

Where to file this form ...

probate.

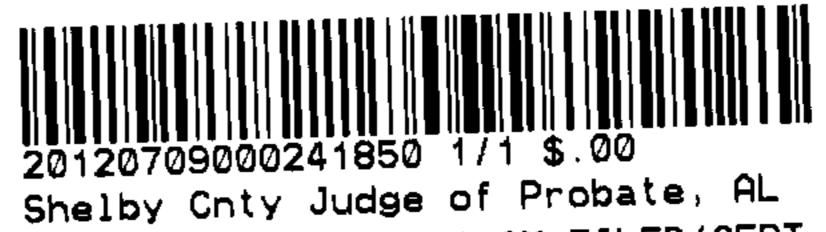
▶ State candidates file with the Office of the Secretary of State,

located in the Alabama State Capitol, Room E-210. The mailing

address is P.O. Box 5616, Montgomery, Alabama 36103-5616.

► County and municipal candidates file with their county's judge of

Appointment of Shelby Cnty Judge of Probate, AL 07/09/2012 09:59:49 AM FILED/CERT Principal Campaign Committee



RECEIVED

JUL 06 2012

James W. Fuhrmeister Judge of Probate

Please print in ink or t	ype.	This form is due within five (5) calendar days of
Full Name of Candidate		reaching the threshold amount, or within five (5)
Leslie Darnell Wh	+1na	calendar days of qualifying with a political party, or within five (5) calendar days of filing a petition as an
Office Sought (include district or circuit number, if applicable)	Political Party / Ballot Affiliation	independent or third party candidate.
City Louncil District	<u></u>	Type of Committee (check one)
Address of the Committee (street or post office box)		appoint myself as the sole member of my principal campaign committee.
City Columbiana AL 350	ZIP Code Telephone Number	I hereby appoint the individuals listed below to a as my principal campaign committee.
If you are appointing others to serve as your committee, you should be designated as the chairperson of the committee, and addresses in the spaces below. Each appointee must	e. A second member should be design	s. You may appoint up to five members. One member gnated as the treasurer. Please clearly print their names
Chairperson		Treasurer
Full Name	Full Name	
Address (street or post office box)	Address (str	reet or post office box)
City State ZIP Code	City	State ZIP Code
Signature of Appointee	Signature of	Appointee
Committee Member		Committee Member
Full Name	Full Name	
Address (street or post office box)	Address (str	reet or post office box)
City State ZIP Code	City	State ZIP Code
Signature of Appointee	Signature of	Appointee
Committee Member		
Full Name	Fil	ing Threshold Amounts for Public Offices
		under the Fair Campaign Practices Act
Address (street or post office box)		\$25,000 Statewide office \$10,000 State Senate seat
City State ZIP Code	<u> </u>	\$5,000 State House seat \$5,000 Circuit or district office \$1,000 County or municipal office
Signature of Appointee		
	As require	d by the Alabama Fair Campaign Practices Act, I

FORM REVISED 9.2.2011

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