

ANNUAL



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

FILED

JUL 29 2020

SCOTT W. HASSELL
JUDGE OF PROBATE

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A

Please Print in Ink or Type.

Name of Candidate or Elected Official SCOTT REEVES		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) MAYOR			
Address <input type="checkbox"/> Check box if reporting new address SAME			
City HOKES BLUFF,	State AL.	ZIP Code 35903	Telephone Number 256 312 2515

Calendar Year covered by this report. **2020**

Amended Annual Report
 Termination Report

Total Pages in Report Include this page in your count. **7**

SECTION I - Summary of activity from last filed report through December 31 of reporting year

1	Beginning balance (ending balance from previous filing)		1	-0-	
Cash Contributions					
2a	Itemized cash contributions (total from Form 2)	2a	300.00		
2b	Non-itemized cash contributions	2b	-		
2c	Total cash contributions (add lines 2a and 2b)	2c	300.00	\$0.00	
In-Kind Contributions					
3a	Itemized in-kind contributions (total from Form 3)	3a	50.00		
3b	Non-itemized in-kind contributions	3b	-		
3c	Total in-kind contributions (add lines 3a and 3b)	3c	50.00	\$0.00	
Receipts from Other Sources					
4a	Total itemized receipts from other sources (total from Form 4)	4a	-0-		
4b	Total non-itemized receipts from other sources	4b	-0-		
4c	Total receipts from other sources (add lines 4a and 4b)	4c	-0-	\$0.00	
Expenditures					
5a	Itemized expenditures (total from Form 5)	5a	404.00		
5b	Non-itemized expenditures	5b	-0-		
5c	Total expenditures (add lines 5a and 5b)	5c	404.00	\$0.00	
Expenditures on Line of Credit					
6a	Itemized expenditures on line of credit (total from Form 6)	6a	-0-		
6b	Non-itemized expenditures	6b	-0-		
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c	-0-	\$0.00	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	-104.00	\$0.00	

SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

8	Beginning balance (as of January 1 of reporting year)	8	-0-		
9	Total cash contributions for year	9	300.00		
10	Total in-kind contributions for year	10	50.00		
11	Total receipts from other sources for year	11	-0-		
12	Total expenditures for year	12	404.00		
13	Total expenditures on line of credit for year	13	-0-		
14	Ending balance (add lines 8, 9, & 11, then subtract line 12)	14	-104.00	\$0.00	
15	Total campaign debt (total debt owed as of December 31)	15	-0-		

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 Candidate or Elected Official

7-29-20
Date

Sworn to and subscribed before me this 29 day of July of the year 2020. My commission expires the 2 day of Jan of the year 2022.

Signature of Notary Public

Lisa Couch Johnson
Print Notary's Name

**FORM 2: Contributions** received by candidate or elected official

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 in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	SOURCE OF CONTRIBUTION (CHECK ONE)						DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Business or Corporation	Individual	PAC	Other	Returned			
Barry Bottoms			<input checked="" type="checkbox"/>				7-9-20	100. ⁰⁰	
James Wise			<input checked="" type="checkbox"/>				7-17-20	100. ⁰⁰	
Nick Marbut			<input checked="" type="checkbox"/>				7-19-20	100. ⁰⁰	
	TOTAL CASH CONTRIBUTIONS THIS PAGE							\$0.00	



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

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 this form. Use Forms 2 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)											SOURCE (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION	
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other							
Scott Reeves	7271 Bethard Rd. Hokes Bluff, AL.	✓																	7-7-20	50.00
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																			\$0.00	



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.

SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other			
TOTAL RECEIPTS THIS PAGE												\$0.00	



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Scott Reeves

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)										DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE	
		Administrative	Advertising	Consultants/ Polling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION			
SCOTT REEVES	7271 BEARD RD. HOKES BLUFF, AL. 35903											✓	6-29-20	20.00
													7-9-20	49.00
													7-12-20	20.00
													7-14-20	15.00
CROSS GRAPHICS	TROY RD. HOKES BLUFF, AL. 35903		✓										7-9-20	300.00
TOTAL EXPENDITURES THIS PAGE													404.00 \$0.00	

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.

PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	PURPOSE OF EXPENDITURE (CHECK ONE)										DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE	
		Administrative	Advertising	Consultants/ Polling	Contribution	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION			
TOTAL EXPENDITURES THIS PAGE														
FORM REVISED 5.19.2017													\$ 0.00	