

MONTHLY & WEEKLY



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

FILED

NOV 02 2021

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

| | | | |
|---|--------------------|------------------------------------|--|
| Name of Candidate or Elected Official <i>Dr. John Jacobs</i> | | Political Party/Ballot Affiliation | |
| Office Sought or Held (include district or circuit number, if applicable) <i>Mayor of Gadsden</i> | | | |
| Address <input type="checkbox"/> Check box if reporting new address <i>430 George Wallace Dr. #102</i> | | | |
| City <i>Gadsden</i> | State <i>AL</i> | ZIP Code <i>35910</i> | Telephone Number <i>3256-515-0250</i> |

Type of Report (check one)

Monthly Amended Monthly

Weekly Amended Weekly

For Monthly Reports
Month for which the report is filed. *October*

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

Total Number of Pages in Report *5*

SCOTT W. HASSELL
JUDGE OF PROBATE

| Summary of activity since last filed report | | | |
|---|---|----|------------------------|
| 1 | Beginning balance (ending balance from previous filing) | | 1 <i>317.25</i> |
| Cash Contributions | | | |
| 2a | Itemized cash contributions (total from Form 2) | 2a | <i>1,820.21</i> |
| 2b | Non-itemized cash contributions | 2b | |
| 2c | Total cash contributions (add lines 2a and 2b) | 2c | <i>1,820.21</i> \$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 | <i>1,500.00</i> |
| 4b | Non-itemized Receipts from Other Sources | 4b | <i>0</i> |
| 4c | Total receipts from other sources (add lines 4a and 4b) | 4c | <i>1,500</i> \$0.00 |
| Expenditures | | | |
| 5a | Itemized expenditures (total from Form 5) | 5a | <i>2,140.63</i> |
| 5b | Non-itemized expenditures | 5b | <i>0</i> |
| 5c | Total expenditures (add lines 5a and 5b) | 5c | <i>2,140.63</i> \$0.00 |
| Expenditures on Line of Credit | | | |
| 6a | Itemized expenditures (total from Form 6) | 6a | <i>0</i> |
| 6b | Non-itemized expenditures | 6b | <i>0</i> |
| 6c | Total expenditures on credit (add lines 6a and 6b) | 6c | <i>0</i> \$0.00 |
| 7 | Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) | 7 | <i>1,496.83</i> \$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.

Dr. John Jacobs *11/2/21*

Signature of Candidate or Elected Official Date

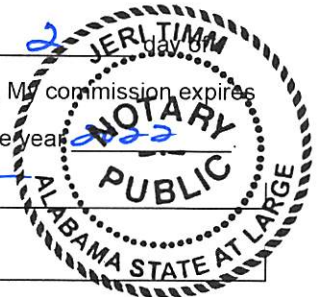
Sworn to and subscribed before me this *2* day of *November* of the year *2021*. My commission expires the *01* day of *September* of the year *2022*.

Jeri Timm

Signature of Notary Public

Jeri Timm

Print Notary's Name



FILED

NOV 8 1951

SCOTT W. HASSELL
JUDGE OF PROBATE

IN PROBATE COURT OF THE COUNTY OF ALABAMA
IN RE: THE ESTATE OF [Name]

[Faint, mostly illegible text of the document, likely containing a will or probate proceedings.]



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



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 | | |
| Jeffrey Tribble | | | <input checked="" type="checkbox"/> | | | | 10/6/21 | \$24.71 |
| Freddie L. Katherine Speight | 4608 Dot Harvey Rd Jakin, GA 39861 | | <input checked="" type="checkbox"/> | | | | 10/7/21 | \$100.00 |
| Elliott R. Chambers Sr | 2014 Mettler Rd Lodi, CA 95242-9408 | | <input checked="" type="checkbox"/> | | | | 10/7/21 | \$100.00 |
| Henry L. Perry | 513 Beachside Gardens Panama City Beach, FL 32413 | | <input checked="" type="checkbox"/> | | | | 10/7/21 | \$500 |
| Joey Marta | | | <input checked="" type="checkbox"/> | | | | 10/7/21 | \$100 |
| Jackie Bentley | | | <input checked="" type="checkbox"/> | | | | 10/8/21 | \$100 |
| Denise Landcaster | | | <input checked="" type="checkbox"/> | | | | 10/8/21 | \$25 |
| Cornell Kimbrough | | | <input checked="" type="checkbox"/> | | | | 10/11/21 | \$50 |
| Jean Graham | 603 N. Jackson St. Albany, GA 31701 | | <input checked="" type="checkbox"/> | | | | 10/12/21 | \$100 |
| | | | | | | | TOTAL CASH CONTRIBUTIONS THIS PAGE | \$1,099.71 |



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 | | |
| Barry Dickerson | | | <input checked="" type="checkbox"/> | | | | 10/15/21 | \$ 100 |
| Terry Gainer | | | <input checked="" type="checkbox"/> | | | | 10/17/21 | \$ 45.50 |
| EUGENE ROBINSON | 1800 PARKER LN OXFORD, AL 36203-3250 | | <input checked="" type="checkbox"/> | | | | 10/19/21 | \$ 25. |
| Rosalind Gray | | | <input checked="" type="checkbox"/> | | | | 10/21/21 | \$ 100 |
| Charles Ware | columbia, MD | | <input checked="" type="checkbox"/> | | | | 10/22/21 | \$ 100 |
| James Ware | 203 King Arthur Ct SELMA, AL 36701-6851 | | <input checked="" type="checkbox"/> | | | | 10/25/21 | \$ 100 |
| Sophia Patrick | | | <input checked="" type="checkbox"/> | | | | 10/25/21 | \$ 100 |
| Raynard Rudolph | 7620 Dexter Hollow DR CORDOVA, TN 38016 | | <input checked="" type="checkbox"/> | | | | 10/28/21 | \$ 50 |
| Lawrence Anna Ware | 917 West Tomahawk Trail Gadsden, AL 35903-3647 | | <input checked="" type="checkbox"/> | | | | 10/28/21 | \$ 100 |
| TOTAL CASH CONTRIBUTIONS THIS PAGE | | | | | | | | \$ 720.50 |



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

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.

| 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 Wauworieth Ave Gadsden, Al 35903 | | ✓ | | John Jacobs 1021 Wauworieth Ave Gadsden, Al 35903 | | | ✓ | | | | 10/1/21 | \$1,500 |
| | | | | | | | | | | | | | |
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| TOTAL RECEIPTS THIS PAGE | | | | | | | | | | | | \$1,500 | |



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 | | |
| Chris Barrineau | 1527 Montalga Rd Prattville, AL 36067 | | | ✓ | | | | | | | | 11/1/21 | \$1,500 |
| The UPS store | 430 George Wallace Dr Gadsden, AL 35903 | | ✓ | | | | | | | | | 10/4/21 | \$126.44 |
| The UPS store | " " | | ✓ | | | | | | | | | 10/21/21 | \$124.04 |
| The UPS store | " " | | ✓ | | | | | | | | | 10/23/21 | \$125.96 |
| The UPS store | " " | | ✓ | | | | | | | | | 10/25/21 | \$125.96 |
| Full Spectrum Graphics | 3680 US-50 Hillsboro, OH 45133 | | | ✓ | | | | | | | | 10/29/21 | \$138.23 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| TOTAL EXPENDITURES THIS PAGE | | | | | | | | | | | | \$2,140.63 | |