Name of Candidate or Elected Official

JOHN

Office Sought or Held (include district or circuit number, if applicable)

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

FORM REVISED 06.06.2017

TIS AREA FOR OFFICIAL USE ONLY

FILED

AUG 1 5 2022

Amended Monthly

Amended Weekly

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

SCOTT W. HASSELL
JUDGE OF PROBATE
Type of Report (check one)

Monthly

Weekly

For Monthly Reports Month for which the

report is filed.

•	luyor or badsded			For Weekly Re	eports		
Ad	Beginning balance (ending balance from previous filing) Cash Contributions Itemized cash contributions (total from Form 2)						
Cit	SO George Wallace DR, #102	_	3 ~7		the	1/12/	22
6	Pad School AL 35903 672-	mber, 21	140				
	112404 /12 33163	~ >	77	Pages in Repo	ort		
	ummary of activity since last filed report					V. S. B. A. V.	45 4.25
1	Beginning balance (ending balance from previous filing)	T			1 2	25,83)
	Cash Contributions					0-	
		2a	100		1		
2b	Non-itemized cash contributions	2b	0				
2C	Total cash contributions (add lines 2a and 2b)				2c /	100	\$0.00
	In-Kind Contributions						
Ba	Itemized in-kind contributions (total from Form 3)	За	0	1,			
Bb	Non-itemized in-kind contributions	3b	O				
3C	Total in-kind contributions (add lines 3a and 3b)	3c	0	\$0.00			
	Receipts from Other Sources				J _e		
·a	Itemized Receipts from Other Sources (total from Form 4)	4a	725	-			
b	Non-itemized Receipts from Other Sources	4b	0				
С	Total receipts from other sources (add lines 4a and 4b)				4c '	+25	\$0.00
	Expenditures	1		ı)	,,,,,	+++++
a	Itemized expenditures (total from Form 5)	5a	805				
b	Non-itemized expenditures	5b	0				
c	Total expenditures (add lines 5a and 5b)				5c 9	305	\$0.00
	Expenditures on Line of Credit			d			70.00
a	Itemized expenditures (total from Form 6)	6a	0				
b	Non-itemized expenditures	6b	Ō				
С	Total expenditures on credit (add lines 6a and 6b)	6c	0	\$0.00			
	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)			,	7 2	45.83	50-00
: r				*******************		, -, 00	74.00
VA:	equired by the Alabama Fair Campaign Practices Act, I hereby	n to	and subscrib	ed before me	this	15	Inf.

August of the year 2023

Signature of Notary Public

Print Notary's Name

Political Party/Ballot Affiliation

CHED

AUS 1 5 2029

JUDGE OF PROBATE

HASSELL	∇I	SCOTT

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

FORM 2: Contributions received by candidate or elected official



NAME OF CANDIDATE OF ELECTED OFFICIAL: DR. JOHN JOCOBS

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. SOURCE OF CONTRIBUTION (CHECK ONE) **AMOUNT** DATE **ADDRESS** CONTRIBUTOR OF Business or Corporation Individual PAC CONTRIBUTION (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) Returned STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED (mo./day/yr.) 677 Red Bud CLR 8/6/22 \$100 MR. & MRS. Perry Register Sumter SC 29150 #100 TOTAL CASH CONTRIBUTIONS THIS PAGE **FORM REVISED 10.27.2011**

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR POLITICAL ACTION COMMITTEE

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



NAME OF POLITICAL ACTION COMMITTEE: DR. JOHN Jacobs

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.

	ADDOGGO		FORA RECE		COMPLETE THIS BLOCK IF RECEIPT IS A LOAN	R	ECEI (CH	PT S				44000
SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Interest	Loan	Other	GUARANTORS [FCPA REQUIRES FULL NAME AND COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING OR GUARANTEEING LOAN]		PAC	Individual	Business	Other	RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
John Jacobs	1021 Warmwright A Gadsder, AL 35903	ę			John Jacobs 1021 Hawwish Are Gardsden, AL 35903			V			8/4/22	#725
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TOTAL RECEIPTS THIS PAGE

725

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

FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: DR. JOHN JOLDS



FORM REVISED 10.27.2011 UPS UPS PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME) When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized ADDRESS
(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) Gadsder, AL Gadsdew, AL Administrative Advertising Consultants/ Polling Charitable Contribution **TOTAL EXPENDITURES THIS PAGE** PURPOSE OF EXPENDITURE (CHECK ONE) Food **Fundraising** Loan Repayment Lodging Transportation GIVE BRIEF EXPLANATION OTHER 8/8/22 # 5,00 8/11/12 #800 EXPENDITURE (mo./day/yr.) DATE OF EXPENDITURE AMOUNT