

20200824000367580 1/6 \$.00
Shelby Cnty Judge of Probate, AL
08/24/2020 12:57:03 PM FILED/CERT

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

| | | | |
|---|--------------------|------------------------------------|---------------------------------------|
| Name of Candidate or Elected Official Jamie Cole | | Political Party/Ballot Affiliation | |
| Office Sought or Held (include district or circuit number, if applicable) City Council, Ward 5, Alabaster, AL | | | |
| Address <input type="checkbox"/> Check box if reporting new address 152 Sugarberry Drive | | | |
| City Maylene | State AL | ZIP Code 35114 | Telephone Number [REDACTED] |

Type of Report (check one)

☐ Monthly☐ Amended Monthly☒ Weekly☐ Amended WeeklyFor 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

August 7, 2020

Summary of activity since last filed report

| | | | |
|---------------------------------------|---|----|---------|
| 1 | Beginning balance (ending balance from previous filing) | 1 | 2547.56 |
| 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 | |
| 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 |
| 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 | |
| Expenditures | | | |
| 5a | Itemized expenditures (total from Form 5) | 5a | 783.00 |
| 5b | Non-itemized expenditures | 5b | |
| 5c | Total expenditures (add lines 5a and 5b) | 5c | 783.00 |
| 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 |
| 7 | Ending balance (add lines 1, 2c, & 4c, then subtract line 5c) | 7 | 1764.56 |

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

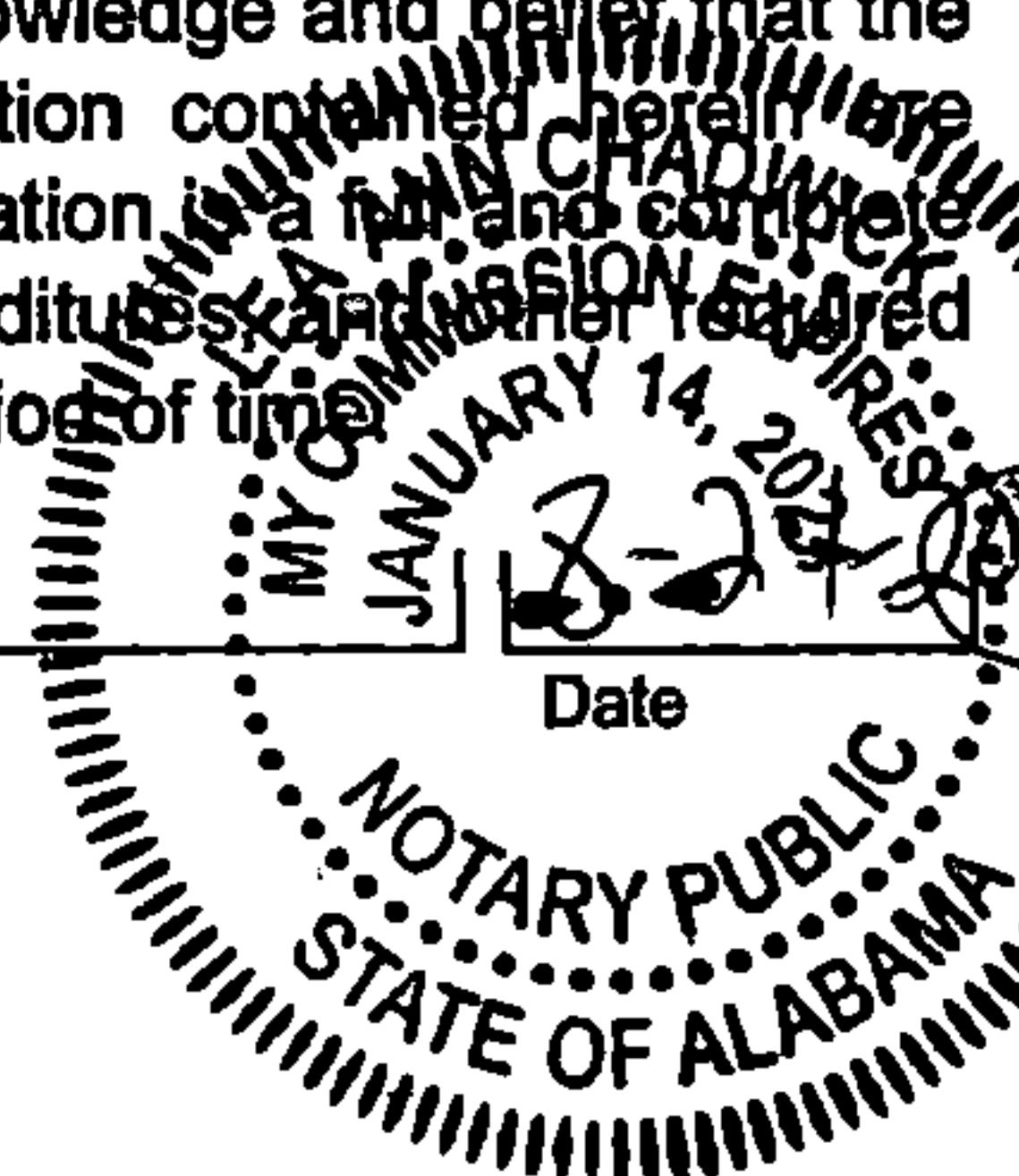
Date

Sworn to and subscribed before me this 24th day ofAugust of the year 2020. My commission expiresthe 14 day of January of the year 2024.

Signature of Notary Public

Signature of Notary Public

Print Notary's Name



FORM 2: Contributions received by candidate or elected official

| 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 | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | TOTAL CASH CONTRIBUTIONS THIS PAGE | | | | | | | 0 |

FORM REVISED 10.27.2011

20200824000367580 2/6 \$.00
Shelby Cnty Judge of Probate, AL
08/24/2020 12:57:03 PM FILED/CERT

FORM 3: In-Kind Contributions received by 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 | | | | | | | | | | | | | | | 0 | |

FORM REVISED 10.27.2011

20200824000367580 3/6 \$.00
Shelby Cnty Judge of Probate, AL
08/24/2020 12:57:03 PM FILED/CERT

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



NAME OF CANDIDATE OR ELECTED OFFICIAL: Jamie Cole

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 COM- PLETE ADDRESS OF INDIVIDUAL(S) EN- DORSING 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 | | | | | | | | | | | | 0 |

20200824000367580 4/6 \$.00
 Shelby Cnty Judge of Probate, AL
 08/24/2020 12:57:03 PM FILED/CERT

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

FORM 5: Expenditures by candidate or elected officialNAME OF CANDIDATE OR ELECTED OFFICIAL: Jamie Cole

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 | | |
| Shelby County Reporter | 115 North Main Street Columbiana, AL 35051 | | ✓ | | | | | | | | | 8/20/20 | 783.00 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| TOTAL EXPENDITURES THIS PAGE | | | | | | | | | | | | | 783.00 |

FORM REVISED 10.27.2011


 20200824000367580 5/6 \$.00
 Shelby Cnty Judge of Probate, AL
 08/24/2020 12:57:03 PM FILED/CERT

FORM 6: Expenditures On Line of Credit by candidate or elected official

| 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 | Contribution | Food | Fundraising | Lodging | Transportation | Interest | OTHER GIVE BRIEF EXPLANATION | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | TOTAL EXPENDITURES THIS PAGE | | | | | | | | | | | |

FORM REVISED 5.19.2017

FORM REVISED 5.19.2017

TOTAL EXPENDITURES THIS PAGE

20200824000367580 6/6 \$.00
Shelby Cnty Judge of Probate, AL
08/24/2020 12:57:03 PM FILED/CERT