



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY



20200813000348830 1/5 \$.00
Shelby Cnty Judge of Probate, AL
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DAILY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official RICK WASH		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) PELHAM CITY COUNCIL PLACE #3			
Address ☐ Check box if reporting new address 106 INDIAN LANDING RD			
City PELHAM	State AL	ZIP Code 35127	Telephone Number

Date Covered by Report

08/08-14/20

☐ Amended Daily Report

Total Number of Pages
in Report

5

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	1,000.00
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 \$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 \$0.00
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a	
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	\$ 75.00
Expenditures on Line of Credit			
6a	Itemized expenditures on line of credit (total from Form 6)	6a	
6b	Non-itemized expenditures on line of credit	6b	
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c	\$0.00
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	\$ 925.00

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.

Signature of Candidate or Elected Official

Date

08/13/20

Sworn to and subscribed before me this **13th** day of **August** of the year **2020**. My commission expires the **28th** day of **March** of the year **2022**.

Cherry Green

Signature of Notary Public

Print Notary's Name

CHERRY GREEN
Notary Public
State of Alabama

FORM 2: CONTRIBUTIONS RECEIVED BY CANDIDATE OR ELECTED OFFICIAL

NAME OF CANDIDATE / ELECTED OFFICIAL: Kick WASH

The FCPA requires that those contributions greater than \$100 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		
N/A								
TOTAL CASH CONTRIBUTIONS THIS PAGE								\$0.00

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Rec Wash

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		
None															
FORM REVISED 9.2.2011		TOTAL IN-KIND CONTRIBUTIONS THIS PAGE													\$0.00

NAME OF CANDIDATE OR ELECTED OFFICIAL:

[illegible]

TOTAL EXPENDITURES THIS PAGE

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