



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

THIS AREA FOR OFFICIAL USE ONLY

20200717000299000 1/5 \$.00
Shelby Cnty Judge of Probate, AL
07/17/2020 11:39:40 AM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official Russell (Rusty) Nix		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) Mayor			
Address ☐ Check box if reporting new address 686 Salem Road			
City Montevallo	State AL	ZIP Code 35115	Telephone Number [REDACTED]

Type of Report (check one)

☐ Monthly☒ Amended Monthly☐ Weekly☐ Amended WeeklyFor Monthly Reports
Month for which the
report is filed.**June**For Weekly Reports
Date of Friday in the
week for which the
report is filed.Total Number of
Pages in Report**3**

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	1650.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	750.00	
2b	Non-itemized cash contributions	2b	378.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	1128.00	\$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				
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				
5a	Itemized expenditures (total from Form 5)	5a	500.00	
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c	500.00	\$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	2278.00	\$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.

Russell Nix
Signature of Candidate or Elected Official

7-16-20
Date

Sworn to and subscribed before me this **16th** day of **July** of the year **2020**. My commission expires the **10th** day of **April** of the year **2024**.

Connie S. Powell
Signature of Notary Public
Connie S. Powell
Print Notary's Name

Shelby County Probate Judge's Office
Judge of Probate, Shelby County Alabama
P.O.Box 825, Columbiana, AL 35051
Recording: 205-669-3720

Receipt for Services

Cashier CATHY

Batch # 333319

Date: 06/02/2020 Time: 11:01:38AM

Date	Instrument No	Document Type	Transaction Type	MortAmt	Taxes	Pages	ConsAmt	Pg/Amt
6/2/2020 11:01:38AM	20200602000220830	PREREPOR	T1	0.00	0.00	3	0.00	3

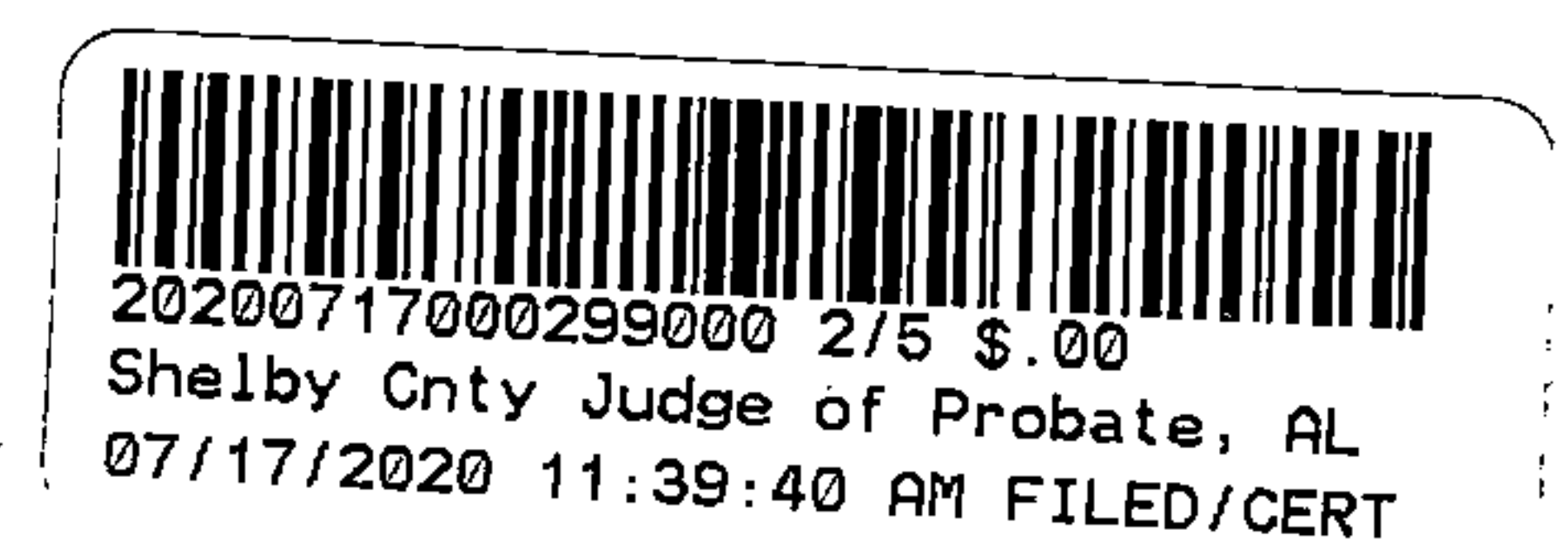
Party 1: RUSSELL RUSTY NIX ELECTION
COMMITTEE

