

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1



20200824000367890 1/4 \$0.00
Shelby Cnty Judge of Probate, AL
08/24/2020 01:37:10 PM FILED/CERT

Please Print in Ink or Type.

Name of Candidate or Elected Official RONALD SCOTT		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) PELHAM CITY COUNCIL PLACE #2			
Address ☐ 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 WeeklyFor Monthly Reports
Month for which the
report is filed.**1**For Weekly Reports
Date of Friday in the
week for which the
report is filed.**8/20/2020**Total Number of
Pages in Report**4**

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	150.00
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	1500.00
2b	Non-itemized cash contributions	2b	1200.00
2c	Total cash contributions (add lines 2a and 2b)	2c	2700.00 \$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	0 \$0.00
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	2850.00 \$0.00

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.

Ronald Scott
Signature of Candidate or Elected Official
8/24/20
Date

Sworn to and subscribed before me this **24** 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

FORM 2: Contributions received by candidate or elected officialNAME OF CANDIDATE OR ELECTED OFFICIAL: RONALD SCOTT

When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized.

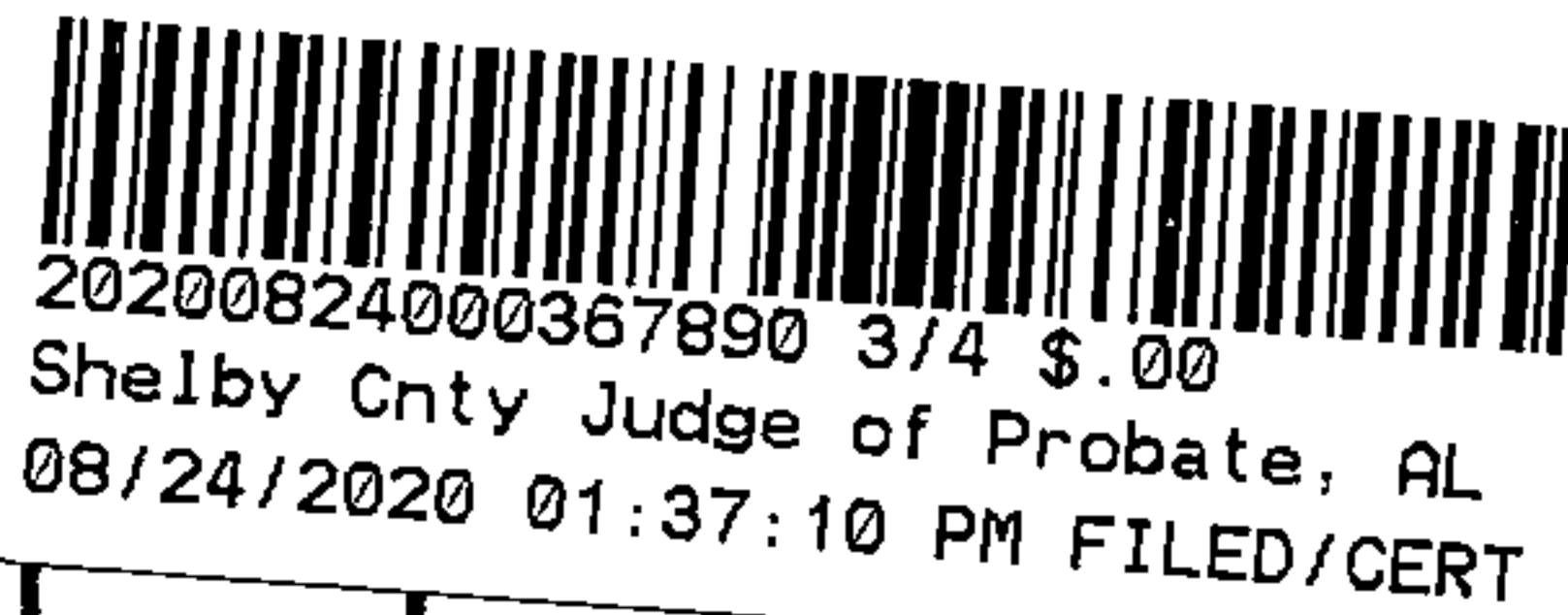
DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

20200824000367890 2/4 \$.00
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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		
			✓				8/15/2020	\$ 100.00
			✓				8/15/2020	\$ 100.00
			✓				8/15/2020	\$ 100.00
			✓				8/17/2020	100.00
			✓				8/17/2020	100.00
			✓				8/17/2020	100.00
GLENN DURROUGH	P.O. Box 3443 Hueytown, AL 35023		✓				8/15/2020	500.00
			✓				8/17/2020	100.00
			✓				8/17/2020	100.00
			✓				8/17/2020	100.00
JOHN B. BRUNSON	8020 PARKWAY DR, LEEDS, AL 35094		✓				8/17/2020	1000.00
			✓				8/18/2020	100.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								2,200.00

FORM 2: Contributions received by candidate or elected officialNAME OF CANDIDATE OR ELECTED OFFICIAL: KONALD SCOTT

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		
			✓				8/19/2020	100.00
			✓				8/19/2020	100.00
			✓				8/19/2020	100.00
			✓				8/20/2020	100.00
			✓				8/20/2020	100.00
TOTAL CASH CONTRIBUTIONS THIS PAGE								\$ 500.00

FORM 5: Expenditures by candidate or elected official

RONALD SCOTT



**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)**

Administrative
Advertising
Consultants/ Polling
Charitable Contribution
Food
Fundraising
Loan Repayment
Lodging
Transportation

OTHER
GIVE
BRIEF
EXPLANATION

**DATE OF
EXPENDITURE**
(mo./day/yr.)

**AMOUNT
OF
EXPENDITURE**



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[illegible]

FORM REVISED 10.27.2014

TOTAL EXPENDITURES THIS PAGE

50.00