THIS AREA FOR OFFICIAL USE ONLY

JUL 0 5 2022

SCOTT W. HASSELL

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

SUMMARY FORM 1					JUDGE OF PROBATE Type of Report (check one)						
	Please Print in lnk or Type			Mo	nthly	Amended Monthly					
	me of Candidate or Elected Official Political Party DIXIE IV INTOTA fice Sought or Held (include district or circuit number, if applicable)	/Ballot	Affiliation	For Monthly		Amended Weekly					
Off C	ice Sought or Held (include district or circuit number, if applicable)			Month for whi report is filed. For Weekly F		JUNE					
Adi	dress Check box if reporting new address 3009 WEST MEICHAN BW State ZIP Code Telephone No.	9		Date of Friday week for which	in the						
City	State ZIP Code Telephone No.	mber	7-65	report is filed. Total Numbe Pages in Rep							
S	ummary of activity since last filed report		Ch. S								
1	Beginning balance (ending balance from previous filing)				1	Δ					
	Cash Contributions					V					
2a	Itemized cash contributions (total from Form 2)	2a	(3)	0.00							
2b		2b	- 1	0.00	-						
2c	Total cash contributions (add lines 2a and 2b)				2c (310 00					
	In-Kind Contributions	1			201	2/0.00					
За	Itemized in-kind contributions (total from Form 3)	За	10.	-0 11	7						
3b	Non-itemized in-kind contributions	3b	1.10	0101	+						
3с	Total in-kind contributions (add lines 3a and 3b)	3c	10 15	011							
	Receipts from Other Sources	1001	1.10	3.01	J						
4a	Itemized Receipts from Other Sources (total from Form 4)	4a			7						
4b		4b			1						
4c	Total receipts from other sources (add lines 4a and 4b)				4c	2					
	Expenditures				40						
5a	Itemized expenditures (total from Form 5)	5a	15	0.00	7						
5b	Non-itemized expenditures	5b	/ 🗸	0,00	1						
5c	Total expenditures (add lines 5a and 5b)				5c	150 00					
	Expenditures on Line of Credit				00	100.00					
6a	Itemized expenditures (total from Form 6)	6a			7						
6b	Non-itemized expenditures	6b			-						
6c	Total expenditures on credit (add lines 6a and 6b)	6c			1						
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)				7 /	60.00					
wear or affirm to the best of my knowledge and belief that the ittached report(s) and the information contained herein are rue and correct and that this information is a full and complete tatement of all contributions, expenditures, and other required information during the applicable period of time.											

Print Notary's Name

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

FORM 2: Contributions received by 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.

DC	NOT LIST in-kind contributions or loans on this form. Use Forms 3 an	d 4 fo	r tho	ose I	sting	js.			
		SOURCE OF CONTRIBUTION (CHECK ONE)		DATE	AMOUNT				
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)		Individual	PAC	Other	Returned	CONTRIBUTION RECEIVED (mo./day/yr.)	OF CONTRIBUTION	
DOBERT HODRIE	1100 FORREST AVENUE CAGGGEN, AL 35901		√				5016 23 2014	100.00	
CARDI. CARUPLE	109 DALEHAVEN PLACE RADINDEN, AU 36901		/				2027 21 2000 E	60.00	
ROBERT MOORÉ CAROL CARUSLÉ CAROL CARUSLÉ	109 DALÉMANEN PLACE CADGOEN, AL 36901		\				2016 2877	150.00	
	, and the second					_			
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		_		_	_	\perp			
			_	_	-				
		-		-	-	_			
FORM REVISED 10.27.2011	TOTAL CASH CONTRIBUTIONS THIS PAGE					310.00			

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 ELECTED OFFICIAL: DIXIE MINATRA 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. **NATURE OF CONTRIBUTION** SOURCE (CHECK ONE) (CHECK ONE) CONTRIBUTOR **ADDRESS** (INCLUDE FULL NAME) DATE Transportation
Other
Business/
Corporation
Individual **AMOUNT** (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION OF RECEIVED CONTRIBUTION 96 Bg Rent (mo./day/yr.) N.O. BOX 4402 JUNE DIXIE MINATRA CADEDEN, AL 35904

DIXIE NINATRA CADEDEN, AL 35904

DIXIE NINATRA CADEDEN, AL 35904

DIXIE MINATRA CADEDEN, AL 35904 690.0D 82.27 986.34 JUNG TOTAL IN-KIND CONTRIBUTIONS THIS PAGE **FORM REVISED 10.27,2011** 1758.61

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

FORM 5: Expenditures by candidate or elected official

LOMING. Pybellairaies na co	illaidate of elected atticial	
NAME OF CANDIDATE OR ELECTED OFFICIAL:	DINE MINATRA	

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** DATE OF **ADDRESS** PERSON/GROUP/BUSINESS **OTHER** Administrative OF Advertising
Consultants/
Polling
Charitable
Contribution
Food Fundraising EXPENDITURE (ADDRESS SHOULD INCLUDE Loan Repayment Lodging RECEIVING EXPENDITURE **EXPENDITURE** (mo./day/yr.) GIVE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (INCLUDE FULL NAME) **BRIEF EXPLANATION** DITZ THE ATER WALL GT. (N. 2011) CADODEN, ALBO90+ JUNG THUSTER OF 150.00 2022 BADODEN TOTAL EXPENDITURES THIS PAGE 150.00 FORM REVISED 10.27.2011