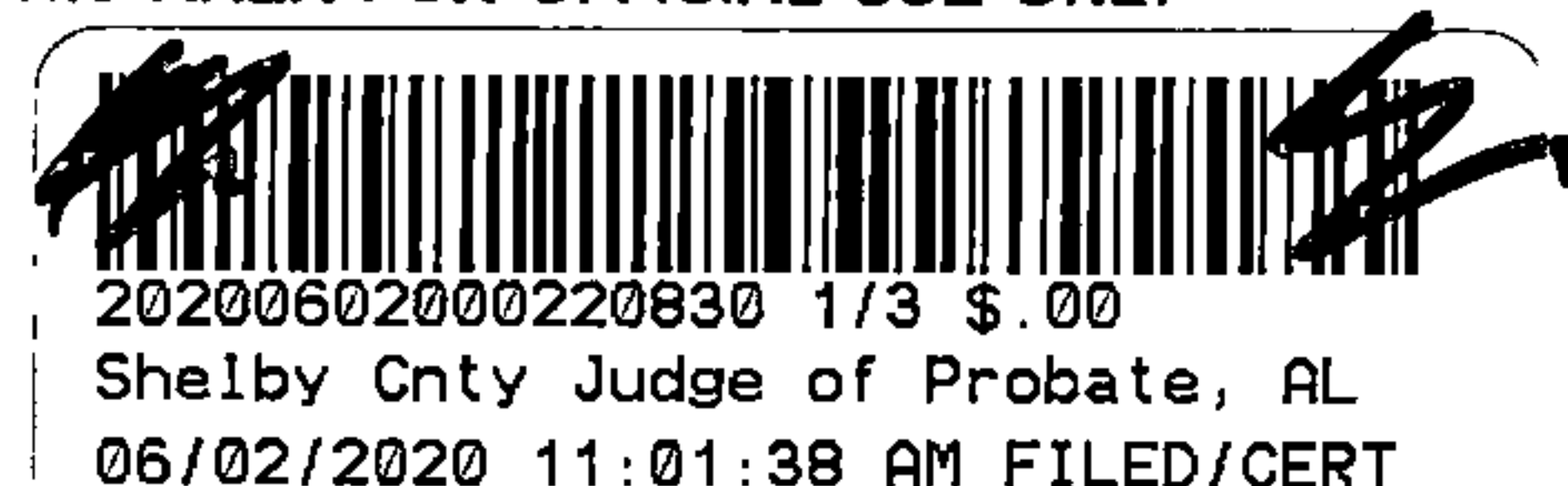
Party 2: MAYOR OF MONTEVALLO

PREREPOR

Total:

Fee Total:





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Please Print In Ink or Type.

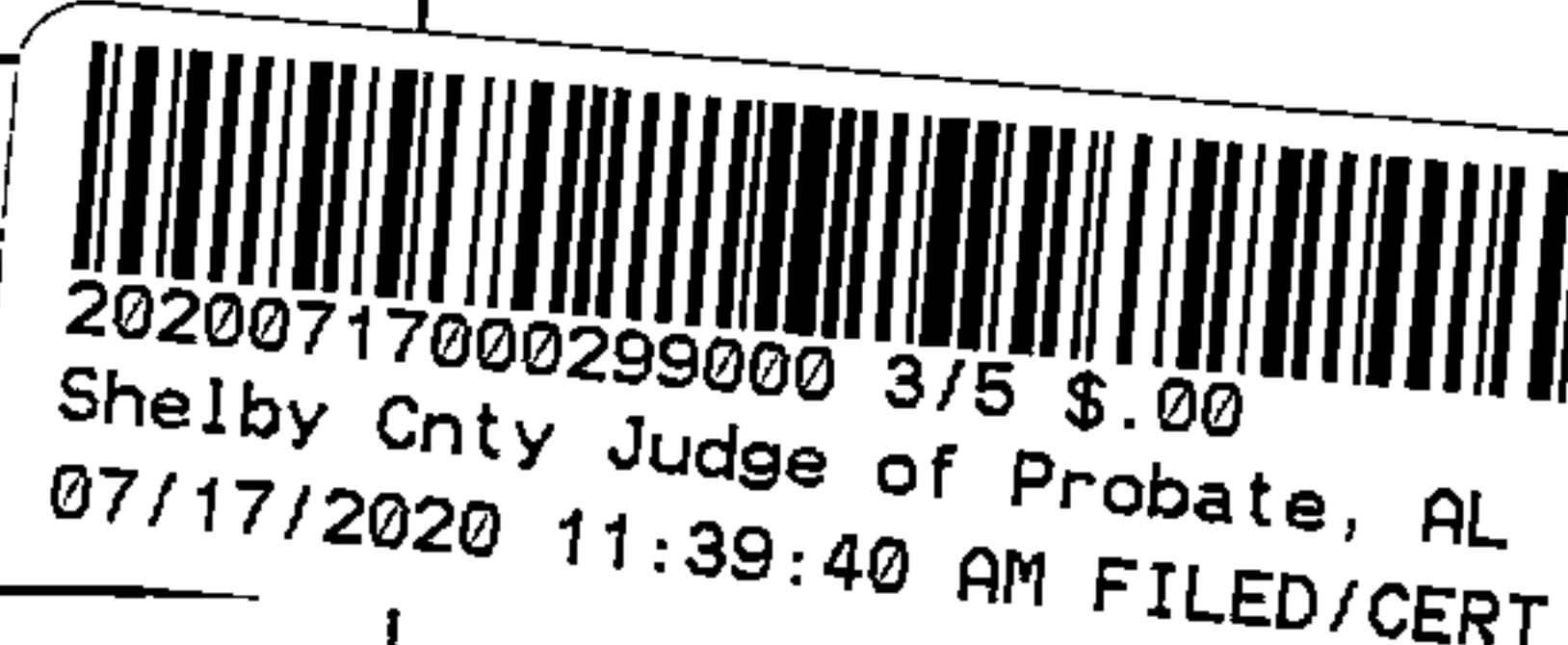
Name of Candidate or Elected Official Russell (Rusty) Nix Election Committee		Political Party/Ballot Affiliation RNEC	
Office Sought or Held (include district or circuit number, if applicable) Mayor of Montevallo			
Address ☐ Check box if reporting new address 6806 Salem Road			
City Montevallo	State AL	ZIP Code 35115	Telephone Number 205-910-0840

