



FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Report SUMMARY FORM 1

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State.

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Type of Report (check one)

☐

Monthly

☐

Amended Monthly

☒

Weekly

☐

Amended Weekly

For Monthly Reports

Month in which the report
is filed.

For Weekly Reports

Date of Friday in the week
in which the report is filed.

10/23/2026

Name of Candidate or Elected Official JESSE BATTLES		Political Party / Ballot Affiliation Independent	
Office Sought or Held (include district or circuit number, if applicable) State Senator, SENATE DISTRICT 10			
Address Check box if reporting new address PO BOX 41			
City ATTALLA	State AL	ZIP Code 35954	Telephone Number (256) 613-6858

Summary of activity from last filed report

1	Beginning balance (ending balance from previous filing)		1	\$39,225.03
Cash Contributions				
2a	Itemized cash contributions (total from Form 2)	2a	\$10,850.00	
2b	Non-itemized cash contributions	2b	\$50.00	
2c	Total cash contributions (add lines 2a and 2b)	2c	\$10,900.00	
In Kind Contributions				
3a	Itemized in-kind contributions (total from Form 3)	3a	\$0.00	
3b	Non-itemized in-kind contributions	3b	\$408.13	
3c	Total in-kind contributions (add lines 3a and 3b)	3c	\$408.13	
Receipts from Other Sources				
4a	Total itemized receipts from other sources (total from Form 4)	4a	\$0.00	
4b	Total non-itemized receipts from other sources	4b	\$0.00	
4c	Total receipts from other sources (add lines 4a and 4b)	4c	\$0.00	
Expenditures				
5a	Itemized expenditures (total from Form 5)	5a	\$2,130.64	
5b	Non-itemized expenditures	5b	\$215.22	
5c	Total expenditures (add lines 5a and 5b)	5c	\$2,345.86	
Expenditures on Line of Credit				
6a	Itemized expenditures (total from Form 6)	6a	\$0.00	
6b	Non-itemized expenditures	6b	\$0.00	
6c	Total expenditures (add lines 6a and 6b)	6c	\$0.00	
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)	7	\$47,779.17	

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.

Sworn to and subscribed before me this _____ day of _____ of the year _____. My commission expires the _____ day of _____ of the year _____.

Electronically signed by JESSE BATTLES,
Candidate

10/26/2026

Signature of Candidate or Elected Official

Date

Signature of Notary Public

Print Notary's Name

FORM 2: 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.

[illegible]



FORM 5: Expenditures by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: JESSE BATTLES

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 Contributions	Food	Fundraising	Loan Repayment	Lodging	Transportation	Reimbursement	Refund	Qualifying Fee	Duties of the Office	Inaugural	OTHER GIVE BRIEF EXPLANATION		
Post Net	3331 Rainbow Dr RAINBOW CITY, AL 35906		✓														10/20/2026	\$2,045.00
Ivalee Marathon	2726 AL 77 Attalla, AL 35954									✓							10/23/2026	\$85.64
TOTAL EXPENDITURES																		\$2,130.64