





Appointment of Principal Campaign Committee

Ple	ase print in ink or type.		This form is due within f ve (5) calendar days of
Full Name of Candidate Peggin, H. Office Sought (inolude district or circuit number, if applicable) Political Party / Ballot Aff liation			reaching the threshold amount, or within f ve (5) calendar days of qualifying with a political party, or within f ve (5) calendar days of f ling a petition as an independent or third party candidate.
		epublican	Type of Committee (check one)
Address of the Committee (street or po			appoint myself as the sole member of my principal campaign committee.
Columbiana	State ZIP Code Tel	ephone Number	I hereby appoint the individuals listed below to act as my principal campaign committee.
should be designated as the chairpand addresses in the spaces below	· · · · · · · · · · · · · · · · · · ·	ember should be desigr	You may appoint up to five members. One member nated as the treasurer. Please clearly print their names Treasurer
Full Name		Full Name	
Address (street or post off ce box)		Address (stre	et or post off ce box)
City State	ZIP Code	City State	ZIP Code
Signature of Appointee		Signature of A	ppointee
Committe	e Member		Committee Member
Full Name		Full Name	
Address (street or post off ce box)		Address (stree	et or post off ce box)
City State	ZIP Code	City State	ZIP Code
Signature of Appointee		Signature of A	ppointee
Committe	e Member	<u> </u>	
Full Name			ng Threshold Amounts for Public Off ces Inder the Fair Campaign Practices Act
Address (street or post off ce box)			\$25,000 Statewide off ce \$10,000 State Senate seat
City State	ZIP Code		\$5,000 State Senate seat \$5,000 Circuit or district off ce \$1,000 County or municipal off ce
Signature of Appointee			

Where to file this form ...

- State candidates f le with the Off ce 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 f le with their county's judge of probate.

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\$5,000	State House	e seat
\$5,000	Circuit or dis	strict off ce
\$1,000	County or m	nunicipal off ce

As required by the Alabama Fair Campaign Practices Act, I hereby swear or aff rm to the best of my knowledge and belief that the information contained herein is true and correct.