MONTHLY & WEEKLY

FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

20200910000404220 1/6 $.00
Shelby Cnty Judge of Probate, AL
09/10/2020 01:20:55 PM FILED/CERT

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

Please Print in Ink or Type.

| Name of Candidate or Elected Official | Political Party/Ballot Affiliation |
|---|---|
| Ricky Ray Morris | |
| Office Sought or Held (include district or circuit number, if applicable): Mayor | |
| Address ☐ Check box if reporting new address: 460 River Drive | |
| City: Wilsonville State: AL ZIP Code: 35186 | Telephone Number: [redacted] |

Type of Report (check one)
☑ Monthly ☐ Amended Monthly
☐ Weekly ☐ 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**

## Summary of activity since last filed report

| | | | | | |
|---|---|---|---|---|---|
| 1 | Beginning balance (ending balance from previous filing) | | | 1 | 0 |
| | **Cash Contributions** | | | | |
| 2a | Itemized cash contributions (total from Form 2) | 2a | | | |
| 2b | Non-itemized cash contributions | 2b | | | |
| 2c | Total cash contributions (add lines 2a and 2b) | | | 2c | 0 $0.00 |
| | **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 $0.00 |
| | **Expenditures** | | | | |
| 5a | Itemized expenditures (total from Form 5) | 5a | | | |
| 5b | Non-itemized expenditures | 5b | | | |
| 5c | Total expenditures (add lines 5a and 5b) | | | 5c | 0 $0.00 |
| | **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 | 0 $0.00 |

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.

Ricky Morris
Signature of Candidate or Elected Official

9/10/20
Date

Sworn to and subscribed before me this 10th day of September of the year 2020. My commission expires the 13th day of November of the year 2023.

Jennifer Lineberry
Signature of Notary Public

Jennifer Lineberry
Print Notary's Name

JENNIFER LINEBERRY NOTARY PUBLIC
My Commission Expires 11-13-2023
ALABAMA STATE AT LARGE

FORM REVISED 06.06.2017

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

# FORM 2: Contributions received by candidate or elected official

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** 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 | | |
| | | | | | | | | |
| | | | | | | | | |
| | None | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | TOTAL CASH CONTRIBUTIONS THIS PAGE | | | | | | | $0.00 |

20200910000404220 2/6 $.00
Shelby Cnty Judge of Probate, AL
09/10/2020 01:20:55 PM FILED/CERT

FORM REVISED 10.27.2011

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

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

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 loans on this form. Use Forms 2 and 4 for those listings.

| CONTRIBUTOR (INCLUDE FULL NAME) | ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | NATURE OF CONTRIBUTION (CHECK ONE) | | | | | | | | SOURCE (CHECK ONE) | | | | DATE CONTRIBUTION RECEIVED (mo./day/yr.) | AMOUNT OF CONTRIBUTION |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Administrative | Advertising | Consultants/ Polling | Equipment | Food | Rent | Transportation | Other | Business/ Corporation | Individual | PAC | Other | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | NONE | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | TOTAL IN-KIND CONTRIBUTIONS THIS PAGE | | | | | | | | | | | | | | 0 $0.00 |

20200910000404220 3/6 $.00
Shelby Cnty Judge of Probate, AL
09/10/2020 01:20:55 PM FILED/CERT

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 | RECEIPT SOURCE (CHECK ONE) | | | | | DATE RECEIVED (mo./day/yr.) | AMOUNT OF RECEIPT |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Interest | Loan | Other | GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN] | Lending Institution | PAC | Individual | Business | Other | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | None | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| FORM REVISED 10.27.2011 | | | | | TOTAL RECEIPTS THIS PAGE | | | | | | | $0.00 |

20200910000404220 4/6 $.00
Shelby Cnty Judge of Probate, AL
09/10/2020 01:20:55 PM FILED/CERT

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

# 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 | Charitable Contribution | Food | Fundraising | Loan Repayment | Lodging | Transportation | OTHER GIVE BRIEF EXPLANATION | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | None | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | TOTAL EXPENDITURES THIS PAGE | | | | | | | | | | | | $0.00 |

20200910000404220 5/6 $.00
Shelby Cnty Judge of Probate, AL
09/10/2020 01:20:55 PM FILED/CERT

FORM REVISED 10.27.2011

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

# FORM 6: Expenditures On Line of Credit 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 | Lodging | Transportation | Interest | OTHER GIVE BRIEF EXPLANATION | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | None | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| FORM REVISED 5.19.2017 | TOTAL EXPENDITURES THIS PAGE | | | | | | | | | | | | 0 $ 0.00 |

20200910000404220 6/6 $.00
Shelby Cnty Judge of Probate, AL
09/10/2020 01:20:55 PM FILED/CERT