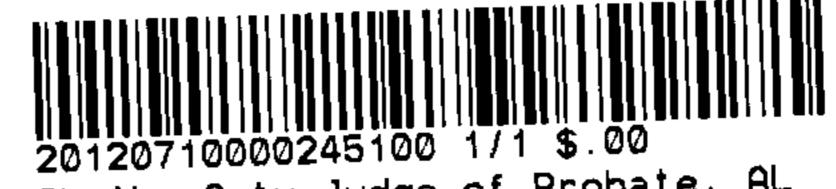


# Appointment of Principal Campaign Committee

Full Name of Candidate



Shelby Cnty Judge of Probate, AL 07/10/2012 01:55:16 PM FILED/CERT

## RECEIVED

JUL 09 2012

James W. Fuhrmeister Judge of Probate

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

I hereby appoint the individuals listed below to act

## Please print in ink or type.

| Office Sought (Include district or circuit number, if applicable) Political Party / Ballot Affiliation  |                         | ndent or third party can   | didate.                                   |
|---|-------------------------|--|---|
| MACION  | <u></u>                 | Type of Committe   | ee (check one)                            |
| Address of the Committee (street or post office box)  |                         | appoint myself as the so   |   |
| 10/30x 75   |                         | rincipal campaign comm   |   |
| City State ZIP Code Telephone Number 3903   |                         | 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 must select at least should be designated as the chairperson of the committee. A second member stand addresses in the spaces below. Each appointee must sign his or her name | should be designated as | y appoint up to five mer<br>the treasurer. Please cle                                  | nbers. One member early print their names |
| Chairperson   |                         | Treasurer  |   |
| Full Name. EAH Wiven  | Full Name               | 1/1/2  |   |
| Address (street or post office box)   | Address street or post  | office box   |   |
| 15ax 15   | DAK                     | 75   |   |
| City holds on H 35013   | City                    | A State  | ZIP Code 350/3                            |
| Signature of Appointee  | Signature of Appeintee  | ////   |   |
| 1 Jan / Wen   | 1 /05                   | 1/1/200  |   |
| Committee Member  |                         | Committee Memb   | er  |
| Full Name TUNC A/JUCN   | Full Name               |  |   |
| Address (street or post office bex)   | Address (street or post | office box)  |   |
| 1 /2 A - 5  |                         |  |   |
| City State ZIP Code 35043   | City                    | State  | ZIP Code                                  |
| Signature of Appointee  | Signature of Appointee  |  |   |
| une Turen   |                         |  |   |
| Committee Member  |                         |  |   |
| Full Name   | Filing Thre             | shold Amounts for  | Public Offices                            |
|   | _                       | e Fair Campaign Pr   |   |
| Address (street or post office box)   | \$25,000                | Statewide off  | ice                                       |
|   | • •                     |  |   |
|   | \$10,000                |  |   |
| City State 7IP Code   | \$5,000                 | State House  |   |
| City State ZIP Code   | \$5,000<br>\$5,000      | State House<br>Circuit or dist   | rict office                               |
| City State ZIP Code Signature of Appointee  | \$5,000                 | State House  | rict office                               |

#### Where to file this form ...

- 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 probate.

| ireasurer                           |   |                                       |
|-------------------------------------|---|---------------------------------------|
| Full Name.                          | 1/1/0                                   |                                       |
| Address street or post office box   |   |                                       |
| DAX 75                              | <u> </u>                                |                                       |
| city follows to                     | State                                   | ZIP Code 350/3                        |
| Signature of Appeintee              |   |                                       |
| 1 700                               | 1000                                    |                                       |
| Commi                               | ttee Memb                               | er                                    |
| Full Name                           |   |                                       |
|                                     |   |                                       |
| Address (street or post office box) |   |                                       |
| City                                | State                                   | ZIP Code                              |
| Signature of Appointee              | - · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |

### 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 |
|          | <del>-</del>               |

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 9.2.2011