





## Waiver of Report

## FOR ELECTED OFFICIALS AND CANDIDATES

(OPTIONAL FORM)

Please Print in Ink or Type.

Name of Candidate or Elected Official	Political Party/Ballot Affiliation	Type of Report (check one)
LINDSEY ALUTSON	DISTRIST-	Monthly Report
Office Sought or Held (include district or circuit number, if applicable)		Weekly Report
COUNTY CONTITS 5.TOWN Address Check box if reporting new address		Daily Report (state candidates and elected officials only)
454 VALLEY UDEN	KO	
City — State ZI SPRINGS AZ	IP Code Telephone Number  35124 30 7-9004	
	(205)	

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

5.31-2012

Date

FORM REVISED 9.2.2011