of Technology is a circular emblem. It features a central shield with a landscape depicting a river, hills, and a rising sun. The word "GEORGIA" is inscribed above the shield, and "INSTITUTUM" is below it. The shield is flanked by the words "SCIENTIA" on the left and "ARTES" on the right. The outer ring of the seal contains the text "THE GEORGIA INSTITUTE OF TECHNOLOGY" at the top and "FOUNDED 1881" at the bottom, separated by stars.

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
		Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation		
		TOTAL EXPENDITURES THIS PAGE										\$0.00



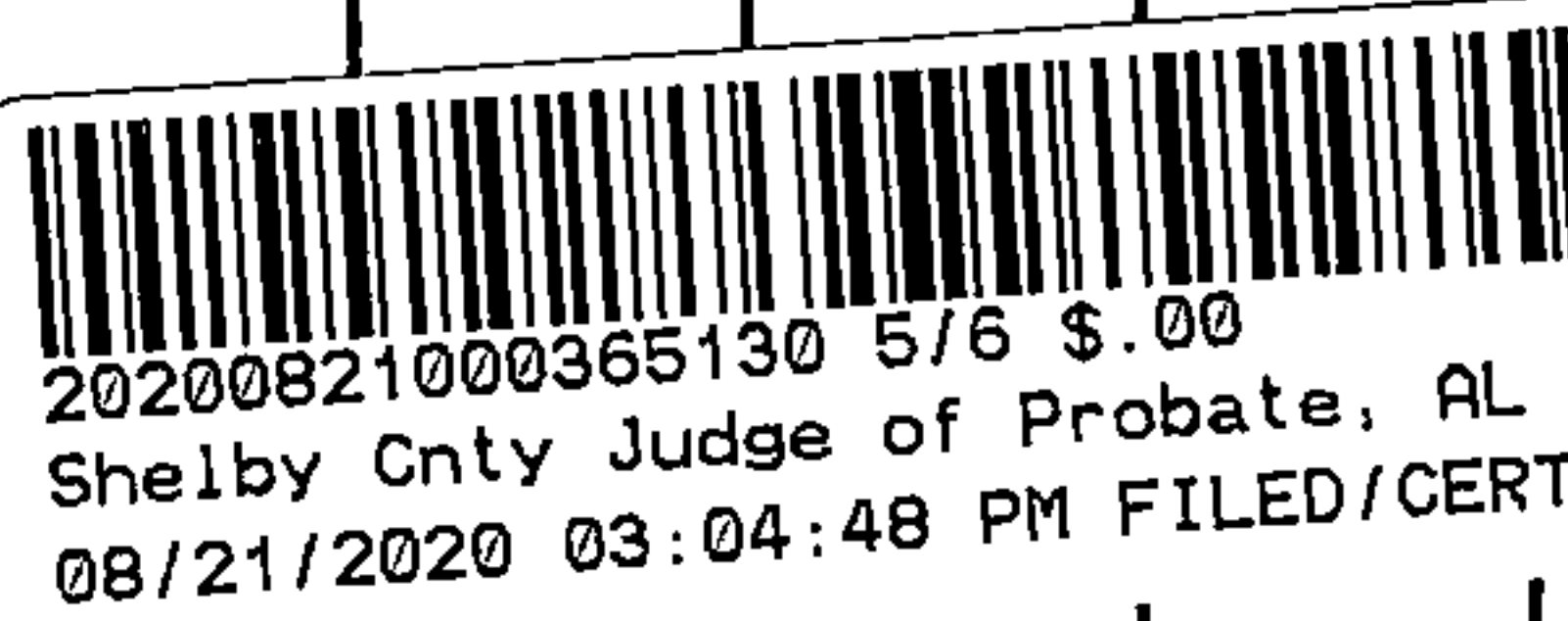
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TOTAL EXPENDITURES THIS PAGE

\$0.00



NAME OF CANDIDATE OR ELECTED OFFICIAL: Derrick Morrisette

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	Lodging	Transportation	Interest		
TOTAL EXPENDITURES THIS PAGE												\$ 0.00

FORM REVISED 5.19.2017

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