

Full Name of Candidate

Appointment of Shelby Cnty Judge of Probate, AL 07/13/2012 02:34:22 PM FILED/CERT

Please print in ink or type.

RECEIVED

JUL 13 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)

independent or third party candidate.

principal campaign committee.

calendar days of qualifying with a political party, or

within five (5) calendar days of filing a petition as an

Tappoint myself as the sole member of my

as my principal campaign committee.

Type of Committee (check one)

I hereby appoint the individuals listed below to act

Principal Campaign Committee

Brakefield Office Sought (include district or circuit number, if applicable) Political Party / Ballot Affiliation Address of the Committee (street or post office box) Telephone Number ZIP Code State abaster 35007 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 sh and addresses in the spaces below. Each appointee must sign his or her name. Chairperson Full Name Address (street or post office box) City ZIP Code State Signature of Appointee Committee Member Full Name Address (street or post office box) ZIP Code City State Signature of Appointee Committee Member Full Name Address (street or post office box) ZIP Code City State Signature of Appointee

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.

Trea	asurer		
Full Name			
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee	·	······································	
Committ	ee Memb	er	
Full Name			
Address (street or post office box)		· · · · · · · · · · · · · · · · · · ·	
City	State	ZIP Code	
Signature of Appointee			

under the Fair Campaign Practices Act

As required by the Alabama Fair Campaign Practices Act, I

that the information contained herein is true and correct.

hereby swear or affirm to the best of my knowledge and belief

Statewide office

State Senate seat

State House seat

Circuit or district office

County or municipal office

\$25,000

\$10,000

\$5,000

\$5,000

\$1,000

Signature of elected official or candidate