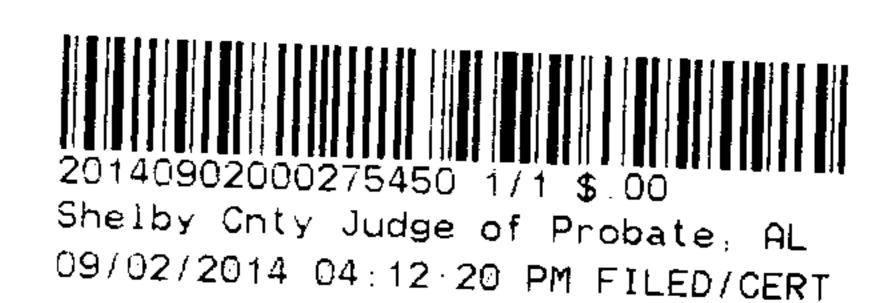


Waiver of Report

FOR CANDIDATES

(OPTIONAL FORM)



RECEIVED

SEP 0 2 2014

James W. Fuhrmeister Judge of Probate

Please Print in Ink or Type.

Name of Candidate	Political Party/Ballot Aff liation	Iype of Report (check one)	
Off ce Sought (include district or circuit number, if applicable) Address Check box if reporting new address To 5 Thompson	Republica.	Monthly Report Month in which the report is f led. Weekly Report Date of Friday in the week in which the report is f led.	september.
Celumbiana AL	Telephone Number	Calendar year covered by this report.	

This form is not for use by principal campaign committees for elected, public off cials.

In any reporting period, no campaign f nance report is required if the appropriate f ling threshold has not been reached by the candidate. The f ling thresholds are as follows:

- ▶ \$25,000 candidates for state off ces
- ▶ \$10,000 candidates for State Senate
- ▶ \$5,000 candidates for State House of Representatives
- ▶ \$5,000 candidates for district or circuit off ces
- ▶ \$1,000 candidates for local off ces

I have not reached the fling threshold amount as set forth in the Fair Campaign Practices Act for the off ce for which I am seeking nomination or election.

This OPTIONAL form gives notice that no contribution or expenditure report will be submitted.