## Waiver of Report FOR CANDIDATES

(OPTIONAL FORM)

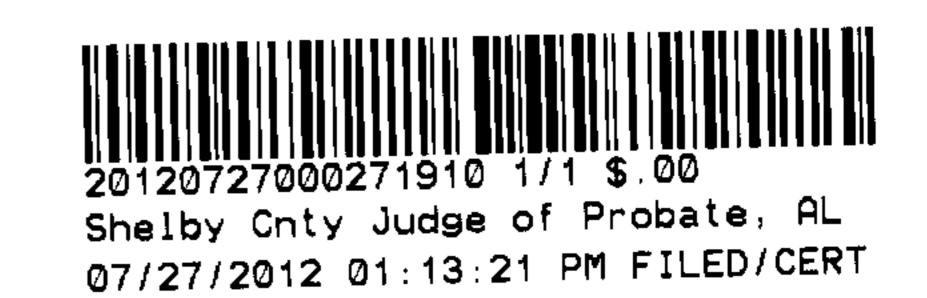
SHELBY COUNTY

669-3714

TEFFERION CENNY

325-1437

7-25-12



F.CEIVED JUL 25 2012

James W. Fuhrmeister judge of Probate

## Please Print in Ink or Type.

Political Party/Ballot Affiliation	Type of Report (check one)
Report Skelton	Monthly Report  Month in which the
Office Sought (Include district or circuit number, if applicable)	report is filed.  Weakly Report
HOUSER 157 COUNCIL PLACE 6  Address Check box if reporting new address	Date of Friday in the
Address Check box is toporarily non-transfer.	week in which the report is filed.
1005 HIGHLAND GATE COURT State ZIP Code Talaphone Number	Annual Report
HODJEE PL 352K4	Calendar year covered 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.

Separate of Candidate Dose

FORM REVISED 1 10 2012