



Political Action Committee Campaign Finance Report SUMMARY FORM 1



20200803000325660 1/6 \$.00
Shelby Cnty Judge of Probate, AL
08/03/2020 10:08:35 AM FILED/CERT

Please Print in Ink or Type.

Name of Political Action Committee (as appears on statement of Organization)		Acronym for PAC	
Committee to Elect Scott Summerlin			
Address (as appears on Statement of Organization) ☒ ☐ Check box if reporting new address			
101 Rowntree Path			
City	State	ZIP Code	Telephone Number
Helena	Alabama	35080	()

Type of Report (check one)

☒ Monthly☐ Amended Monthly☐ Weekly☐ Amended Weekly

For Monthly Reports

Month for which the report is filed.

July 2020

For Weekly Reports

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

Total Number of Pages in Report

5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	\$0.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$1,025.00	
2b	Non-itemized cash contributions	2b	\$480.00	
2c	Non-itemized employee payroll contributions	2c		
2d	Total cash contributions (add lines 2a, 2b and 2c)	2d	\$1,505.00	
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	\$1,028.73	
3b	Non-itemized in-kind contributions	3b	\$0.00	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$1,028.73	
Receipts from Other Sources				
4a	Itemized Receipts from Other Sources (total from Form 4)	4a	\$320.00	
4b	Non-itemized Receipts from Other Sources	4b	\$0.00	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$320.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	\$1,277.20	
5b	Non-itemized expenditures	5b	\$10.00	
5c	Total expenditures (add lines 5a and 5b)	5c	\$1,287.20	
Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a	\$0.00	
6b	Non-itemized expenditures	6b	\$0.00	
6c	Total expenditures on credit (add lines 6a and 6b)	6c	\$0.00	
7	Ending balance (add lines 1, 2d, & 4c, then subtract line 5c)	7	\$537.80	

Sworn to and subscribed before me this 3 day of August of the year 2020. My commission expires the 22 day of February of the year 2022.

Jessica L. Holland

Signature of Notary Public

Jessica L. Holland

Print Notary's Name

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]
Signature of Chairperson or Treasurer of Political Committee

Date

08-03-20



FORM 3: In-Kind Contributions received by political action committee

NAME OF POLITICAL ACTION COMMITTEE: Committee to Elect Scott Summerlin

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 contributions 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 (not a corporation)	Corporation	Individual	Other		
Scott Summerlin	101 Rowntree Path, Helena, AL, 35080		✓									✓		7/14/2020	\$ 1,028.73
TOTAL IN-KIND CONTRIBUTIONS THIS PAGE															\$ 1,028.73

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FORM 4: Receipts from Other Sources loans, interest, and other sources of income

NAME OF POLITICAL ACTION COMMITTEE: Committee to Elect Scott Summerlin

When total contributions from a single source exceed \$100.00, the FCRA 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 [FCRA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)				DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
		Interest	Loan	Other		Lending Institution	Individual	Business	Other			
Scott Summerlin	101 Rowntree Path, Helena		☒		Scott Summerlin 101 Rowntree Pa		☒				6/30/2020	\$ 200.00
Scott Summerlin	101 Rowntree Path, Helena		☒		Scott Summerlin 101 Rowntree Pa		☒				7/7/2020	\$ 120.00
TOTAL RECEIPTS THIS PAGE												\$ 320.00

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