JUL 15 2010

ALABAMA FAIR CAMPAIGN PRACTICES ACT

APPOINTMENT OF PRINCIPAL CAMPAIGN COMMITTEE

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.

Please print in lnk or Type.

| Full Name of Candidate SQ4 | 4012in | ~5 | | 20 | 100716000227860 1/1 \$ 00 |
|--|-------------------------|----------------------------------|---|---------|---|
| Office Sought (include district or circuit Office Sought (include district or circuit) Office Sought (include district or circuit) | Fire Di | - | cal Party / Ballot Affiliation | Ty appo | relby Cnty Judge of Probate, AL 7/16/2010 02:30:05 PM FILED/CERT 7/Pe of Committee (check one) int myself as the sole member of my |
| City Leels If you are appointing others to | State A serve as your | ZIP Code 3 5 044 committee, yo | Telephone Number 766-2188 u must select at least | l heret | oal campaign committee. by appoint the individuals listed below as my principal campaign committee. You may appoint up to five members |

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 must sign his or her name.

| Chairperson | | | | |
|--|---|--|---|--|
| Full Name | | | | |
| Address (street or post office b | ox) | | | |
| City | State | ZIP Code | | |
| Signature of Appointee | | ······································ | | |
| <u>, </u> | | | | |
| Com | ımittee Memb | er | | |
| Full Name | ·· | | | |
| Address (street or post office be | ox) | | • | |
| City | State | ZIP Code | | |
| Signature of Appointee | , ", ", ", ", ", ", ", ", ", ", ", ", ", | | | |
| Com | mittee Viemb | er | | |

| Full Name | Committee Memb | |
|---------------------------------------|----------------|--|
| Address (street or pos | t office box) | ······································ |
| City | State | ZIP Code |
| · · · · · · · · · · · · · · · · · · · | | ······································ |

Where to file this form ...

- ➤ State candidates file with the Office of the Secretary of State, located in the Alabama State Capitol, Room E-208. The mailing address is P.O. Box 5616, Montgomery, Alabama 36103-5616.
- County and municipal candidates file with their county's judge of probate.

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

| Committee Member | | | | |
|-----------------------|---------------------------------------|---------------------------------------|-------------|--|
| Full Name | | | | |
| | | | | |
| Address (street or po | st office box) | | | |
| | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | |
| City | State | ZIP Code | | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| Signature of Appointe | e e | | | |
| | | | | |

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

| \$25,000 \$10,000 \$5,000 \$5,000 | Statewide office State Senate seat State House seat 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 herein is true and correct.



Date