

Candidate & Elected Official Campaign Finance Report

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JAN 2 2 2024

Z O V	SUMMARY FORM 1	•				SCC ort (check onthly UD(OTE)W. HASSELL
	Please Print in Ink or Type. ne of Candidate or Elected Official	Political Party/E	Ballot	Affiliation	ı Hw	eekly	Amended Weekly
	on craig Ford ce Sought or Held (in)slude district or circuit number, if applicable)	A		For Monthly Month for wh	ich the	June	
	lamor of Gadsden				report is filed		
	lress Check box if reporting new address				For Weekly Date of Frida		
P					week for which		
City	State ZIP Code	Telephone Nur			Total Number		
6	adsden Az 35902	(256)393	3.9	0001	Pages in Re	port	7
S	ummary of activity since last filed report						
1	Beginning balance (ending balance from previo	us filing)				1	66,063.62
	Cash Contributions						
2a	Itemized cash contributions (total from Form 2)		2a	14.	694.00		1
2b	Non-itemized cash contributions		2b		φ		
2c	Total cash contributions (add lines 2a and 2b)					2c	14.694.00=0.00
	In-Kind Contributions						
За	Itemized in-kind contributions (total from Form 3	3)	За	2	,300.00		
3b	Non-itemized in-kind contributions		3b		ø		
3с	Total in-kind contributions (add lines 3a and 3b)	Зс	2	,300.00	00		
	Receipts from Other Sources						
4a	Itemized Receipts from Other Sources (total from	m Form 4)	4a		_		
4b	Non-itemized Receipts from Other Sources		4b		_		
4c	Total receipts from other sources (add lines 4a				4c	- \$0.00	
	Expenditures					_	
5a	Itemized expenditures (total from Form 5)		5a	14,	084.83		
5b	Non-itemized expenditures		5b		ϕ		
5c	Total expenditures (add lines 5a and 5b)					5c	14,084.83.00
	Expenditures on Line of Credit						
6a	Itemized expenditures (total from Form 6)		6a		_		
6b	Non-itemized expenditures		6b		_		
6с	Total expenditures on credit (add lines 6a and 6	6b)	6c		- \$0.0	00	
7	Ending balance (add lines 1, 2c, & 4c, then subtra	act line 5c)			V-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	7	610,672.790.00
swe atta rue state nfor	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	Str.	of Notary P	y of <u>Novem</u> M. Ca ok	bes of the	My commission expires e year 2024
Jign	or Cariolidate of Liected Official Date		1/6	HCCI	M. Co.	-ae//	

Print Notary's Name

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SCOTT,W. HASSELL. JUDGE, OF FRORATE.

CHANGE BURGER



FORM 2: 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 in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings.

CONTRIBUTOR	ADDRESS	OF	CO	OURC NTRIE ECK C	BUTI	ON	DATE	AMOUNT OF CONTRIBUTION	
(INCLUDE FULL NAME)	(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.)		
Darie Livingston Atty	P.O. BOX 1621 Galson, 1235902	X	,				6-10-39	250	
Coleb Campbell	P.O. Box 210 Gedsden, Al 35902		X				6-21-22	1,000	
John C Brown	140 Oak Circle Gadsden, AL 35901		~				6/23/22	20.00	
Dana Loconto	Po Box 64 Gadsden, AL 35902		√				6/22/22	25,00	
The Coggin Firm LLC	222 South 8th Street Gadsden, AL 35901	V					6/23/22	250.00	
Thomas T and Joan 1 Cash	212 Claremont Drive Gadsden, Az 35901		V				6/22/22	100.00	
John J and Donna Itayes	145 Sandy Shores Lane Rainbow City, M. 35904		V				6 23 22	250.00	
Christopher Lee Kerry	700 County Road 591 Centre, AL 35960		Ÿ				6/23/22	100.00	
Vicki and Steve Lister	5115 Meadow Circle East Southside, AZ 35907		√				6/23/22	100.00	
Kent A Back FORM REVISED 10.27.2011	200 Wildhaven Citateash con Gadsden, AL 35201	TRI	βŮ	110	NS	TH	6/23/22 IIS PAGE	100.00	

FORM 2: Contributions received by 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 in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings. SOURCE **OF CONTRIBUTION** (CHECK ONE) **AMOUNT ADDRESS** DATE CONTRIBUTOR (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION OF Business or Corporation Individual Returned STREET OR P.O. BOX, CITY, STATE, AND ZIP) RECEIVED CONTRIBUTION Other (mo./day/yr.) PAC 216 Dogwood Circle Clarence W. Danaette 35901 Nancy E Ellisor Whorton Bend Dr. 3590 Frnest D. Cordell 222 Arayle Circle 100.00 Gadsden, AL 3590 104 Grindale Road Mark and Sarah 200.00 3590 Kathrun Haller Gadsden, AL 304 GWindale Road teresa and William 7.35957 cott and Hollie Penninsula Drive Gadsden, AZ 3595 Seawright Dr. Gordon Isbell S 4th st. AL 3590 Nealco Products int 2319 W. Meighan Blvd 500. Copperleaf Walk Scott Reynolds TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 10.27.2011

