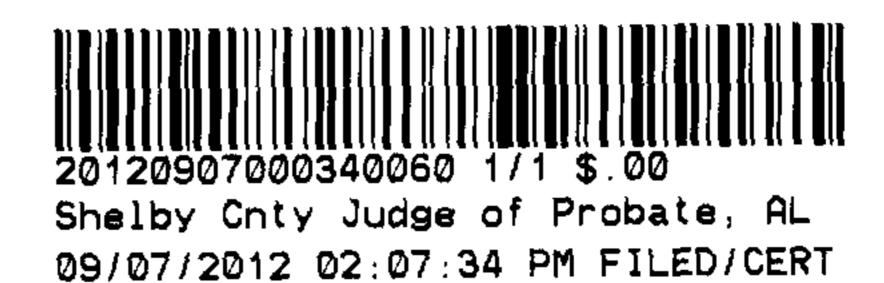


Waiver of Report FOR CANDIDATES

(OPTIONAL FORM)



RECEIVED

SEP 07 2012

James W. Fuhrmeister

Judge of Probate

Please Print in Ink or Type.

Name of Candidate	1	Political Party/Ballot Affiliation	Type of Report (check one)	
W. Main	Watson	110 Pbact	Monthly Report	······································
Office Sought (include district or circuit num	ber, if applicable)		Month in which the report is filed.	
VARAIVES FIS	· District	1/000	Weekly Report	
Address Check box if reporting new ad	ddress		Date of Friday in the	^
1.0.30大21			week in which the report is filed.	7-7-12
City	State ZIP Cod	e Telephona Number	Annual Report	
VA SIV	a (35176		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.

 $\frac{9}{2} - 7 - 12$