

## Waiver of Report

## FOR ELECTED OFFICIALS AND CANDIDATES

(OPTIONAL FORM)

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Please Print in Ink or Type.

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JAN 1 0 2012

James W. Fuhrmeister Judge of Probate

| Name of Candidate or Elected Official                                     | Political Party/Ballot Affiliation | lype of Report (check one)         |
|---|------------------------------------|------------------------------------|
| Jim SHADE   |                                    | ☐ Monthly Report                   |
| Office Sought or Held (include district or circuit number, if applicable) |                                    | Weekly Report                      |
| CITY COUNTL   |                                    | Daily Report (state candidates and |
| Address Check box if reporting new address                                |                                    | elected officials only)            |
| 1601 FRONTIER DA.   |                                    |                                    |
| City State ZIP Cod  |                                    |                                    |
| VESTAVIA HULS AL 35ZZ   | 6 (205)0220402                     |                                    |

In any reporting period, no campaign finance report is required if the appropriate filing threshold has not been reached by the candidate. The filing thresholds are as follows:

- ▶ \$25,000 candidates for state offices
- ▶ \$10,000 candidates for State Senate
- ▶ \$5,000 candidates for State House of Representatives
- ▶ \$5,000 candidates for district or circuit offices
- ▶ \$1,000 candidates for local offices

I have not reached the filing threshold amount as set forth in the Fair Campaign Practices Act for the office for which I am seeking nomination or election.

This OPTIONAL form gives notice that no contribution or expenditure report will be submitted.

Signature of Candidate or Elected Official

Date