



FILED

MAY 31 2018

BOBBY M. JUNKINS
JUDGE OF PROBATE

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official MITCHELL JAMES		Political Party/Ballot Affiliation NONE	
Office Sought or Held (include district or circuit number, if applicable) MAYOR - GADSDEN, ALABAMA			
Address <input type="checkbox"/> Check box if reporting new address P.O. BOX 4224			
City GADSDEN	State ALABAMA	ZIP Code 35904	Telephone Number 256-490-9972

Type of Report (check one)

- Monthly Amended Monthly
 Weekly Amended Weekly

For Monthly Reports
Month for which the report is filed.

MAY 2018

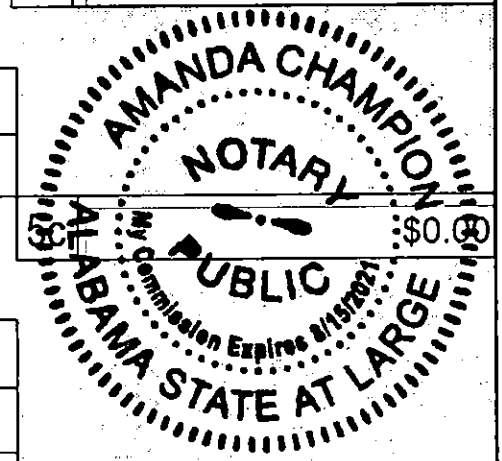
For Weekly Reports
Date of Friday in the week for which the report is filed.

Total Number of Pages in Report

6

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)		1	\$0.00
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a		
2b	Non-itemized cash contributions	2b		
2c	Total cash contributions (add lines 2a and 2b)	2c		\$0.00
In-Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a		\$98.85
3b	Non-itemized in-kind contributions	3b		\$0.00
3c	Total in-kind contributions (add lines 3a and 3b)	3c		\$98.85
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		
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c		\$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		\$0.00

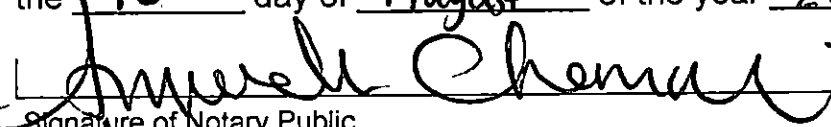


As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures, and other required information during the applicable period of time.


Signature of Candidate or Elected Official

5-31-18
Date

Sworn to and subscribed before me this 31st day of May of the year 2018. My commission expires the 1st day of August of the year 2021.


Signature of Notary Public

Amanda Champion
Print Notary's Name

