



FILED

JAN 31 2019

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

SCOTT W. HASSELL  
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Deverick Williams</i>		Political Party/Ballot Affiliation		Calendar Year covered by this report. <b>2018</b>
Office Sought or Held (include district or circuit number, if applicable) <i>Cadtsder City Council - District 2</i>				
Address <input type="checkbox"/> Check box if reporting new address <i>90 Broad St</i>				<input type="checkbox"/> Amended Annual Report <input type="checkbox"/> Termination Report
City <i>Cadtsder</i>	State <i>AL</i>	ZIP Code <i>35902</i>	Telephone Number <i>256-549-4518</i>	
Total Pages in Report Include this page in your count.				

## SECTION I - Summary of activity from last filed report through December 31 of reporting year

1	Beginning balance (ending balance from previous filing)		1	<i>198.18</i>
<b>Cash Contributions</b>				
2a	Itemized cash contributions (total from Form 2)	2a	<i>0</i>	
2b	Non-itemized cash contributions	2b	<i>0</i>	
2c	Total cash contributions (add lines 2a and 2b)	2c	<i>0</i>	
<b>In-Kind Contributions</b>				
3a	Itemized in-kind contributions (total from Form 3)	3a	<i>0</i>	
3b	Non-itemized in-kind contributions	3b	<i>0</i>	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	<i>0</i>	
<b>Receipts from Other Sources</b>				
4a	Itemized receipts from other sources (total from Form 4)	4a	<i>0</i>	
4b	Non-itemized receipts from other sources	4b	<i>0</i>	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	<i>0</i>	
<b>Expenditures</b>				
5a	Itemized expenditures (total from Form 5)	5a	<i>0</i>	
5b	Non-itemized expenditures	5b	<i>198.18</i>	
5c	Total expenditures (add lines 5a and 5b)	5c	<i>198.18</i>	
<b>Expenditures on Line of Credit</b>				
6a	Itemized expenditures on line of credit (total from Form 6)	6a	<i>0</i>	
6b	Non-itemized expenditures	6b	<i>0</i>	
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c	<i>0</i>	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	<i>0</i>	

## SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

8	Beginning balance (as of January 1 of reporting year)	8	<i>0</i>
9	Total cash contributions for year	9	<i>3,501</i>
10	Total in-kind contributions for year	10	<i>1500</i>
11	Total receipts from other sources for year	11	<i>0</i>
12	Total expenditures for year	12	<i>0</i>
13	Total expenditures on line of credit for year	13	<i>0</i>
14	Ending balance (add lines 8, 9, & 11, then subtract line 12)	14	<i>3501.00</i>
15	Total campaign debt (total debt owed as of December 31)	15	<i>0</i>

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]* 1/31/19  
Signature of Candidate or Elected Official Date

Sworn to and subscribed before me this 31<sup>st</sup> day of Jan. of the year 2019. My commission expires the 28<sup>th</sup> day of March of the year 2021.  
*Iva Nelson*  
Signature of Notary Public  
*Iva Nelson*  
Print Notary's Name





# 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					
		<b>TOTAL IN-KIND CONTRIBUTIONS THIS PAGE</b>																



# 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 <small>[FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]</small>	Lending Institution	PAC	Individual	Business	Other			
<b>TOTAL RECEIPTS THIS PAGE</b>													



