## Candidate & Elected Official Campaign Finance Report

FILED

JUL 3 1 2020

**SUMMARY FORM 1** SCOTT W. HASSELL Please Print in Ink or Type. JUDGE OF PROBATE Name of Candidate or Elected Official Political Party/Ballot Affiliation Date Covered by Report Office Sought or Held (include district or circuit number, if applicable) Address Check box if reporting new address Amended Daily Report **Total Number of Pages** State in Report ZIP Code Telephone Number

28966-1079

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S	ummary of activity since last filed report					
1	Beginning balance (ending balance from previous filing)	A STATE OF THE STA		1	9500-	
	Cash Contributions			<u> </u>		
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		\$0.00
	In-Kind Contributions			_		
За	Itemized in-kind contributions (total from Form 3)	3a				
3b	Non-itemized in-kind contributions	3b				
3с	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				
5b	Non-itemized expenditures	5b				
5c	Total expenditures (add lines 5a and 5b)			5c		\$0.00
	Expenditures on Line of Credit					
6a	Itemized expenditures on line of credit (total from Form 6)	6a				
6b	Non-itemized expenditures on line of credit	6b				
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c	\$0.00			
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7	950.	\$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.

Signature of Candidate or Elected Official

Sworn to and subscribed before me this31 5+ day of
July of the year 2020. My commission expires
the 13+ day of March of the year 2623
Anita Gregory
Signature of Notary Public
Print Notary's Name



SCOTT W. HASSELL JUDGE OF PROBATE

JUL 3 1 7030

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## 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:

| Chapter |

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When total contrib	utions from a single source exceed \$100.00, the FCPA requires all contrib DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 an	utions d 4 fo	fro the	m tha ose lia	at so sting	jurce js.	to be itemized.	
		OF	SC	OURC ITRIE	E SUTIO		DATE	AMOUNT
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR PO BOX, CITY, STATE AND ZIP)	Business or Corporation	Individual	PAC	Other	Returned	CONTRIBUTION RECEIVED (mo /day/yr.)	OF CONTRIBUTION
							]	
FORM REVISED 9.2.2011	TOTAL CASH CON	ITRI	BU	TIC	NS	TH	HIS PAGE	\$ 0.00

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 E When total	contributions from a single source exceed \$100.0	0. the	FC	PA	requi	res a	il co	ntrib	ution	s fro	m th	at so	urce	to be itemized.	
	DO NOT LIST cash or loans on this			is form. Use Forms 2 and 4 for those NATURE OF CONTRIBUTION (CHECK ONE)									:)		
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (றo./day/yr.)	AMOUNT OF CONTRIBUTION
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FORM REVISED 9 2 2011		T	ОΤ	AL	IN-I	KIN	D C	ON	TR	IBL	TIC	ONS	T	IIS PAGE	0.00

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

## FORM 4: Receipts from Other Sources Idens, Interest, and other sources of Income



When total					00, the FCPA requires all contributions from on this form. Use Forms 2 and 3 for the				to b	e iter	nized.	
			FORI REC	M EIPT	COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	R	ECEI (CH	PT S		CE		
SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O BOX. CITY. STATE, AND ZIP)	Interest	Loan	Other	GUARANTORS  [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]	Lending	PAC	Individual	Business	Other	DATE RECEIVED (mo /day/yr )	AMOUN' OF RECEIP'
		Б										
M REVISED 9.2 2011				•	TOTAL REC	EIP	TS	THI	S F	AG	E	Ø

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

FORM 5: Expenditures by candidate of 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. PURPOSE OF EXPENDITURE (CHECK ONE) AMOUNT PERSON/GROUP/BUSINESS DATE OF **ADDRESS** OTHER Administrative (ADDRESS SHOULD INCLUDE STREET OR PO BOX, CITY, STATE, AND ZIP) EXPENDITURE OF RECEIVING EXPENDITURE GIVE BRIEF EXPENDITURE (mo./day/yr) (INCLUDE FULL NAME) EXPLANATION TOTAL EXPENDITURES THIS PAGE FORM REVISED 9.2.2011