Type of Report (check one)

☒ Monthly ☐ Amended Monthly
☐ Weekly ☐ Amended Weekly
For Monthly Reports
Month for which the
report is filed.**June**For Weekly Reports
Date of Friday in the
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report is filed.Total Number of
Pages in Report**3**

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1	Beginning balance (ending balance from previous filing)		1	\$1050.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$750.00	
2b	Non-itemized cash contributions	2b	\$378.00	1128.00
2c	Total cash contributions (add lines 2a and 2b)	2c	\$2778.00	\$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		
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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.

Russell B Nix
Signature of Candidate or Elected Official

6-1-2020
Date

Sworn to and subscribed before me this **1st** day of **June** of the year **2020**. My commission expires the **10th** day of **April** of the year **2024**.

Connie S Powell
Signature of Notary Public

Connie S Powell
Print Notary's Name



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: Russell Rusty Nix

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		
Ed Czeskleba	5206 Salem Rd., Montevallo, AL 35115		✓				5/29/20	\$250.00
Russell Busby Nix	6806 Salem Rd., Montevallo, AL 35115		✓				5/30/20	\$500.00
 20200602000220830 2/3 \$.00 Shelby Cnty Judge of Probate, AL 06/02/2020 11:01:28 AM FILED/CERT  20200717000299000 4/5 \$.00 Shelby Cnty Judge of Probate, AL 07/17/2020 11:39:40 AM FILED/CERT							TOTAL CASH CONTRIBUTIONS THIS PAGE	\$750.00

