

FILED

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

JAN 2 7 2023

SCOTT W. HASSELL JUDGE OF PROBATE

Please Print in Ink or Type.			
Mane " Con!	ty/Ballot Affiliation	Calendar Year covered by this report.	2022
Office Sought or Held (include district or circuit number, indup) cable)	Allalla		Amended Annual Report
Address Check pol if reporting new address	14/1/11/1		Termination Report
Address Check polk if reporting new address			
City State ZIP Code Telephone N	Jumber	Total Pages in Report Include this page in	
		your count.	
SECTION I - Summary of activity from last filed repor	t through Dec	cember 31 of repo	rting vear
Beginning balance (ending balance from previous filing)			
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	\$0.00
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	8.00		
4a Total itemized receipts from other sources (total from Form 4)	4a		
4b Total 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)	16-1		
6b Non-itemized expenditures	6a		
6c Total expenditures on line of credit (add lines 6a and 6b)	6b 6c		
7 Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	00	\$0.00	60.00
			\$0.00
8 Beginning balance (as of January 1 of reporting year)	year - Januar	ry 1st through Dec	emper 31st
9 Total cash contributions for year		8	
10 Total in-kind contributions for year	10	9	
11 Total receipts from other sources for year	101	11	2 18 1 - 1
12 Total expenditures for year		12	
13 Total expenditures on line of credit for year	13	12	
14 Ending balance (add lines 8, 9, & 11, then subtract line 12)		14	\$0.00
15 Total campaign debt (total debt owed as of December 31)	15	h.	1
	orn to and subscribed	before me this	day of the
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	r 2023 . My c	commission expires the	day of dune of
	year 12125.	///	7
required information during the applicable period of time.	Mande	· nll	7 2 5
6 Dia	nature of Notary Publi	ic /	601
1-d(d)		Mandil	ju j
Signature of Candidate or Elected Official Date Prin	nt Notary's Name	Juliu y	FORM REVISED 5.24.2017

FILED

CSEC \$ 5 WAL

SCOTT W. HASSELL JUDGE OF PROBATE ALABAMA FAIR CAMPAIGN PRACTICES ACT

e FCPA requires that those contributions g	reater than \$100 be itemized. <b>DO NOT LIST</b> in-kind contribution	s or loan	s on	this	form	ı. Us	e Forms 3 and 4 f	or those listings.
CONTRIBUTOR	ADDRESS	OI	CO	OUR NTRI IECK (	BUTI	ON	DATE	AMOUNT
(INCLUDE FULL NAME)	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation	Individual	PAC	Other	Returned	CONTRIBUTION RECEIVED (mo./day/yr.)	OF CONTRIBUTION
			:					
DRM REVISED 10.29.99	TOTAL CASH C	ONTRI	BU	TIO	NS	TH	IS PAGE	\$0.0

ALABAMA FAIR CAMPAIGN PRA															
FORM 3: IN-KI NAME OF CANDIDATE / ELECTED C	ND CONTRIBUTIONS  DEFICIAL: // WINE	S F	REC )/	EIVE	D E	3Y C	CAN	DIE	AT 4	E,01	R EI	EC.	TEC	OFFICIAL PAG	E OF
The FCPA requires that those	contributions greater than \$100 be itemize	•					sh c	or lo	ans	on t	his f	orm	ı. Us	se Forms 2 and	4 for those listings
			NAT	URE (		ONT K ON		TION	1			RCE K 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 (mo./day/yr.)	AMOUNT OF CONTRIBUTION

**TOTAL IN-KIND CONTRIBUTIONS THIS PAGE** 

\$0.00

FORM REVISED 10.29.99

ALABAMA FAIR CAMPAIGN PRACTICES ACT

FORM REVISED 10.29.99

	EIPTS FROM OT	Γ <b>Η</b>	EF		•							
NAME OF CANDIDATE / ELECTED  The FCPA requires that those co		item	ized.	<i>2//</i> DO	NOT LIST cash or in-kind contributions	on th	is fo	<i>// (</i> rm.	Use	Forr	PAGE ns 2 and 3 fo	r those listings.
			FORM COMPLETE THIS BLOCK IF RECEIPT SOURCE (CHECK ONE)									
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 COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	Lending Institution	PAC	Individual	Business	Other	DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
										1		
		<u> </u>	<b></b>		TOTAL REC	EIP'	rs 1	CHI:	S P	└─ AG	F	\$0.00

**TOTAL RECEIPTS THIS PAGE** 

Alarama F	FAIR (	CAMPAIGN	PRACTICES A	Аст
-----------	--------	----------	-------------	-----

FORM 5: EXPENDITURES

BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTIONS TO OTHER CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES

Name of Candidate / Elected Official:	MAMP	Bill	1 Vishect	1 AHGIIA	PAGE OF	
	0.000	1		1 11/400		

The FCPA requires that expenditures over \$100 be itemize
-----------------------------------------------------------

					PL	IRPO	SE (	OF E	XPEN ONE)	IDITU	IRE		
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
												1	
					İ	1							
					<b></b>	<del></del>							
FORM REVISED 10.29.99					TC	ATC	L E	EXF	EN	DIT	URES THIS F	PAGE	\$0.00

## 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.

					Pl	JRPC	SE (CH	OF EX	XPEN ONE)	DITU	RE		
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
													-
FORM REVISED 5.19.2017					T	ATC	\L E	EXP	PEN	DIT	URES THIS P	AGE	\$ 0.00