FORM 2: Contributions received by candidate 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	1 4 fc	or tho	se li	sting	s.			
CONTRIBUTOR	4000-00	OF	CON	URC ITRU	BUTH	ON			
(INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)			PAC	Other	Returned	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION	
Vilmoore Properties	221 Hillside Trait Gadsden, Al 35901	/					6/21/22	. 1,000.00	
Carnoustie Properties	310 5th St. Gasden, AL 35901	_					6/23/22	1,000.00	
H9 M Freeman Motors, Inc.	1025 Meighan Blvd Gadsden, AL 35957	V					6 23 22	500.00	
ZLProperties	403 SW 4th St. Cape Coral, Fl. 33991-2582	~					6/24/22	1000.00	
Adams Beverages Veffery and Julie	141 Industrial Drive Birmingham, AZ35211	/					6/21/22	1500.	
Jeffery and Julie Smith	325 Lakewood Drive Gadsden, AL 3590)		_				6/29/22	. 1500.°	
James and Lucy Turnback	6adsden, AL 35901		/				6/28/22	1500.0	
Todd and Lindsay Frederick	328 Dogwood Circle Gadsden, AL 35957		V				6/29/22	1500.00	
FORM REVISED 10.27.2011	TOTAL CASH CONTRIBUTIONS THIS PAGE \$9,500						\$9,500.		

FORM 3: In-Kind Contributions received by 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.

PO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.

	DO NOT LIST cash or loans on this form. Use Forms 2 and 4 for those listings.														
				NATURE OF CONTRIBUTION (CHECK ONE)								RCE K ONI	≣)		
CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)		Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other	DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
rd Insurance	1957 Rainbow Dr. Galsten, AL 35901	X	١.		X		Х							6-28-22	\$ 2,300
														_	 ,
					_										
		_													
															<u> </u>
FORM REVISED 10.27.2011	TOTAL IN-KIND CONTRIBUTIONS THIS PAGE 2,3 0					2,300									



FORM 4: Receipts from Other Sources loans, interest, and other sources of income 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) DATE **AMOUNT ADDRESS** SOURCE OF RECEIPT OF (ADDRESS SHOULD INCLUDE **GUARANTORS** RECEIVED (INCLUDE FULL NAME) Individual Business Other STREET OR P.O. BOX, (mo./day/yr.) RECEIPT IFCPA REQUIRES FULL NAME AND COM-CITY, STATE, AND ZIP) PLETE ADDRESS OF INDIVIDUAL(S) EN-Loan DORSING OR GUARANTEEING LOAN] **TOTAL RECEIPTS THIS PAGE** \$0.00 **FORM REVISED 10.27.2011**

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) DATE OF **AMOUNT** PERSON/GROUP/BUSINESS **ADDRESS** OTHER (ADDRESS SHOULD INCLUDE EXPENDITURE OF RECEIVING EXPENDITURE STREET OR P.O. BOX, CITY, STATE, AND ZIP) (mo./day/yr.) **EXPENDITURE** GIVE (INCLUDE FULL NAME) **BRIEF EXPLANATION** P. O. BOX 8534 6-5-22 1,94046 First Diesel Galslen, AL 35902 Services Inc. Tennesse Valley 301 Thomas French Dr. 90 Brown St. City of Gadsten 6-21-22 Gabston, Al 35901 X Bendster, AL 35903 Centre, AL 35960 301 Thomas Franch Pr. Tennessee Valley Sign Scottsboro. AL 35769 New South Outloor chattanooge, TW 37405 530 George walace Dr. Gadsdon, AL 35903 **TOTAL EXPENDITURES THIS PAGE** FORM REVISED 10.27.2011

FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL:

FORM REVISED 10.27.2011

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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 DATE OF ADDRESS** PERSON/GROUP/BUSINESS Transportation Administrative **OTHER** Advertising
Consultants/
Polling
Charitable
Contribution
Food Fundraising EXPENDITURE OF (ADDRESS SHOULD INCLUDE Loan Repayment Lodging **RECEIVING EXPENDITURE** STREET OR P.O. BOX. CITY, STATE, AND ZIP) (mo./day/yr.) **EXPENDITURE** GIVE (INCLUDE FULL NAME) BRIEF **EXPLANATION** 100 Emain St. 66° 1 6.29-22 Model T'S Donahue Alwartising Centry AL 35960 11205 Helber RE 70-29-22 Logen, OH 43138

TOTAL EXPENDITURES THIS PAGE 1,796 01

FORM 6: Expenditures On Line of Credit 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) **ADDRESS** DATE OF **AMOUNT** PERSON/GROUP/BUSINESS Transportation Administrative Advertising
Consultants/
Polling
Contribution **OTHER** Fundraising (ADDRESS SHOULD INCLUDE EXPENDITURE OF **RECEIVING EXPENDITURE** STREET OR P.O. BOX, CITY, STATE, AND ZIP) **EXPENDITURE** GIVE (mo./day/yr.) (INCLUDE FULL NAME) Lodging **BRIEF** Food **EXPLANATION TOTAL EXPENDITURES THIS PAGE** \$ 0.00 **FORM REVISED 5.19.2017**