



Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

20200821000364290 1/5 \$0.00
Shelby Cnty Judge of Probate, AL
08/21/2020 01:24:29 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official KICK WASH		Political Party/Ballot Affiliation	
Office Sought or Held (include district or circuit number, if applicable) PELHAM City Council			
Address ☐ Check box if reporting new address 106 INDIAN LANDING ROAD			
City PELHAM	State AL	ZIP Code 35124	Telephone Number [REDACTED]

Type of Report (check one)

☐ Monthly☐ Amended Monthly☒ Weekly☐ Amended WeeklyFor Monthly Reports
Month for which the report is filed.For Weekly Reports
Date of Friday in the week for which the report is filed.

Total Number of Pages in Report

08/21/2020**5**

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	925.00
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	1,250.00
2b	Non-itemized cash contributions	2b	
2c	Total cash contributions (add lines 2a and 2b)	2c	1,250.00
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	1,500.00
5b	Non-itemized expenditures	5b	
5c	Total expenditures (add lines 5a and 5b)	5c	\$1,500.00
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	\$675.00

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

08/21/20

Sworn to and subscribed before me this **21** day of **Aug** of the year **2020**. My commission expires the **22** day of **Feb** of the year **2022**.

Signature of Notary Public

Print Notary's Name

Jessica L. Holland



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: PICK WATTS

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		
JEFF MINER	35216 2100 LONGLEAF DR BIRMINGHAM		☒				08/18/20	\$250.00
JOHN BRUNSON	35094 8020 PARKWAY DR LEEDS, AL		☒				08/18/20	\$1,000.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								\$1,250.00

20200821000364290 2/5 \$.00
Shelby Cnty Judge of Probate, AL
08/21/2020 01:24:29 PM FILED/CERT

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE/ELECTED OFFICIAL



FORM 3: In-Kind Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

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				
N/A																	
		TOTAL IN-KIND CONTRIBUTIONS THIS PAGE														\$0.00	



20200821000364290 3/5 \$.00
Shelby Cnty Judge of Probate, AL
08/21/2020 01:24:29 PM FILED/CERT

FORM REVISED 9.2.2011

TOTAL IN-KIND CONTRIBUTIONS THIS PAGE

\$0.00



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

NAME OF CANDIDATE OR ELECTED OFFICIAL: _____

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 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 [FCPA 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	PAC	Individual	Business	Other			
N/A													
TOTAL RECEIPTS THIS PAGE													

20200821000364290 4/5 \$.00
Shelby Cnty Judge of Probate, AL
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ALABAMA FAIR CAMPAIGN PRACTICES ACT

BY CANDIDATE OR ELECTED OFFICIAL - INCLUDING CONTRIBUTIONS TO OTHER CANDIDATES, POLITICAL PARTIES, AND POLITICAL COMMITTEES

FORM 5: EXPENDITURES

NAME OF CANDIDATE / ELECTED OFFICIAL: _____ PAGE _____ OF _____

The FCPA requires that expenditures over \$100 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	Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation			OTHER GIVE BRIEF EXPLANATION
MEZ GRAPHICS			✓								MAIL OUTS	08/19/20	\$1,500.00
TOTAL EXPENDITURES THIS PAGE												\$1,500.00	