



FILED

MAR 01 2022

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

SCOTT W. HASSELL  
JUDGE OF PROBATE

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

For Monthly Reports  
Month for which the report is filed.

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

Total Number of Pages in Report

Please Print in Ink or Type.

Name of Candidate or Elected Official <i>Thomas E Worley</i>	Political Party/Ballot Affiliation <i>NIA</i>
Office Sought or Held (include district or circuit number, if applicable) <i>Mayor City of Gadsden</i>	
Address <input checked="" type="checkbox"/> Check box if reporting new address <i>PO Box 8032</i>	
City <i>Gadsden, AL</i>	State <i>AL</i>
ZIP Code <i>35902</i>	Telephone Number <i>256-504-5049</i>

Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)		1 <i>\$ 10.00</i>
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a <i>\$ 2,500.00</i>	
2b	Non-itemized cash contributions	2b <i>\$ 50.00</i>	
2c	Total cash contributions (add lines 2a and 2b)		2c <i>\$ 2,550.00</i>
<b>In-Kind Contributions</b>			
3a	Itemized in-kind contributions (total from Form 3)	3a <i>NIA</i>	
3b	Non-itemized in-kind contributions	3b <i>NIA</i>	
3c	Total in-kind contributions (add lines 3a and 3b)	3c <i>NIA</i>	
<b>Receipts from Other Sources</b>			
4a	Itemized Receipts from Other Sources (total from Form 4)	4a <i>NIA</i>	
4b	Non-itemized Receipts from Other Sources	4b <i>NIA</i>	
4c	Total receipts from other sources (add lines 4a and 4b)		4c
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a <i>766.28</i>	
5b	Non-itemized expenditures	5b <i>NIA</i>	
5c	Total expenditures (add lines 5a and 5b)		5c <i>766.28</i>
<b>Expenditures on Line of Credit</b>			
6a	Itemized expenditures (total from Form 6)	6a <i>NIA</i>	
6b	Non-itemized expenditures	6b <i>NIA</i>	
6c	Total expenditures on credit (add lines 6a and 6b)	6c <i>NIA</i>	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)		7 <i>\$ 1,743.72</i>

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:

*Thomas E Worley* | *3-1-22*  
Signature of Candidate or Elected Official | Date

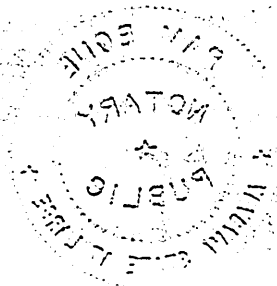
Sworn to and subscribed before me this 1 day of March of the year 2022. My commission expires the 24 day of NOTARY of the year 2024.

*Pam Bone*  
Signature of Notary Public  
Print Notary's Name

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SCOTT W. HARBELL  
JUDGE OF PROBATE









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

NAME OF CANDIDATE OR ELECTED OFFICIAL: Thomas Worthy

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		
<i>Thomas Worthy</i>	<i>801 Crest Ave</i>		<input checked="" type="checkbox"/>		<i>Thomas Worthy 801 Crest Ave Gadsden, AL</i>			<input checked="" type="checkbox"/>			<i>2/18/12</i>	<i>\$2,500.00</i>
											<b>TOTAL RECEIPTS THIS PAGE</b>	<i>\$2,500.00</i> \$0.00



**FORM 5: Expenditures by candidate or elected official**

NAME OF CANDIDATE OR ELECTED OFFICIAL: Thomas Worshy

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			
JosABanks	577 Brookwood Vill, Birmingham		<input checked="" type="checkbox"/>									Two suits one pair of shoes one shirt	2-19-22	\$ 582.98
Fiverrinc579 NY	NY		<input checked="" type="checkbox"/>									marketing	2-22-22	\$ 52.75
USPS	700 Chestnut St Fed. Ac		<input checked="" type="checkbox"/>									PO Box 8032	2-23-22	\$ 83.00
Poliengine	www.Poliengine FL		<input checked="" type="checkbox"/>									marketing	2-25-22	\$ 35.00
Fiverrinc NY	NY		<input checked="" type="checkbox"/>									marketing	2-26-22	\$ 12.55
<b>TOTAL EXPENDITURES THIS PAGE</b>													\$ 765.30	

