



SEP 11 2020

SCOTT W. HASSELL  
JUDGE OF PROBATE

# Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

Please Print in Ink or Type.

Name of Candidate or Elected Official williams Jameson Jenkins		Political Party/Ballot Affiliation N/A	
Office Sought or Held (include district or circuit number, if applicable) Rainbow City Council Place 4			
Address <input type="checkbox"/> Check box if reporting new address 106 Red Barn Road			
City Rainbow City	State AL	ZIP Code 35906	Telephone Number 256.458.6143

Type of Report (check one)

- Monthly  Amended Monthly  
 Weekly  Amended Weekly

For Monthly Reports  
Month for which the report is filed.

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

9/11/2020
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Total Number of Pages in Report

6
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Summary of activity since last filed report			
1	Beginning balance (ending balance from previous filing)	1	\$154.95
<b>Cash Contributions</b>			
2a	Itemized cash contributions (total from Form 2)	2a	
2b	Non-itemized cash contributions	2b	\$894.00
2c	Total cash contributions (add lines 2a and 2b)	2c	\$894.00
<b>In-Kind Contributions</b>			
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
<b>Receipts from Other Sources</b>			
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
<b>Expenditures</b>			
5a	Itemized expenditures (total from Form 5)	5a	\$974.90
5b	Non-itemized expenditures	5b	\$0.00
5c	Total expenditures (add lines 5a and 5b)	5c	\$974.90
<b>Expenditures on Line of Credit</b>			
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	\$74.05

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.

William Jenkins      9-11-2020  
Signature of Candidate or Elected Official      Date

Sworn to and subscribed before me this 11th day of September of the year 2020. My commission expires the 20th day of April of the year 2021.

Andrea Drummonds Jenkins  
Signature of Notary Public

Andrea Drummonds Jenkins  
Print Notary's Name



# FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: williams Jameson Jenkins

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		
DARON WALKER	2115 GRAHAM DR. SOUTHSIDE, AL 35907		<input checked="" type="checkbox"/>				9/6/2020	\$100.00
JOHN WESSINGER	4018 MEDFORD DR. SE HUNTSVILLE, AL 35802		<input checked="" type="checkbox"/>				9/6/2020	\$100.00
CASH			<input checked="" type="checkbox"/>				9/6/2020	\$100.00
CASH			<input checked="" type="checkbox"/>				9/6/2020	\$100.00
CASH			<input checked="" type="checkbox"/>				9/6/2020	\$95.00
CASH			<input checked="" type="checkbox"/>				9/6/2020	\$99.00
CASH			<input checked="" type="checkbox"/>				9/7/2020	\$100.00
CASH			<input checked="" type="checkbox"/>				9/7/2020	\$100.00
CASH			<input checked="" type="checkbox"/>				9/7/20	\$100.00
<b>TOTAL CASH CONTRIBUTIONS THIS PAGE</b>								\$894.00





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

NAME OF CANDIDATE OR ELECTED OFFICIAL: williams Jameson Jenkins

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			
<b>TOTAL RECEIPTS THIS PAGE</b>												\$0.00	



