



FILED

JUL 01 2022

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Type of Report (check one)
 Monthly
 Weekly
 Amended Monthly
 Amended Weekly

SCOTT W. HASSELL
JUDGE OF PROBATE

For Monthly Reports
 Month for which the report is filed.
 JUNE

For Weekly Reports
 Date of Friday in the week for which the report is filed.

Total Number of Pages in Report
 5

Please Print in Ink or Type.

Name of Candidate or Elected Official DR. JOHN JACOBS	Political Party/Ballot Affiliation
Office Sought or Held (include district or circuit number, if applicable) MAYOR OF GADSDEN	
Address <input type="checkbox"/> Check box if reporting new address 430 George Wallace DR #102	
City Gadsden	State AL
ZIP Code 35903	Telephone Number 256 622-2449

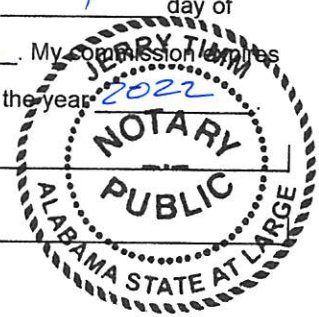
Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		1 202.74
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a 800	
2b	Non-itemized cash contributions	2b 0	
2c	Total cash contributions (add lines 2a and 2b)		2c 800 \$0.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a 0	
3b	Non-itemized in-kind contributions	3b 0	
3c	Total in-kind contributions (add lines 3a and 3b)	3c 0	\$0.00
Receipts from Other Sources			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a 3,920	
4b	Non-itemized Receipts from Other Sources	4b 0	
4c	Total receipts from other sources (add lines 4a and 4b)		4c 3,920 \$0.00
Expenditures			
5a	Itemized expenditures (total from Form 5)	5a 4,721.77	
5b	Non-itemized expenditures	5b 0	
5c	Total expenditures (add lines 5a and 5b)		5c 4,721.77 \$0.00
Expenditures on Line of Credit			
6a	Itemized expenditures (total from Form 6)	6a 0	
6b	Non-itemized expenditures	6b 0	
6c	Total expenditures on credit (add lines 6a and 6b)	6c 0	\$0.00
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)		7 200.97 \$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.

Signature of Candidate or Elected Official: [Signature]
 Date: 7/1/22

Sworn to and subscribed before me this 1 day of July of the year 2022. My commission expires the 6 day of Sept of the year 2022.

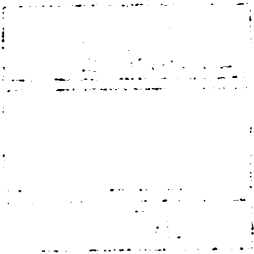
Signature of Notary Public: [Signature]
 Print Notary's Name: JERRY TOWN



FILED

JUL 10 1933

SCOTT W. HASSLER
JUDGE OF PROBATE



For the purpose of this will, I have appointed the following as my executor: [illegible text]

IN WITNESS WHEREOF, I have hereunto set my hand and seal at [illegible] this [illegible] day of [illegible] 1933.

TESTED AND SEEN the within and signed by the testator in presence of the following witnesses: [illegible]

[The main body of the document contains several paragraphs of text, which are extremely faint and largely illegible due to the quality of the scan. The text appears to be the body of a will or a legal document.]



[Faint text at the bottom right of the page, possibly a signature or additional notes.]

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



FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: 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 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		
Teddy Phillips	10142 Parkside Dr. #500 Knoxville, TN 37922		<input checked="" type="checkbox"/>				6/1/22	\$ 500
Pamela Jacobs	1021 Klauwright Ave Gadsden, AL 35903		<input checked="" type="checkbox"/>				6/1/22	\$ 300
TOTAL CASH CONTRIBUTIONS THIS PAGE								\$ 800



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.

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 GUARANTORS <small>[FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]</small>	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other		
John Jacobs	1021 Mainwright Ave Gadsden, AL		<input checked="" type="checkbox"/>		John Jacobs 1021 Mainwright Ave Gadsden, AL 35903			<input checked="" type="checkbox"/>			6/1/22	\$3,920



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: DR. John Jacobs

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient 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	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation			OTHER GIVE BRIEF EXPLANATION
Cris Barrineau	1527 Montauga Rd Prattville, AL 36067		✓										6/1/22	\$2,000
WPS	Gadsden, AL	✓											6/1/22	\$645.24
RM Capturez	1117 49th St Birmingham, AL	✓											6/2/22	\$300
Vinyltech Signs	111 Industrial PK Rd Prattville, AL 36067	✓											6/2/22	\$1,076.93
Newkay Print & Design	1509 Government St Suite 208 Mobile, AL 36604	✓											6/2/22	\$187.50
CITY OF Gadsden	90 Broad St Gadsden, AL 35901	✓											6/14/22	\$50
Website		✓											6/14/22	\$91
New Canaan Bapt Church	1201 Stroud Ave Gadsden, AL 35903			✓									6/24/22	\$100
Academy Sports	Gadsden, AL			✓									6/29/22	\$118.60
												TOTAL EXPENDITURES THIS PAGE	\$4,569.27	

1. Name of the person: _____

2. Address: _____

3. Telephone: _____

4. Date: _____

5. Signature: _____

6. Name of the person: _____

7. Address: _____

8. Telephone: _____

9. Date: _____

10. Signature: _____

11. Name of the person: _____

12. Address: _____

13. Telephone: _____

14. Date: _____

15. Signature: _____

16. Name of the person: _____

17. Address: _____

18. Telephone: _____

19. Date: _____

20. Signature: _____

21. Name of the person: _____

22. Address: _____

23. Telephone: _____

24. Date: _____

25. Signature: _____

26. Name of the person: _____

27. Address: _____

28. Telephone: _____

29. Date: _____

30. Signature: _____





FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: DR. JOHN JACOBS

When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient 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/Poling	Charitable Contribution	Food	Fundraising	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION			
Walmart	Gadsden, AL			✓									6/29/22	\$152.50
														\$152.50

TOTAL EXPENDITURES THIS PAGE

FOR THE YEAR ENDED 31st DECEMBER 1998

STATE OF TEXAS
COUNTY OF DALLAS

NAME OF THE COMPANY	NATURE OF BUSINESS	DATE OF INCORPORATION	OFFICE ADDRESS	REGISTERED OFFICE ADDRESS	STATE OF INCORPORATION	AMOUNT PAID UP		AMOUNT OF STOCK HELD BY THE COMPANY	AMOUNT OF STOCK HELD BY INDIVIDUALS	TOTAL AMOUNT PAID UP	AMOUNT OF STOCK HELD BY THE COMPANY	AMOUNT OF STOCK HELD BY INDIVIDUALS	TOTAL AMOUNT PAID UP
						IN FULL	IN PART						
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