



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1A



20210128000047890 1/6 \$.00
Shelby Cnty Judge of Probate, AL
01/28/2021 11:53:44 AM FILED/CERT

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			
City Maylene	State AL	ZIP Code 35114	Telephone Number

Calendar Year
covered by this report.

2020

☐ Amended Annual Report
☒ Termination Report

Total Pages in Report
Include this page in
your count.

SECTION I - Summary of activity from last filed report through December 31 of reporting year

1	Beginning balance (ending balance from previous filing)		1	\$890.23
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		
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	Total itemized receipts from other sources (total from Form 4)	4a		
4b	Total 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		\$890.23
5b	Non-itemized expenditures	5b		
5c	Total expenditures (add lines 5a and 5b)	5c		\$890.23
Expenditures on Line of Credit				
6a	Itemized expenditures on line of credit (total from Form 6)	6a		
6b	Non-itemized expenditures	6b		
6c	Total expenditures on line of credit (add lines 6a and 6b)	6c		\$0.00
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7		\$0.00

SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

8	Beginning balance (as of January 1 of reporting year)	8	\$0.00
9	Total cash contributions for year	9	\$1,931.70
10	Total in-kind contributions for year	10	
11	Total receipts from other sources for year	11	\$6,032.43
12	Total expenditures for year	12	\$7,964.13
13	Total expenditures on line of credit for year	13	
14	Ending balance (add lines 8, 9, & 11, then subtract line 12)	14	\$0.00
15	Total campaign debt (total debt owed as of December 31)	15	\$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.

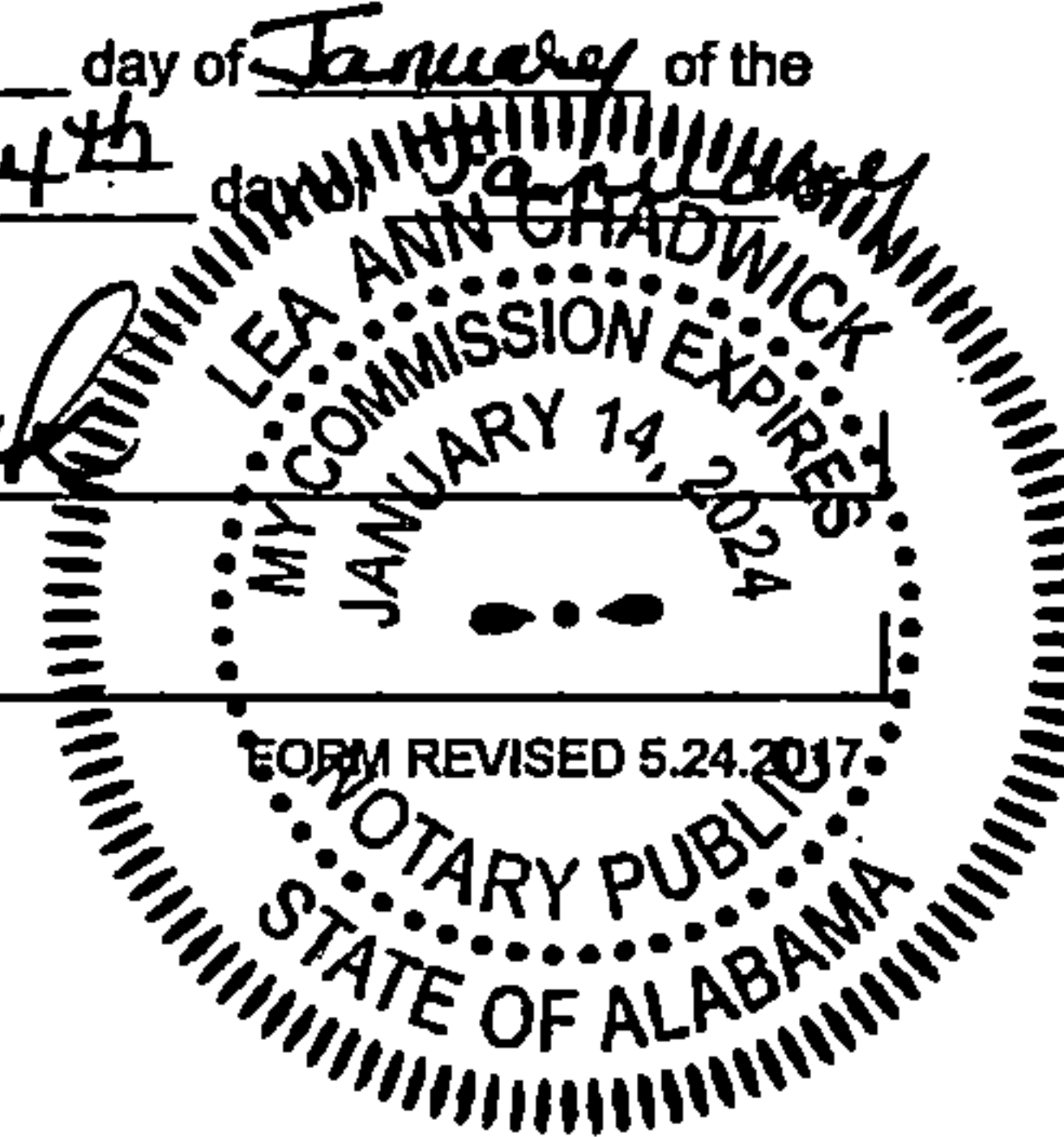
Signature of Candidate or Elected Official

Date

Sworn to and subscribed before me this 26th day of January of the year 2021. My commission expires the 24th day of February the year 2024.

