





Waiver of Report

FOR ELECTED OFFICIALS AND CANDIDATES

(OPTIONAL FORM)



Please	Print in	ı Ink or	· Type
--------	----------	----------	--------

Name of Candidate or Elected Official	Political Party/Bellot Affillation	Type of Report (check one)
DANIEL M. ANDER SR.	RepublicAN	Monthly Report
Office Sought or Heid (include district or circuit number, if applicable)		Weekly Report
Co. Commission District 4		Daily Report (state candidates and
Address Check box if reporting new address		elected officials only)
895-10135t 5.W.		
City , State ZIP Code	Telephone Number	
ALABASTER AL 35007		

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 or Elected Official Date

Date