### FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

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

FILED

JAN 3 0 2023

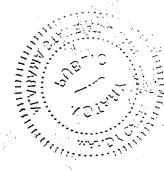
SCOTT W. HASSELL

	Please Print in Ink or Type.			_	JUD	GE OF PROBATE
			Party/Ballot Affiliation	Calendar Year covered by this	report	
Office Sought or Held (include district or circuit number, if applicable)		1	1/4	covered by this	report.	
Office Sought or Held (include district or circuit number, if applicable)					$\Box$ A	Amended Annual Report
Ade	ress Check box if reporting new address			_		Termination Report
7.00				Total Danca is		in.
City	Po Sex 764 State, ZIP Code	Telephor	ne Number	Total Pages in Include this page		
	AHAILA AL 35954			your count.	(*C)55040/	
S	ECTION I - Summary of activity from last file	ed rep	ort through De	ecember 31 of	repo	rting vear
1	Beginning balance (ending balance from previous filing				1	5494
	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				J	
4a	Total itemized receipts from other sources (total from Fo	orm 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)	6a			
6b	Non-itemized expenditures		6b			
6c	Total expenditures on line of credit (add lines 6a and 6t	)	6c	\$0.00		
7	Ending balance (add lines 1, 2c, & 4c, then subtract line	5c)			7	<b>59 4</b> \$0.00
S	ECTION II - Summary of activity for entire re	portir	ng year - Janua	ary 1st throug	h Dec	ember 31st
8	Beginning balance (as of January 1 of reporting year)				8	
9	Total cash contributions for year				9	
10	Total in-kind contributions for year		10			
11	Total receipts from other sources for year				11	
12	Total expenditures for year				12	
13	Total expenditures on line of credit for year		13			
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 3	31)	15	7	,	1
affir the i is a f	equired by the Alabama Fair Campaign Practices Act, I hereby swe in to the best of my knowledge and belief that the attached report(s) information contained herein are true and correct and that this information complete statement of all contributions, expenditures, and coired information during the applicable period of time.	and ation	Sworn to and subscribe year 223. M the year 2025  Signature of Notary Pb	y commission expires t	the 20	day of of the of
Sign	pature of Candidate or Elected Official Date		Print Notary's Name	Mulley		FORM REVISED 5.24.2017

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SCOTT WINDSELL



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### FORM 2: CONTRIBUTIONS RECEIVED BY CANDIDATE OF ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL:	TO THE MILES		74	111	1		PAG	E OF		
The FCPA requires that those contributions	greater than \$100 be itemized. DO NOT LIST in-kind contributions or	loan	s on	this	form	ı. Us	e Forms 3 and 4 f	or those listings.		
CONTRIBUTOR	4000500	OF	CO	OURO NTRII ECK (	BUTI	ON				
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation	Business or Corporation Individual		PAC Other		DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION		
TOTAL CASH CONTRIBUTIONS THIS PAGE										

## FORM 3: IN-KIND CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL NAME OF CANDIDATE / ELECTED OFFICIAL: NAME OF CANDIDATE / ELECTED OFFICIAL:

NAME OF CANDIDATE / ELECTED C	PETICIAL.	1	$-/\!\!\!\!/$	100	70		-/		T/U	1116				PAGE	- OF
The FCPA requires that those	contributions greater than \$100 be itemized	d. <b>D</b>	O N	of	LIS	Гса	sh o	r lo	ans	on tl	nis f	orm	. Us	e Forms 2 and 4	I for those listings.
	ADDRESS  (ADDRESS SHOULD INCLUDE  STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)							l	SOURCE (CHECK ONE)					
CONTRIBUTOR (INCLUDE FULL NAME)		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		1													
	$\mathcal{N}/\mathcal{A}$	H													
	, ,														
FORM REVISED 10.29.99  TOTAL IN-KIND CONTRIBUTIONS THIS PAGE											\$0.00				

Alabama Fair Campaign Practices Act

EXPENDITURE AMOUNT BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTIONS TO OTHER CANDIDATES POLITICAL PARTIES, AND POLITICAL COMMITTEES Я \$0.00 EXPENDITURE PAGE (mo /day/yr.) DATE OF TOTAL EXPENDITURES THIS PAGE **EXPLANATION** OTHER GIVE BRIEF PURPOSE OF EXPENDITURE Transportation The FCPA requires that expenditures over \$100 be itemized. (CHECK ONE) биіброд Loan Repayment Fundraising Food Contribution Consultants/ Polling **Advertising** Administrative (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) ADDRESS FORM 5: EXPENDITURES NAME OF CANDIDATE / ELECTED OFFICIAL: PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) FORM REVISED 10.29.99

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

## FORM 6: Expenditures On Line of Credit/by candidate of elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:



EXPENDITURE AMOUNT When total expenditures to a single recipient exceed \$106.00, the FCPA requires all expenditures to that recipient be itemized. EXPENDITURE (mo./day/yr.) DATE OF **EXPLANATION** OTHER GIVE BRIEF PURPOSE OF EXPENDITURE (CHECK ONE) Interest Transportation бијброт Fundraising Food Contribution Polling Consultants/ Advertising Administrative (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) ADDRESS PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)

0.00

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**TOTAL EXPENDITURES THIS PAGE** 

FORM REVISED 5.19,2017