



FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY



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Shelby Cnty Judge of Probate, AL  
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James W. Fuhrmeister  
Judge of Probate

# Appointment of Principal Campaign Committee

Please print in ink or type.

Full Name of Candidate <b>ROBERT BIRRELL HICKS</b>			
Office Sought (include district or circuit number, if applicable) <b>AMSTER CITY COUNCIL, WARD 2</b>		Political Party / Ballot Affiliation <b>IND</b>	
Address of the Committee (street or post office box) <b>2117 KING CHARLES CIRCLE</b>			
City <b>AMSTER</b>	State <b>AL</b>	ZIP Code <b>35007</b>	Telephone Number <b>[REDACTED]</b>

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 independent or third party candidate.

Type of Committee (check one)

- ☒ I appoint myself as the sole member of my principal campaign committee.
- ☐ I hereby appoint the individuals listed below to act as my principal campaign committee.

If you are appointing others to serve as your committee, you must select at least two members. You may appoint up to five members. One member should be designated as the chairperson of the committee. A second member should be designated as the treasurer. Please clearly print their names and addresses in the spaces below. Each appointee must sign his or her name.

Chairperson			
Full Name <b>ROBERT BIRRELL HICKS</b>			
Address (street or post office box) <b>2117 KING CHARLES CIRCLE</b>			
City <b>AMSTER</b>	State <b>AL</b>	ZIP Code <b>35007</b>	
Signature of Appointee <b>[Signature]</b>			

Treasurer		
Full Name		
Address (street or post office box)		
City	State	ZIP Code
Signature of Appointee		

Committee Member			
Full Name			
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee			

Committee Member			
Full Name			
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee			

Committee Member			
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

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.

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]**  
Signature of elected official or candidate

**7-12-2012**  
Date