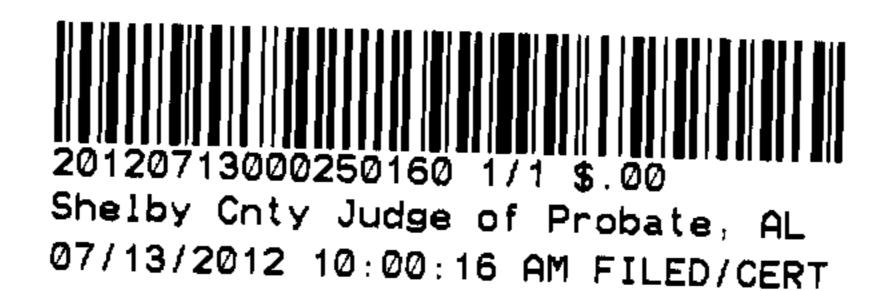
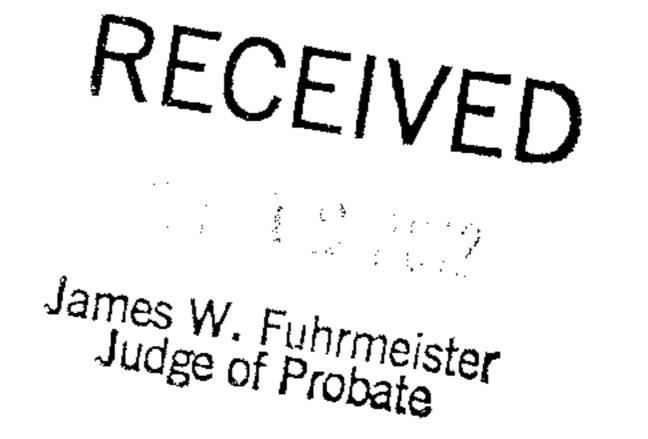


Waiver of Report

FOR CANDIDATES

(OPTIONAL FORM)





Please Print in Ink or Type.

Name of Candidate			Political Party/Ballot Affiliation	Тур	e of Report (check one)	
Morbert Alan	CY; S		Kepub. Can		Monthly Report Month in which the	
Office Sought (include district or circuit number	ber, if applicable)				report is filed.	
Town Council				4	Weekly Report	
Address	ldress				Date of Friday in the week in which the	
P.O. Box 184					report is filed.	
City	State	ZIP Code 35 186	Telephone Number		Annual Report Calendar year covered	
Wilsonville	AL	-77106			by this report.	

This form is not for use by principal campaign committees for elected, public officials.

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.

FORM REVISED 1.10.2012