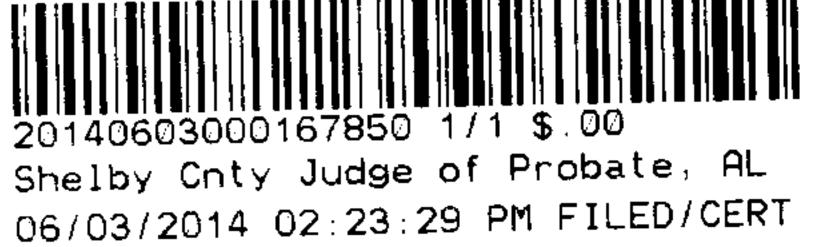
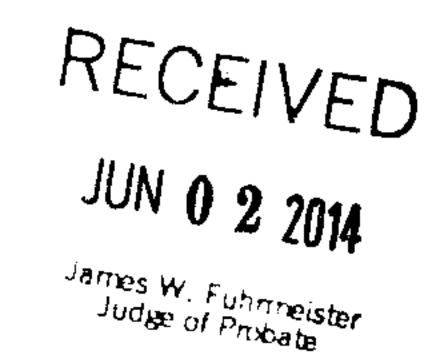


Appointment of





Principal Campaign Committee

Please print in ink or type.

				This form is due within five (5) calendar days of	
Full Name of Candidate	$I \cdot D = A + A \cdot A \cdot$			reaching the threshold amount, or within five (5) calendar days of qualifying with a political party, or	
JAMES A. SI	TAMES A. SULLIVAN LIBERIAKIAN			within five (5) calendar days of filing a petition as an	
Office Sought (include district or ci	•		al Party / Ballot Affiliation	independent or third party candidate.	
Property TAX Co Address of the Committee (street	nr post office box)		·	Type of Committee (check one)	
POBOX 463	<u> </u>	····	•	I appoint myself as the sole member of my principal campaign committee.	
ALABASTER State ZIP Code Telephon AL 35007		Telephone Number	I hereby appoint the individuals listed below to a as my principal campaign committee.		
. ,	airperson of the	committee. A secon	d member should be desig	s. You may appoint up to five members. One member gnated as the treasurer. Please clearly print their names	
Ch	airperson			Treasurer	
Full Name JAMES A- Su Po Box 463	[[iva-n		Full Name		
Address (street or post office box)			Address (str	reet or post office box)	
ALABASTER	A .	35007			
<u> </u>	State	ZIP Code	City	State ZIP Code	
City jAQ_{0}	Olato				
j A Sel		· ••••••••••••••••••••••••••••••••••••	Signature of	Appointee	
City A Signature of Appointee			Signature of	Appointee	
Signature of Appointee			Signature of		
Signature of Appointee	ittee Membe		Signature of	Appointee Committee Member	
Signature of Appointee Comm		⊋ ↑			
Signature of Appointee Comm	ittee Membe		Full Name		
Signature of Appointee Comm Full Name	ittee Membe	ZIP Code	Full Name	Committee Member	
Signature of Appointee Comm Full Name Address (street or post office box)	ittee Membe		Full Name Address (str	Committee Member eet or post office box) State ZIP Code	
Signature of Appointee Comm Full Name Address (street or post office box) City Signature of Appointee	ittee Membe	ZIP Code	Full Name Address (str	Committee Member eet or post office box) State ZIP Code	
Signature of Appointee Comm Full Name Address (street or post office box) City Signature of Appointee	state	ZIP Code	Full Name Address (str	Committee Member eet or post office box) State ZIP Code Appointee	
Signature of Appointee Comm Full Name Address (street or post office box) City Signature of Appointee Comm	state	ZIP Code	Full Name Address (str	Committee Member eet or post office box) State ZIP Code	
Signature of Appointee Comm Full Name Address (street or post office box) City Signature of Appointee Comm	State ittee Membe	ZIP Code	Full Name Address (str	Committee Member eet or post office box) State ZIP Code Appointee ing Threshold Amounts for Public Offices	
Signature of Appointee Comm Full Name Address (street or post office box) City Signature of Appointee Comm Full Name	State ittee Membe	ZIP Code	Full Name Address (str	Committee Member eet or post office box) State ZIP Code Appointee ing Threshold Amounts for Public Offices under the Fair Campaign Practices Act \$25,000 Statewide office \$10,000 State Senate seat	
Signature of Appointee Comm Full Name Address (street or post office box) City Signature of Appointee Comm Full Name	State ittee Membe	ZIP Code	Full Name Address (str	Committee Member eet or post office box) State ZIP Code Appointee ing 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	
Signature of Appointee Comm Full Name Address (street or post office box) City Signature of Appointee Comm Full Name Address (street or post office box)	State ittee Membe	ZIP Code	Full Name Address (str	Committee Member eet or post office box) State ZIP Code Appointee ing Threshold Amounts for Public Offices under the Fair Campaign Practices Act \$25,000 Statewide office \$10,000 State Senate seat	

Where to file this form ...

- 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.

Full Name		
Address (street or post offic	ce box)	
City	State	ZIP Code
Signature of Appointee		

Committee Member					
Full Name					
Address (street or post office box)					
City	State	ZIP Code			

Amounts for Public Offices 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

na 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 official or candidate Date