

Where to file this form ...

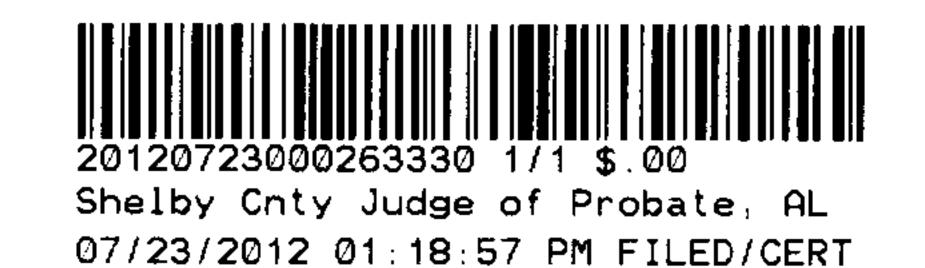
probate.

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



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111 20 2012

James W. Fuhrmeister Judge of Probate

This form is due within five (5) calendar days of

Appointment of

Principal Campaign Committee

Please print in ink or type.

Full Name of Candidate JAMES ERMO: Office Sought (include district or circulated) Pelham Cit	it number, if a	pplicable) Politic	cal Party / Ballot Affiliation	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.
		<u> </u>		Type of Committee (check one)
Address of the Committee (street or p	Street DOX	<i></i>	<u> </u>	I appoint myself as the sole member of my principal campaign committee.
City	State	ZIP Code	Telephone Number Zo5	I I Heleby appoint the individuals listed below to a
Pelham	AL	35124		as my principal campaign committee.
should be designated as the chair and addresses in the spaces below	person of th	e committee. A secon	nd member should be desig	rs. You may appoint up to five members. One member gnated as the treasurer. Please clearly print their names
Full Name			Full Name	
				······································
Address (street or post office box)			Address (str	reet or post office box)
City	State	ZIP Code	City	State ZIP Code
Signature of Appointee	<u>. </u>		Signature of	f Appointee
Committ	ee Memb	er	TATE TO THE TATE OF THE OF THE TATE OF THE	Committee Member
Full Name			Full Name	
Address (street or post office box)			Address (str	reet or post office box)
City	State	ZIP Code	City	State ZIP Code
Signature of Appointee			Signature of	of Appointee
Commit	tee Memb)er		
Full Name			Fi!	ling Threshold Amounts for Public Offices
Full Name		<u></u> .	6	under the Fair Campaign Practices Act
Address (street or post office box)				\$25,000 Statewide office
				\$10,000 State Senate seat
City	State	ZIP Code		\$5,000 State House seat \$5,000 Circuit or district office
dity				\$5,000 Circuit or district office \$1,000 County or municipal office
Signature of Appointee	<u></u>			

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

Date