Signature of Notary Public

Print Notary's Name



NAME OF CANDIDATE / ELECTED OFFICIAL: _____ PAGE _____ OF _____

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					
FORM REVISED 10.29.99	TOTAL IN-KIND CONTRIBUTIONS THIS PAGE															\$0.00		

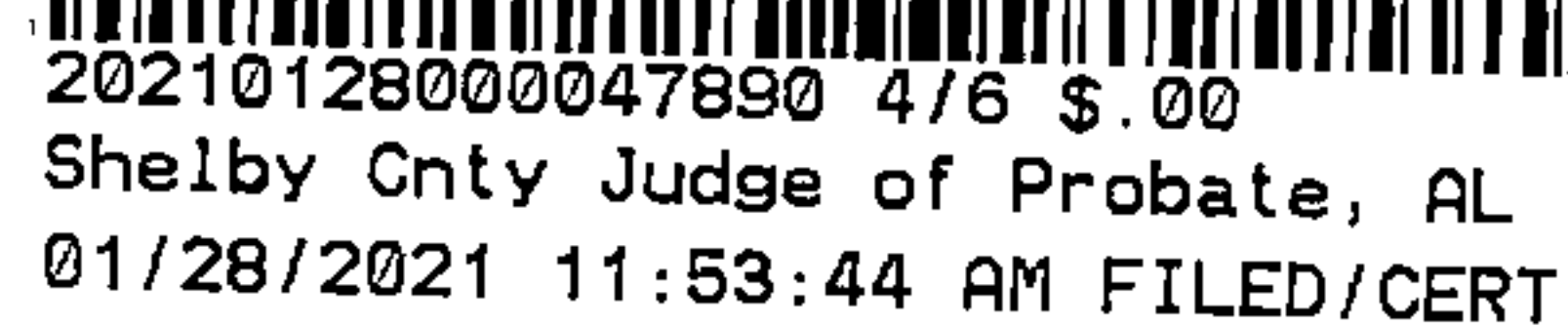


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FORM 4: RECEIPTS FROM OTHER SOURCES

NAME OF CANDIDATE / ELECTED OFFICIAL: _____ **PAGE** _____ **OF** _____

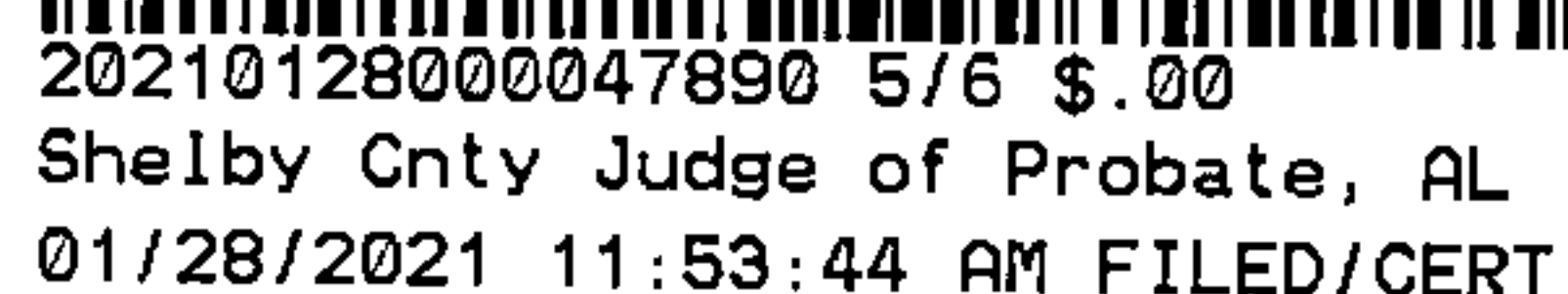
SOURCE OF RECEIPT (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	FORM OF RECEIPT			COMPLETE THIS BLOCK IF RECEIPT IS A LOAN GUARANTORS [FCPA REQUIRES FULL NAME AND COMPLETE ADDRESS OF INDIVIDUAL(S) ENDORSING OR GUARANTEEING LOAN]	RECEIPT SOURCE (CHECK ONE)					DATE RECEIVED (mo./day/yr.)	AMOUNT OF RECEIPT
		Interest	Loan	Other		Lending Institution	PAC	Individual	Business	Other		
FORM REVISED 10.29.99	TOTAL RECEIPTS THIS PAGE											\$0.00



FORM 5: EXPENDITURES

NAME OF CANDIDATE / ELECTED OFFICIAL: _____ PAGE _____ OF _____

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	Loan Repayment	Lodging	Transportation	OTHER GIVE BRIEF EXPLANATION		
James Thomas Cole II	152 Sugarberry Drive Maylene, AL 35114							✓				10/12/2020	\$890.23
		TOTAL EXPENDITURES THIS PAGE										\$890.23	



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



NAME OF CANDIDATE OR ELECTED OFFICIAL:

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	Contribution	Food	Fundraising	Lodging	Transportation	Interest	OTHER GIVE BRIEF EXPLANATION		
FORM REVISED 5.19.2017	TOTAL EXPENDITURES THIS PAGE												\$ 0.00



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