MONTHLY & WEEKLY

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report

JAN 2 2 2024

SCOTT W. HASSELL

MOM	SUMMARY FORM 1 Please Print in Ink or Type.				Type of Repor	t (check thly	DGE OF PROBATE Amended Monthly
Nar	ne of Candidate or Elected Official	Political Party/8	Ballot	Affiliation	☐ Wee	kly	✓ Amended Weekly
-	Ton Craig Ford ce Sought or Held (include district or circuit number, if applicable)	NI	A		For Monthly F Month for whice		
		<u>' </u>			report is filed.	n me	
N	Nayor of Gadsden				For Weekly Re	11.50 CO.	08.08 to
	fress Check box if reporting new address				Date of Friday week for which		08.08 to
City	O BOX 8708 State ZIP Code	Telephone Nur	nher		report is filed.		00.19
		(256)39		009	Total Number Pages in Repo		9
	(0.00.80001						<u> </u>
S	ummary of activity since last filed report						Barrier Brown Brown Commence
1	Beginning balance (ending balance from previo	us filing)				1 6	57,166.96
	Cash Contributions						
2a	Itemized cash contributions (total from Form 2)		2a	13	,025.00		
2b	Non-itemized cash contributions		2b		Þ	1	
2c	Total cash contributions (add lines 2a and 2b)					2c	13,025.00.00
	In-Kind Contributions						
За	Itemized in-kind contributions (total from Form 3	3)	За		500.00		
3b	Non-itemized in-kind contributions		3b		ϕ		
3с	Total in-kind contributions (add lines 3a and 3b))	Зс		500.00		
	Receipts from Other Sources						
4a	Itemized Receipts from Other Sources (total fro	m 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	13	,864.19		
5b	Non-itemized expenditures		5b		ϕ		
5c	Total expenditures (add lines 5a and 5b)				•	5c	13,864.4900
	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 6	6b)	6c	,	\$0.00		
7	Ending balance (add lines 1, 2c, & 4c, then subtra	act line 5c)			7.77	7	54,327.730.00
swe atta true state	equired by the Alabama Fair Campaign Practices Act, I here are or affirm to the best of my knowledge and belief that ched report(s) and the information contained herein and correct and that this information is a full and complement of all contributions, expenditures, and other requiremation during the applicable period of time.	the are lete red the	rva 6	uj_of t	M. Cal	eysi the	day of My commission expires year <u>2024</u> .
Sign	nature of Candidate or Elected Official Date		-	5100	· n Car	Lall	///

Mind Broke Children Color December

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SCOTT W. HASSELL

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FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR E

FORM REVISED 10.27.2011

ibutions receive	d by candidate or elected official	<i>[7]</i>
LECTED OFFICIAL:	Graig For	

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. OF CONTRIBUTION (CHECK ONE) CONTRIBUTOR ADDRESS. DATE **AMOUNT** (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION OF Business or Corporation Individual PAC STREET OR P.O. BOX, CITY, STATE, AND ZIP) **RECEIVED** CONTRIBUTION (mo./dav/vr.) 171 Tenny Trail Pat & Mathy Sherrill 8-1022 100 God stem, AL 35901 David and Kelly Cochran 616 Bdlevue Drive 8/11/22 250. Gadsden, AL 35904 Richard Lindsey 14160 GRd 22 500. Centre, AL 35960 607 Laura Lanz NE 500.00 Don killingsworth Tacksonville, AL 36265 PO BOX 866 1.000 . Montagmery, AL 3610 Somerset Pass 1500.00 Godsden, M. 35901 119 oak Circle 100. Gadsam, AL 35901 340 South 2nd Street至 300.00 Fadsden. Az. 35901 300 Gwindale Road Gadsden, AL 3590 TOTAL CASH CONTRIBUTIONS THIS PAGE

FORM 2: Contributions received by candid

NAME OF CANDIDATE OR ELECTED OFFICIAL:

date or elected official	
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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.

001222		OF	SO CON (CHE		BUTI	ON					
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation	Individual	PAC	Other	Returned	RI	DATE TRIBU ECEIV Io./day/	ITION ED	AMOUNT OF CONTRIBUTION	
Stephen and Karen Blackstock	116 Monterest Point Gudsden, AL 35901		X				B	/u	22	250.00	
Standard Tile Marble and Terrazzo	60 Ewing Avenue Gadsden, AL 35901	Χ					4	,		500.00	
George and Anna Jummans	525 Mistletoe Hallow Road Gadsden, AL 35901		χ						22	, he	
David Abel	208 Hopkins Road Gadsden, AL 35957		χ				8	10	122	200.00	
Lisa Thacker	131 Kay Lu Drive Gadsden, AL 35957		X				,	•		200.0	
Dr. 6 Lewis Mitchell Anne Mitchell	321 Dogwood Circle Gadsden, AL 35901		X					<i>!</i>	.'	200,00	
Earnest D. Gordell	222 Argyle Circle Gadsden, AL 35981		X				3 3	10/	22	200.00	
John and Constance Brechin	314 Dogwood Circle Gadsden, AL 35981		V			1 1	,	•		-100.00	
Dr. Donald Sutton	360 Azalea Drive Gadsden, Al 35901		X				v		,	100.00	
ORM REVISED 10.27,2011	TOTAL CASH CON	TR	BU1	ГЮ	NS	TH		, 7		7.758.	

FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:	<u>Craio</u>	Ford

CONTRIBUTOR	ADDDESO	0	F CO	OURC ITRU ECK C	SUTI	ON			
(INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Business or Corporation	Individual	PAC	Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION	
Elias and Nectar Snafary	315 Lakewood Prive Gadsden, ML 35901		Х				8/10/22	200.00	
Frafary Nandell and Judy Tillman	404 Montgomery St. Gradsden, Al. 35901		χ				8/10/22		
Danny and Flane Sparks	535 Meadon Wood Rd. Gadsden, Ar 35901		X				8/10/22	_	
Sparks Sparks Househ For, Nose + Thout	1026 Goodyeer Ptuc Ste 100 B Gerbeden, At 3590 2417 Securic Drag	7					8/10/22	2.000	
sh plager	2417 Secono Drag Gadsden, AL 35904		×				3/10/2	2 75	
HK LLC	1290 Highlands Leke Trail By home, AU 35242	×	×				8/10/22	3,000	
FORM REVISED 10.27.2011	TOTAL CASH COM	ITR	IBU	TIO	NS	TH	IIS PAGE	5.775	

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

Craso 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. **NATURE OF CONTRIBUTION** SOURCE (CHECK ONE) (CHECK ONE) AMOUNT **CONTRIBUTOR ADDRESS** DATE Administrative Fransportation Other
Business/
Corporation
Individual
PAC
Other (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE OF Advertising Consultants/ Polling CONTRIBUTION STREET OR P.O. BOX, CITY, STATE, AND ZIP) CONTRIBUTION **RECEIVED** (mo./day/yr.) Food Rent Gadsten, AL 35901 Ford Insurance X, 200, 8-10-22 TOTAL IN-KIND CONTRIBUTIONS THIS PAGE FORM REVISED 10.27,2011

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

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Craia Fort 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. COMPLETE THIS BLOCK IF RECEIPT FORM RECEIPT SOURCE IS A LOAN OF RECEIPT (CHECK ONE) **AMOUNT** DATE SOURCE OF RECEIPT **ADDRESS** (ADDRESS SHOULD INCLUDE (INCLUDE FULL NAME) RECEIVED OF **GUARANTORS** Individual Business Other STREET OR P.O. BOX. (mo./day/yr.) RECEIPT Interest Loan Other IFCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) PLETE ADDRESS OF INDIVIDUAL(S) EN-PAC DORSING OR GUARANTEEING LOAN TOTAL RECEIPTS THIS PAGE \$0.00 **FORM REVISED 10.27.2011**

FORM 6: Expenditures On Line of Credit by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

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When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

vviien total expe	nditures to a single recipient exceed \$100.0	JU, t	ne	FUP.	A re	quir	es a	an e	xper	ıaıtu	res to that recip	ient de itemize	:a.
					PL	JRPO	SE (
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	NG EXPENDITURE (ADDRESS SHOULD INCLUDE	Administrative	Advertising	Consultants/ Poling	Contribution	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE
						0							
		A	1	1	1	1	<u> </u>						
			$oldsymbol{L}$	U		V							
FORM REVISED 5.19.2017					T	OT/	\L I	EXF	EN	DIT	URES THIS I	PAGE	\$ 0.00

FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:



When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

						•			•		•		
		PURPOSE OF EXPENDITURE (CHECK ONE)								RE			
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	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
Model T'S	100 East Main St Centre, Al3596	>	X									8-10-2	3550"/
Walker 360	2501 East Fifth St. Montgomery, AL 36107		X										3,188
Model T's	(00 East Main St. Gentry AL 35960 530 George Wallace Dr		X									1	(ale " /
ffice Depot	Gazszen, AL 35901	X										8-12-22	159: \$151
New South Outdoor	The Signal MAN RE Challenonga, TN 37405		X										1,400 1
salker 360	Montyomer, Ac 36107		χ									8-10-22	3,188 ¹⁸
saller 360	Montgomery AL 36/07		又									8-12-22	3,049 58 1
ity of 6a ds dan	Godsten, AV 35901	x									4		100
aller 360	montgomer, AL 36107	ス										8-11-22	3,049 88
	,				T	ΣΤ Δ	. F	YP	ĖΝ	דוח	URES THIS I		

FORM REVISED 10.27.2011

TOTAL EXPENDITURES THIS PAGE

14,750.52

FORM 5: Expenditures by candidate or elected official,





When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

		PURPOSE OF EXPENDITURE (CHECK ONE)						AMOUNT OF EXPENDITURE					
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	(ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (ADDRESS SHOULD INCLUDE STREET OF DELIVERY OF STREET OR P.O. BOX, CITY, STATE, AND ZIP) (But to be a street of the stre	GIVE	DATE OF EXPENDITURE (mo./day/yr.)										
walker 360	Montgomera, AL 36107		χ									8-13-22	3,18818
Sanis Club	Montgomery, AL 36107 1900 Oxford Exchange Blud Oxford, AL 36203	ヘ				X						8-13-22	684 al V
Messenger Numspaper	Gadsden, AL 35901		X									8-13-22	
Walker 360 Galantiv lce	2501 East 5th St. Montgomery, AC36107		بر									8-14-27	- 3,0495
Galantiv Ice						X							405.44
-		 											
FORM REVISED 10.27.2011					T)TA	AL I	EXF	PEN	DIT	URES THIS	PAGE	21127