## 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.

RECE/VEN
JUL 15 2010
James W. Fuhrmeister Judge of Probate

Full Name of Candidate Plankenship	20100716000227880 1/1 \$.00
Office Sought (include district or circuit number, if applicable)  Political Party / Ballot Affiliation  Du NNaVan/Tfine District Trustee  Address of the Committee (street or post office box)	Shelby Cnty Judge of Probate, AL 07/16/2010 02:30:07 PM FILED/CERT Type of Committee (check one)
57095 Awy 25 Leeds	I appoint myself as the sole member of my principal campaign committee.
State ZIP Code Telephone Number  A 2 3 50 94 205 - 69934	1 hereby appoint the individuals listed below to act as my principal campaign committee.

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	oox)		
City	State	ZIP Code	
Signature of Appointee		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Con	nmittee Memb	er	· · · · · · · · · · · · · · · · · · ·
Full Name			
	· · · · · · · · · · · · · · · · · · ·	······································	
Address (street or post office b	ox)		
City	State	ZIP Code	······································
Signature of Appointee		-	
Con	nmittee Memb	er	
Full Name		· · · · · · · · · · · · · · · · · · ·	

Committee Member			
Full Name			
Address (street or post	office box)		
City	State	ZIP Code	· ·
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## 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)	<u> </u>	·
City	State	ZIP Code	

Committee Member			
Full Name			•
Address (street or post	office box)	<del>i </del>	······································
City	State	ZIP Code	
Signature of Appointee		·	

## 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 herein is true and correct.

Signature of elected official or candidate

Date

Date