

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

		08	3/23/2016	11:52:	08 AM FILE	e, AL D/CERT				
Please Print in Ink or Type. Name of Candidate or Elected Official Political Party/Ba				Affiliation	Tyj	e of Repo	rt (checl	k one)		
INAL	RON SCOTT CAMPAIGN	M /	A	Ailliauoii	•		nthly		ded Monthly	y
Office Sought or Held (include district or circuit number, if applicable)			1\		Weekly			Amer	ded Weekly	/
PelyAM CITY COVIVE12						r Monthly I	-		·	
Address						onth in which ort is filed.	n tne			
1332 CALISTON WAY					For Weekly Reports Date of Friday in the week in which the					
City State ZIP Code Telephone Num			nber					9	19/16	
12 CHAM 35174					•	ort is filed.	_			
						tal Number ges in Rep				
S	ummary of activity since last filed report									
1	Beginning balance (ending balance from previous	filing)					1	597	100	
	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		
	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							
	Receipts from Other Sources				· ··. : '					
4a	Itemized Receipts from Other Sources (total from F	Form 4)	4a							
4b	Non-itemized Receipts from Other Sources		4b							
4c	Total receipts from other sources (add lines 4a and	d 4b)					4c		0	
	Expenditures									.:
5a	Itemized expenditures (total from Form 5)		5a							
5b	Non-itemized expenditures		5b	<u>-</u>						<u></u>
5c	Total expenditures (add lines 5a and 5b)						5c			
6	Ending balance (add lines 1, 2c, & 4c, then subtract	line 5c)		.: . ·			6	396	.00	
Ca	ndidates for State Office: File this report with the Office	of the Se	cret	ary of Stat	:e.		•			
Ca	ndidates for County or Municipal Office: File this repor	rt with the	Juc	lge of Prol	oate c	of the cour	ity in w	hich the off	ce is soug	jht.
As r	equired by the Alabama Fair Campaign Practices Act, I hereby	Swor	n to	and subso	cribed	before me	e this _	2310	day of	
swear or affirm to the best of my knowledge and belief that the				of tl	he yea	ar 20	Ile	. My commi	ssion expi	res
attached report(s) and the information contained herein are true and correct and that this information is a full and complete the					•	April		•	0,8	
statement of all contributions, expenditures, and other required							re year		- ·	
information during the applicable period of time.										
	1 Jun 1 5/73/6	Signa	ture	of Notary Pu	blic			<u> </u>		

Print Notary's Name