

RECEIVED

AUG 06 2012

James W. Fuhrmeister Judge of Probate

I hereby appoint the individuals listed below to act

as my principal campaign committee.

Appointment of Principal Campaign Committee

State

AL

Please print in ink or type. This form is due within five (5) calendar days of reaching the threshold amount, or within five (5) Full Name of Candidate calendar days of qualifying with a political party, or Weldon within five (5) calendar days of filing a petition as an Office Sought (include district or circuit number, if applicable) Political Party / Ballot Affiliation independent or third party candidate. Council Type of Committee (check one) Address of the Committee (street or post office box) I appoint myself as the sole member of my principal campaign committee. Telephone Number ZIP Code

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.

35043

Full Name		
Ronald J Hushe	. .	
Address (street or post office box)		
300 menhattan Lake	د.	
City	State	ZIP Code
Columbianc	AL.	3505/
Signature of Appointee		
Committ	ee Membe	er
Full Name		
Address (street or post office box)		
City	State	ZIP Code
Signature of Appointee		
Committ	ee Membe	er e
Full Name		
Address (street or post office box)		
City	State	ZIP Code
Signature of Appointee		

Chairperson

Where to file this form ...

City

Chelsea

- 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.

20120806000286370 1/1 \$.00 Shelby Cnty Judge of Probate,	_		

08/06/2012 12:55:04 PM FILED/CERT

		Ireas	urer	·	
Full Name	berly	Dawn	<i>j</i>	weldow	
	eet or post offic	ce box)			
160	nghland	Ridie	Drie	"	
City			State	ZIP Code	
Chelse	4		AL	35043	
Signature of	<u> </u>	ommittee	Me	mber	
Full Name					
Address (stre	eet or post offic	ce box)			
City	· · · · · · · · · · · · · · · · · · ·		State	ZIP Code	<u>.</u>
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
	

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 of icial or candidate

FORM REVISED 9.2.2011