

Candidate or Elected Official

FORM REVISED 06 06 2017

# Candidate & Elected Official Campaign Finance Report

FILED

CCO 2 2 2022

SCOTT W. HASSELL

ŌΣ	SUMMARY FORM 1 Please Print in Ink or Type.				Туре о	Mon	thly	Amended Monthly
	me of Candidate or Elected Official Political Party/I	Ballot	. Af	filiation	L	Wee		Amended Weekly
Offi	Teffrey Wade Bush  Se Sought or Held (include district or circuit number if applicable)		_			onthly R for which is filed		S
B	pard of Education District 4.				50	ekly Re	ports	
Add	dress Check box if reporting new address					f Friday or which		
	109 Owens Ave		_		report		trie	
City	State ZIP Code   Telephone Null  AHAIIA AL 35954 (356)456	Mber 8-10	2	21		lumber in Repo		
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S	ummary of activity since last filed report							
1	Beginning balance (ending balance from previous filing)						1	
	Cash Contributions		_				_	
2a	Itemized cash contributions (total from Form 2)	2a		211.4	16			
2b	Non-itemized cash contributions	2b						
2c	Total cash contributions (add lines 2a and 2b)						2c	211.46
	In-Kind Contributions							
3a	Itemized in-kind contributions (total from Form 3)	За					]	
3b	Non-itemized in-kind contributions	3b					1	
3с	Total in-kind contributions (add lines 3a and 3b)	3c						
	Receipts from Other Sources						_	
4a	Itemized Receipts from Other Sources (total from Form 4)	4a						
4b	Non-itemized Receipts from Other Sources	4b	Γ					
4c	Total receipts from other sources (add lines 4a and 4b)						4c	<u>,                                     </u>
	Expenditures	1						
5a	Itemized expenditures (total from Form 5)	5а	[ ,	211.46	,		]	
5b	Non-itemized expenditures	5b						
5c	Total expenditures (add lines 5a and 5b)		20.000				5c	211.46
	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 6b)	6c						
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)						7	Ð
swe atta rue state	equired by the Alabama Fair Campaign Practices Act, I hereby ar or affirm to the best of my knowledge and belief that the ched report(s) and the information contained herein are and correct and that this information is a full and complete ement of all contributions, expenditures, and other required the contained of time.	rn to	9 a	of the	year_	ore me	thist.	My commission expires

Print Notary's Name

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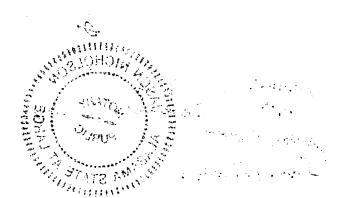
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### ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

# FORM 2: Contributions received by candidate or elected official



NAME OF CANDIDATE OR ELECTED OFFICIAL: Teffrey Wade Bush

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. SOURCE OF CONTRIBUTION (CHECK ONE) **CONTRIBUTOR ADDRESS AMOUNT** DATE (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION OF Business or Corporation Individual STREET OR P.O. BOX, CITY, STATE, AND ZIP) Returned MINOU RECEIVED CONTRIBUTION PAC Other (mo./day/yr.) \$211.46 109 Owns Ave Attall4, AC 35954 \$211.46 TOTAL CASH CONTRIBUTIONS THIS PAGE **FORM REVISED 10.27.2011** 

Jeffrey Wocker Bray

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

# FORM 3: In-Kind Contributions received by candidate or elected official

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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 thi			Jse F URE						se lis		irce	:		
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	 	1	Consultants/	CHEC	K ON	Rent (a		1	Business/ Corporation	CHEC	K ON	E)	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
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### ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL

# 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.

	DO NOT LIST cash or in-ki	nd c	ontrii	outio	ns on this form. Use Forms 2 and 3 for tho	se lis	tings	<b>S</b> .				
SOURCE OF RECEIPT	ADDRESS	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	R	ECEI (CH	PT S ECK (	OUR ONE)	DATE	AMOUNT	
(INCLUDE FULL NAME)	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX.	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.)	AMOUNT OF RECEIPT
FORM REVISED 10.27.2011	TOTAL RECEIPTS THIS PAGE											

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

# FORM 5: Expenditures by candidate or elected official

Jeffrey Jade Bush NAME OF CANDIDATE OR ELECTED OFFICIAL:



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PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Advertising Advertising Advertising	Consultants/ Polling Charitable Contribution	Food	Fundraising Loan	Repayment Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
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### 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.

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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	Charitable	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
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