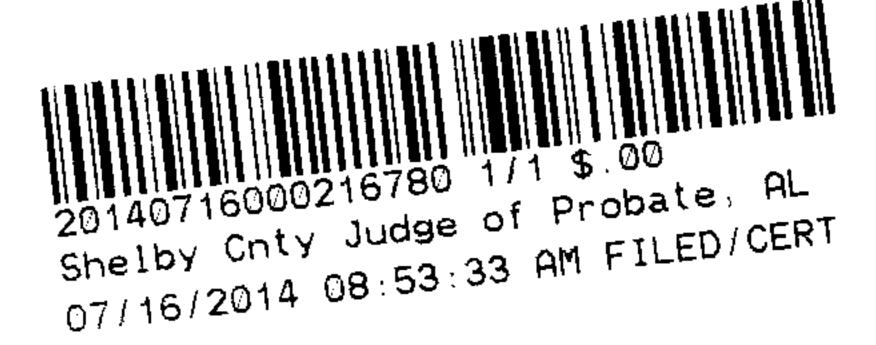
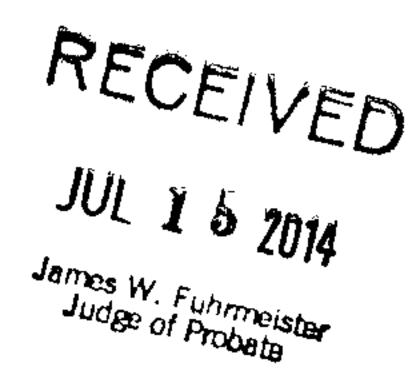


## Waiver of Report

FOR CANDIDATES

(OPTIONAL FORM)





Please Print in Ink or Type.

Name of Candidate	Political Party/Ballot Affiliation	Type of Report (check one)	
JAMES N NOLAN	REPUBLICAN	Monthly Report  Month in which the	<del>,,,,,,,,,,,,</del>
Office Sought (include district or circuit number, if applicable)	7.0c D.57	report is filed.	
TRUSTEE CAHABA VALLEY	FIRE DIST.	Weekly Report	
Address Check box if reporting new address		Date of Friday in the	
5 LANCASTER		week in which the report is filed.	<u></u>
City State ZiP Code State VIP Code	Telephone Number	Annual Report	
SHOAL CREEK AL 35242		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

Date