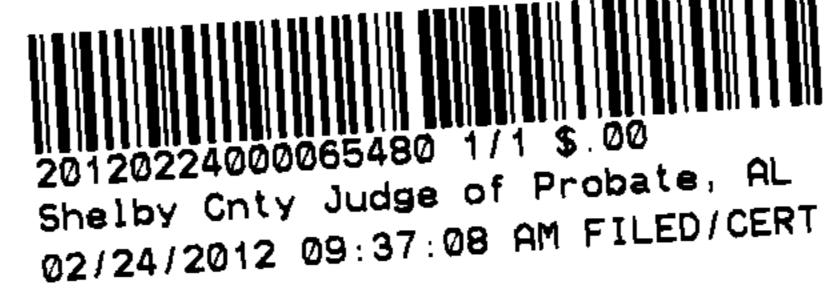


## Waiver of Report

## FOR ELECTED OFFICIALS AND CANDIDATES

(OPTIONAL FORM)



RECEIVED
FEB 2 3 2012
James W. Fuhrmeister
Judge of Probate

Please Print in Ink or Type.

	Political Party/Ballot Affiliation	Type of Report (check one)
Name of Candidate or Elected Official		Monthly Report
CANTE! M. HCKESC	DR. PEPUBLICAN	Weekly Report
Office Sought or Held (include district or circuit number, if applical	Toisteint 4	Daily Report (state candidates and
Address [] Check box lyreporting new address	1-11/01	elected officials only)
Address Theck box lyreporting new address $5-10^{+10}$ $5t$ $5t$ .		
	ZIP Code Telephone Number	
HABASTER ALL 3	506/	

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 2-23-12

**FORM REVISED 9.2.2011**