FORM 5: Expenditures by candidate or elected official

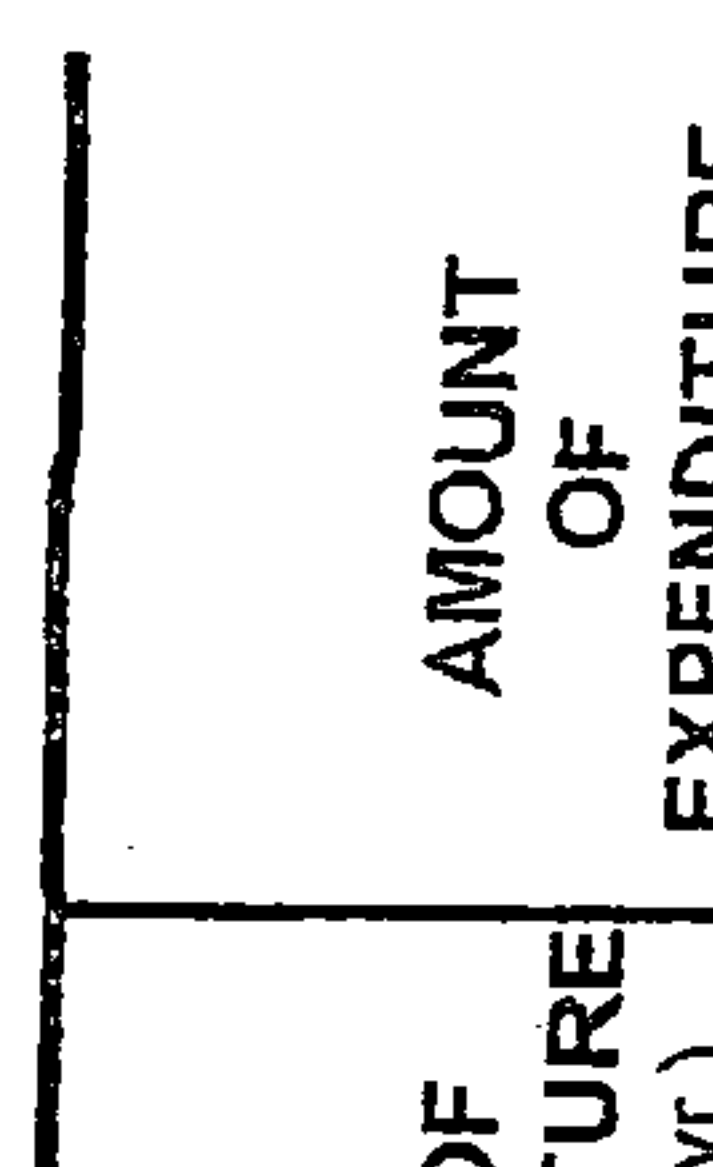
NAME OF CANDIDATE OR ELECTED OFFICIAL:



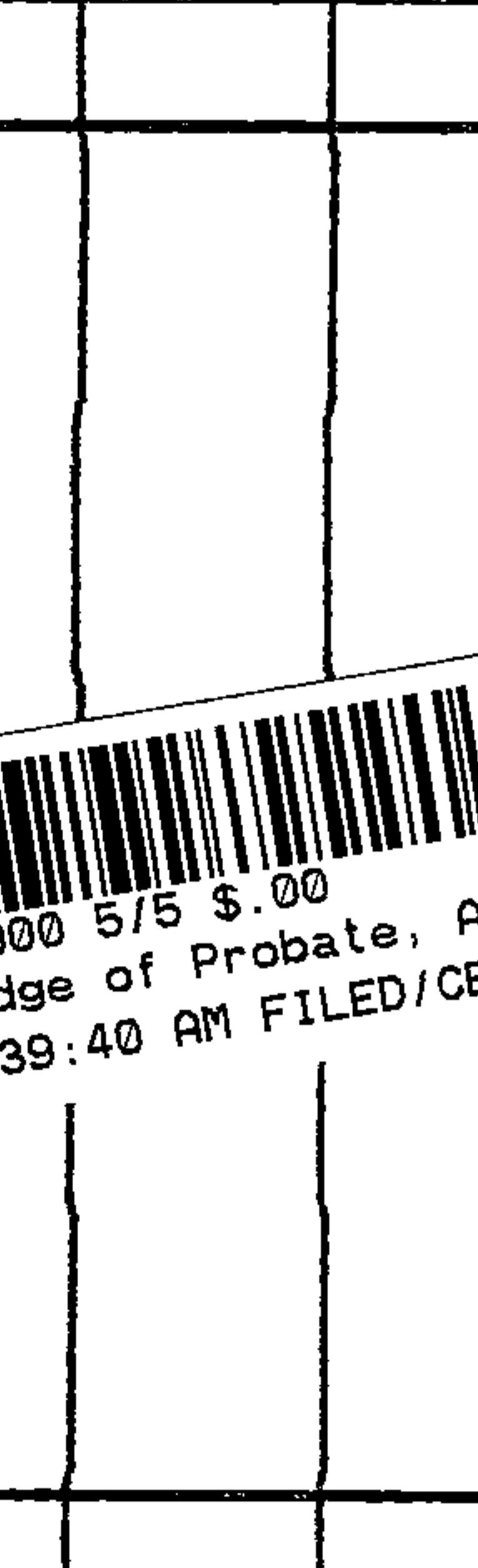
When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

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	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation			OTHER GIVE BRIEF EXPLANATION
Red State Strategies	P.O. Box 43564 B'ham, AL 35243			✓								5/14/20	\$500.00
TOTAL EXPENDITURES THIS PAGE												\$500.00	

FORM REVISED 10.27.2011



20200602000220830 3/3 \$.00
Shelby Cnty Judge of Probate, AL
06/02/2020 11:01:38 AM FILED/CERT



20200717000299000 5/5 \$.00
Shelby Cnty Judge of Probate, AL
07/17/2020 11:39:40 AM FILED/CERT