Type of Report (check one UDGE OF PROBATE

FILED

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

AIIG 0 4 2022

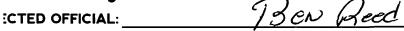
SCOTT W. HASSELL

| o redu | Please Print in Ink or Type. | | | | | Mo | nthly | Amended Monthly |
|----------------------------|--|-------------------|-----------|------------|--------------|----------------------------------|----------|--|
| | ne of Candidate or Elected Official | Political Party/I | Ballot / | Affiliatio | n | ⊠ We | ekly | Amended Weekly |
| | is the island to reconstruction of the control of t | N/A | | | | For Monthly I Month for which | • | |
| Offi | ce Sought or Held (include district or circuit number, if applicable) | 17 | | | | report is filed. | SIT LITE | |
| A dd | Council - Districtions Check box if reporting new address | rict | | | | For Weekly R Date of Friday | | |
| Add | CLA BolleVIII = 120 | | | | | week for which | | 8-5-22 |
| City | State ZIP Code | Telephone Nur | mber | | | report is filed. Total Number | of | 0 - 00 |
| | GADICE JALI 35904 | 254-328 | 29 | 158 | | Pages in Rep | | 2 |
| A MISSON | | | (ES)* 29* | | Call C | | | |
| 5 | ummary of activity since last filed report | CI:\ | | | | | | 1100 11 |
| 1 | Beginning balance (ending balance from previo | us filing) | - | | | | 1 | 496.45 |
| - | Cash Contributions | | 2a | | (2 | | 7 | |
| | Itemized cash contributions (total from Form 2) | | 2b | - | \ | | - | |
| 2b | Non-itemized cash contributions | | 20 | | 20 | | | 0 |
| 2c | THE PART OF THE PA | | - | | | | 2c | D |
| | In-Kind Contributions | -0 | | | | | 7 | |
| | Itemized in-kind contributions (total from Form 3 | 3) | 3a | | 0 | , | | |
| | Non-itemized in-kind contributions | | 3b | | D | | | 3.2 |
| 3с | Total in-kind contributions (add lines 3a and 3b) | | 3c | | 0 | | | |
| | Receipts from Other Sources | | | | | | _ | |
| 4a | Itemized Receipts from Other Sources (total from | m Form 4) | 4a | | e | 7 | | |
| 4b | Non-itemized Receipts from Other Sources | | 4b | | 2 | 5 | | ¥ |
| 4c | Total receipts from other sources (add lines 4a | and 4b) | | | | | 4c | Ø |
| | Expenditures | | | | | | _ | |
| 5а | Itemized expenditures (total from Form 5) | | 5a | 19 | 1816 | 58 | | |
| 5b | Non-itemized expenditures | | 5b | | 1 | 7 | | |
| 5c | Total expenditures (add lines 5a and 5b) | | | | • | | 5c | 198.68 |
| | Expenditures on Line of Credit | | | | | | _ | • |
| 6а | Itemized expenditures (total from Form 6) | | 6a | | | | | |
| 6b | Non-itemized expenditures | | 6b | | | | | |
| 6с | Total expenditures on credit (add lines 6a and 6 | 3b) | 6c | | 0 | / | | |
| 7 | Ending balance (add lines 1, 2c, & 4c, then subtra | act line 5c) | | | 11 | | 7 | 297.77 |
| we atta rue state | equired by the Alabama Fair Campaign Practices Act, I here are or affirm to the best of my knowledge and belief that ched report(s) and the information contained herein and correct and that this information is a full and complement of all contributions, expenditures, and other requirmation during the applicable period of time. | the are lete the | rn to | ح | ofthe | | 2 | day of day of . My commission expires the year <u>2025</u> . |

Signature of Candidate of Elected Official

RACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

| ditures by candidate or elected official | ditures | by | candidate | or | elected | official |
|--|---------|----|-----------|----|---------|----------|
|--|---------|----|-----------|----|---------|----------|





tures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

| | PURPOSE OF EXPENDITURE (CHECK ONE) | | | | | | | | | | | |
|---|---------------------------------------|-------------|-------------------------|----------------------------|------|-------------|-------------------|---------|----------------|------------------------------|---|-----------------------------|
| ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) | Administrative | Advertising | Consultants/ Polling | Charitable Contribution | Food | Fundraising | Loan Repayment | Lodging | Transportation | OTHER GIVE BRIEF EXPLANATION | DATE OF EXPENDITURE (mo./day/yr.) | AMOUNT OF EXPENDITURE |
| Godsden Printing Secnetagy State State of Alaba min- | X | | | | | | | | | | 8-1-22 | 79.20 |
| State of Alabama- | X | | | | | | | | | | 8-2-22 | 79.20 119.48 |
| • | | | | | | | | | | | | |
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| | | | | | | | | | | | | |
| TOTAL EXPENDITURES THIS PAGE | | | | | | | | | 198.68 | | | |