## 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 ink or Type.

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Office Sought (Include district of circuit r	umber, if ap	plicable)		Party / Ballot /	Affiliation
ANDIVER FIRE	Di	STRICT	PIA	<u>e 5</u>	<del></del>
266 Hun 487	t office box)		<del></del>		
ANDIVER.	State  A/.	351°	<b>-</b>	elephone Nui	nber
you are appointing others to s ne member should be designated lease clearly print their names	ated as th	e chairpersor	of the	committee below. Ea	. A sec
Chair	person				,.,
Full Name					Full Na
Address (street or post office box)		· · · · · · · · · · · · · · · · · · ·			Addre
City	State	ZIP Code	<del>-                                    </del>		City
Signature of Appointee	<u> </u>		<del></del>		Signal
Committe	e Memt	)er			
Full Name					Full N
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Full Name		. " .			
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Address (street or post office box)					.•
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City	State	<b>Д ОО</b>			

#### 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.

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SEP 08 2010

James W. Fuhrmeister Judge of Probate

Shelby Cnty Judge of Probate, AL

#### Type of Committee (check one)

- \_\_\_\_\_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.

elect at least two members. You may appoint up to five members. ittee. A second member should be designated as the treasurer. Each appointee must sign his or her name.

	Treasurer			
Full Name		•		
Address (street or post o	ffice box)	<u></u>		i
City	State	ZIP Code		
Signature of Appointse	·}			
	Committee Memb	er		
Full Name				
Address (street or post o	office box)			
City	State	ZIP Code	7:	
Signature of Appointee			<u> </u>	

### 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

FORM REVISED 11.06.2007