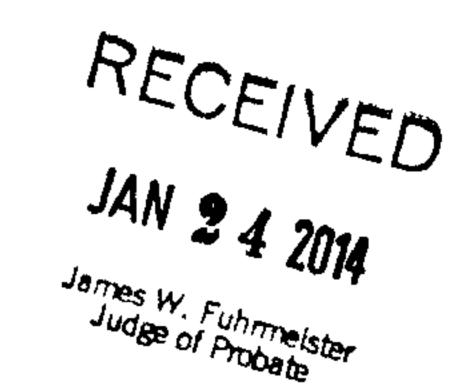


## Appointment of Principal Campaign Committee

Shelby Cnty Judge of Probate, AL 01/24/2014 02:35:34 PM FILED/CERT



|  | Please prir                                      | nt in ink or type                           | •                       |   |
|--|--|---|-------------------------|---|
| Full Name of Candidate  Office Sought (include district or cire)  Showing for the state of the s | cuit number, if                                  |   | M / Political Party / I | Ballot Affilia                          |
| Address of the Committee (street of 130 INVERWOOD)  City  BIRMING  ACTORNAL  City  C | SS Plants  | $\frac{42}{42}$ $\frac{1}{3}$ $\frac{1}{3}$ | 42                      | ne Number                               |
| If you are appointing others to see should be designated as the charant addresses in the spaces be   | airperson of t                                   | the committee. A se                         | econd membe             | er should I                             |
| Cha  | airperson  |   |                         |   |
| Full Name  RICE All FA   | NE   | FT)HAW                                      |                         | Full                                    |
| Address (street or post office box)  130 TO VIANA  | 255  | 121-#21                                     | 14                      | Ado                                     |
| City S/MM  | State  | ZIP Code                                    | 17                      | City                                    |
| Signature of Appeintee   | M  |   |                         | Sign                                    |
| Full Name  | ttee Mem   | ber   |                         |   |
| Address (street or post office box)  |  |   |                         | Add                                     |
| City   | State  | ZIP Code                                    |                         | City                                    |
| Signature of Appointee   | <u></u>  |   |                         | Sigr                                    |
| Commi  | ttee Mem   | ner   |                         |   |
| Full Name  |  |   |                         | *************************************** |
| Address (street or post office box)  | <del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del> | ·····                                       |                         |   |
| City   | State  | ZIP Code                                    |                         |   |
| Signature of Appointee   |  |   |                         | **************************************  |
| Where to file this form  |  | <del></del>                                 |                         | As re                                   |

where to flie this form ...

- State candidates file with the Office of the Secretary of State, located in the Alabama State Capitol, Room E-210. The mailing address is P.O. Box 5616. Montgomery, Alabama 36103-5616.
- County and municipal candidates file with their county's judge of probate.

| This form is due within five (5) calendar days of        |
|--|
| reaching the threshold amount, or within five (5)        |
| calendar days of qualifying with a political party, or   |
| within five (5) calendar days of filing a petition as an |
| independent or third party candidate.                    |
|  |
| Type of Committee (check one)                            |

- I appoint myself as the sole member of my principal campaign committee.
  - I hereby appoint the individuals listed below to act as my principal campaign committee.

at least two members. You may appoint up to five members. One member mber should be designated as the treasurer. Please clearly print their names name.

| Treasurer                      |         |          |  |  |
|--------------------------------|---------|----------|--|--|
| Full Name                      |         |          |  |  |
|                                |         |          |  |  |
| Address (street or post office | ce box) |          |  |  |
|                                |         |          |  |  |
| City                           | State   | ZIP Code |  |  |
|                                |         |          |  |  |
| Signature of Appointee         |         |          |  |  |
|                                | ····    |          |  |  |

| Committee Member       |               |          |        |
|------------------------|---------------|----------|--------|
| Full Name              |               |          |        |
|                        |               |          |        |
| Address (street or pos | t office box) |          | ······ |
|                        |               |          |        |
| City                   | State         | ZIP Code |        |
|                        |               |          |        |
| Signature of Appointed | 3             |          |        |
|                        |               |          |        |

## Filing Threshold Amounts for Public Offices under the Fair Campaign Practices Act

| \$25,000 | Statewide office           |
|----------|----------------------------|
| \$10,000 | State Senate seat          |
| \$5,000  | State House seat           |
| \$5,000  | Circuit or district office |
| \$1,000  | County or municipal office |

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the information contained hereign's true and correct.

elected official or candidate