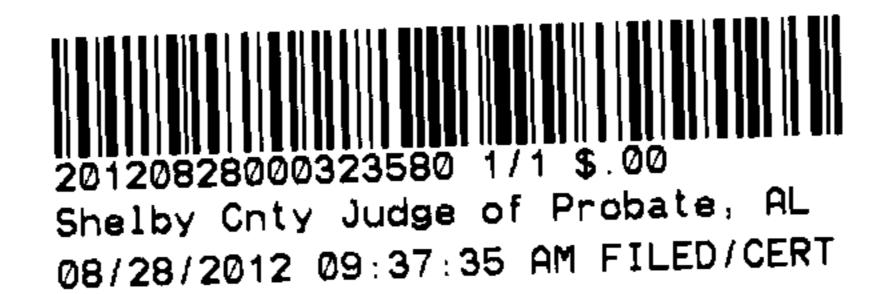


Waiver of Report

FOR CANDIDATES

(OPTIONAL FORM)



RECEIVED

AUG 27 2012

James W. Fuhrmeister
Judge of Problem

Please Print in Ink or Type.

Name of Candidate Political Party/Ballot Affiliation	Type of Report (check one)
Office Sought (include district oricircuit number, if applicable)	Monthly Report Month in which the report is filed.
Address Check box if reporting new address 1286 OLO CAHABA TV	Weekly Report Date of Friday in the week in which the report is filed.
City Helena State ZIP Code Telephone Number 35080	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.

Signature of Candidate

Any 22 2017

Date