

Principal Campaign Committee

Please print in ink or type.

Office Sought (include district or circuit number, if applicable)
City Council, Place 7, City of Hoover, Alabama

State

Appointment of

Steven Sean McClinton

Address of the Committee (street or post office box) 1498 Waterside Circle

Full Name of Candidate

City

County Division Code: AL040
Inst. # 2020075340 Pages: 1 of 1
I certify this instrument filed on
7/17/2020 8:02 AM Doc: ELPCC
Judge of Probate
Jefferson County, AL.

Clerk: PEEPLESC

AREA FOR OFFICIAL USE ONLY

Judg.G.O.3

ALAN L. KING Judge of Probate

705 I 6 2020

PROBATE COURT

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 candidate.

Type of Committee (check one)

I appoint myself as the sole member of my principal campaign committee.
Prince President Control of the Cont

I hereby appoint the individuals listed below to act as my principal campaign committee.

Hoover

Alabama

35244

If you are appointing others to serve as your committee, you must select at least two members. You may appoint up to five members. One member should be designated as the chairperson of the committee. A second member should be designated as the treasurer. Please clearly print their names and addresses in the spaces below. Each appointee <u>must</u> sign his or her name.

ZIP Code

Telephone Number

Candidates who choose to be the sole member of their principal campaign committee <u>must</u> choose a designee to dissolve the committee due to the possibility of death or incapacitation of the candidate.

	Chairperson		
ull Name	Ema	il Address	
Address (street or post offic	e box)		
City	State	ZIP Code	
Signature of Appointee			
C	ommittee Memi	oer	
Full Name	Em	ail Address	
Address (street or post offi	ice box)		
City	State	ZIP Code	
Signature of Appointee			
	committee Mem	ber	
Full Name		nail Address	
Address (street or_post_of	fice box)		
City 202007	728000314010 1/1 / Cnty Judge of F	\$.00 Scobate AL	
Signature of Ap. 07/28/	/ 2020 09:04:53 AN	1 FILED/CERT	

Where to file this form ...

- State candidates file with the Office of the Secretary of State.*
- County candidates must file electronically at fcpa.alabamavotes.gov
- Municipal candidates file with the county judge of probate.
- * This form does not establish electronic filing. To file electronically, visit fcpa.alabamavotes.gov and click "Committee Registration."

	Treasurer		
Full Name	Name Email Address		
Address (street or post o	ffice box)		
City	State	ZIP Code	
Signature of Appointee			

mmittee Memb	er	
Email Address		
box)		
State	ZIP Code	
<u> </u>	<u></u>	
	box)	box)

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	Committee Dissolution Designee				
	Full Name Stephanie White McClinton				
	smcclinton@uabmc.edu Address (street or post office box) 1498 Waterside Circle				
	City Hoover Alabama				
Signature of Appointee Signature of Appointee					
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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 herein is true and correct.

Signature of elected official or candidate

Date

FORM REVISED 6.19.2017