

Signature of Appointee

probate.

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

Appointment of Shelby Cnty Judge of Probate, AL 07/13/2012 02:34:13 PM FILED/CERT Principal Campaign Committee

20120713000251790 1/1 \$.00 Shelby Cnty Judge of Probate, AL

RECEIVED Jul 13 2012

James W. Fuhrmeister
Judge of Probate

Please print in ink or type.	This form is due within five (5) calendar days of
Full Name of Candidate HOLLE ANDERSON CAMPBELL C Office Sought (include district or circuit number, if applicable) Political Part MAYOR MONTEVALLO Address of the Committee (street or post office box) City State ZIP Code Telephonomy MONTEVALLO AU 35 165	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 should be designated as the chairperson of the committee. A second mer and addresses in the spaces below. Each appointee must sign his or her	at least two members. You may appoint up to five members. One member nber should be designated as the treasurer. Please clearly print their names name.
Chairperson	Treasurer
Full Name	Full Name
Address (street or post office box)	Address (street or post office box)
City State ZIP Code	City State ZIP Code
Signature of Appointee	Signature of Appointee
	Committee Member
Committee Member Full Name	Fuli Name
Address (street or post office box)	Address (street or post office box)
City State ZIP Code	City State ZIP Code
Signature of Appointee	Signature of Appointee
Committee Member	
Full Name	Filing Threshold Amounts for Public Offices under the Fair Campaign Practices Act
Address (street or post office box)	\$25,000 State Senate seat
City State ZIP Code	\$5,000 State House seat \$5,000 Circuit or district office \$1,000 County or municipal office

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

17-13~12