



JAN 22 2024

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

SCOTT W. HASSELL
JUDGE OF PROBATE

Please Print in Ink or Type.

Type of Report (check one)

- Monthly
 Amended Monthly
 Weekly
 Amended Weekly

For Monthly Reports
Month for which the report is filed.

December/2023

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

Total Number of Pages in Report

7

Name of Candidate or Elected Official Jon Craig Ford		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) Mayor of Gadsden			
Address <input type="checkbox"/> Check box if reporting new address PO BOX 8208			
City Gadsden	State AL	ZIP Code 35902	Telephone Number (256)393-9009

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	12,306.26
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	11,600.00	
2b	Non-itemized cash contributions	2b	0	
2c	Total cash contributions (add lines 2a and 2b)	2c	11,600.00	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	—	
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	275.00	
5b	Non-itemized expenditures	5b	0	
5c	Total expenditures (add lines 5a and 5b)	5c	275.00	0.00
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 6b)	6c	—	0.00
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	23,631.26	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.

Sworn to and subscribed before me this 22 day of January of the year 2024. My commission expires the 6 day of November of the year 2024.

Signature of Candidate or Elected Official: [Signature]
Date: 1-22-24

Signature of Notary Public: [Signature]
Print Notary's Name: TRACCI M. Cordell

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: Craig Ford

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		
Dr. James Krell	1801 2nd Ave N. B'ham, AL 35203		X				12-7-21	250
Luft Demolition	170 Jester Pkwy, Rainbow City, AL 35906		X				12-10-21	500
Dr B Rowan	1220 W. Morgan Blvd, Gadsden, AL 35901		X				12-10-21	500
Karen Griffith	209 Ribesway Ave, Gadsden, AL 35901		X				12-10-21	500
Rep. James Busby	2207 Barretts Lane Mobile, AL 36617		X				12-22-21	600
James Stary	208 Lakewood Dr. Gadsden, AL 35901		X				12-27-21	500
Harriett Phillips	220 Lakewood Dr. Gadsden, AL 35901		X				12-17-21	1,000
Ira Phillips Jr.	310 North 3rd St. Gadsden, AL 35901		X				12-17-21	1,500
TOTAL CASH CONTRIBUTIONS THIS PAGE								5,350

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		Business or Corporation	Individual	PAC	Other	Returned		
✓ D Marcell Black	4790 Wilson Dam Rd. Tusculumbia, AL		✓				12/6/21	500. ⁰⁰
✓ Wayne and Paula Hollar	225 Camille Cirde Gadsden, AL 35901		✓				12/8/21	500. ⁰⁰
✓ Mark and Deborah Thompson	209 Bridle Ridge Road Gadsden, AL 35901		✓				12/8/21	250. ⁰⁰
✓ Allen McBride	2671 Cheaha Rd. Munford, AL 35268		✓				12/17/21	50. ⁰⁰
✓ Brandon Merced	9427 US Highway 231 Rockford, AL 35136		✓				12/8/21	100. ⁰⁰
✓ Turk Family Revocable Living Trust	912 E. Tomahawk Trail Gadsden, AL 35903				✓		12/8/21	100. ⁰⁰
Life Ins. Co.	PO Box 349 Gadsden, AL 35902	✓					12/8/21	500. ⁰⁰
✓ John and Kathryn Dugger	2417 Scenic Drive Gadsden, AL 35904		✓				12/3/21	100. ⁰⁰
✓ Donald Campbell	231 Lakepoint Dr. Gadsden, AL 35901		✓				12/9/21	250. ⁰⁰
✓ Joan D. Leach	240 Alpine Dr. Gadsden, AL 35901		✓				12/5/21	100. ⁰⁰
TOTAL CASH CONTRIBUTIONS THIS PAGE								\$ 2,450.⁰⁰



FORM 3: In-Kind 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 cash or loans on this form. Use Forms 2 and 4 for those listings.

CONTRIBUTOR (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	NATURE OF CONTRIBUTION (CHECK ONE)										SOURCE (CHECK ONE)					DATE CONTRIBUTION RECEIVED (mo./day/yr.)	AMOUNT OF CONTRIBUTION
		Administrative	Advertising	Consultants/ Polling	Equipment	Food	Rent	Transportation	Other	Business/ Corporation	Individual	PAC	Other					
		TOTAL IN-KIND CONTRIBUTIONS THIS PAGE																

MIA



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 [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT	
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other			
												TOTAL RECEIPTS THIS PAGE	

