

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

AUG 2 4 2020

SCOTT W. HASSELL

Type of Report (check one)
Monthly Amended Monthly
Weekly Amended Weekly
For Monthly Reports Month for which the report is filed.
For Weekly Reports Date of Friday in the week for which the report is filled.
Total Number of

Please Print in Ink or Type.

Name of Candidate or Elected Official

Political Party/Ballot Affiliation

Por Mont report

Office Sought or Held (include district or circuit number, if applicable)

Concil pace

Address Check box if reporting new address

To 70 Moin St

City State ZIP Code Telephone Number

City State 3952 205-589-6211

Summary of activity since last filed report

1 Beginning balance (ending balance from previous filing)

Cash Contributions

2a Itemized cash contributions (total from Form 2)

2a

S	ummary of activity since last filed report					60(37)	1
1	Beginning balance (ending balance from previous filing)			1		O	
	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)		V.	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			8				
5a	Itemized expenditures (total from Form 5)	5a]'/			
5b	Non-itemized expenditures	5b					
5c	Total expenditures (add lines 5a and 5b)			5c	11		\$0.00
	Expenditures on Line of Credit				•		
6a	Itemized expenditures (total from Form 6)	6a					
6b	Non-itemized expenditures	6b					
6c	Total expenditures on credit (add lines 6a and 6b)	6c	\$0.00				
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			7		0	\$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 Condidate or Floring Official

18-24-20

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Ang	of the year _	2620	My commis	ssion expires
the 3	_ day of Ja	n of	the year 21	160
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Signature of N	lotary Public	and the same of th		
Tere	sa Hu	tehen	2ر	
Print Notary's	Name			

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