

WEEKLY & MONTHLY


**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

Political Action Committee Campaign Finance Report SUMMARY FORM 1


 20160928000355250 1/2 \$.00
 Shelby Cnty Judge of Probate, AL
 09/28/2016 11:28:25 AM FILED/CERT

Please Print in Ink or Type.

Name of Political Committee (as appears on Statement of Organization) RON SCOTT CAMPAIGN		Acronym for PAC	
Address (as appears on Statement of Organization) <input type="checkbox"/> Check box if reporting new address 1332 CALISTON WAY			
City PELHAM	State AL	ZIP Code 35124	Telephone Number [REDACTED]

Type of Report (check one)

- ☐ Monthly ☐ Amended Monthly
☐ Weekly ☒ Amended Weekly

For Monthly Reports

Month in which the report is filed.

For Weekly Reports

Date of Friday in the week in which the report is filed.

Total Number of Pages in Report

8/26

2

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	592.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	500.00	
2b	Non-itemized cash contributions	2b	300.00	
2c	Non-itemized employee payroll contributions	2c		
2d	Total cash contributions (add lines 2a, 2b, and 2c)	2d	800.00	
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		
Receipts from Other Sources				
4a	Total itemized receipts from other sources (total from Form 4)	4a		
4b	Total non-itemized receipts from other sources	4b		
4c	Total receipts from other sources (total from Form 4)	4c		
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a		
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c		
6	Ending balance (add lines 1, 2d, & 4c, then subtract line 5c)	6	1392.00	

 Sworn to and subscribed before me this 26th day of August of the year 2016. My commission expires the 25 day of April of the year 2020.

Signature of Notary Public

Printed Name of Notary Public

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 Chairperson or Treasurer of Political Committee

8/26/16

Date

NAME OF POLITICAL ACTION COMMITTEE: KON SCOTT CAMPALIGAN

DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

[illegible]