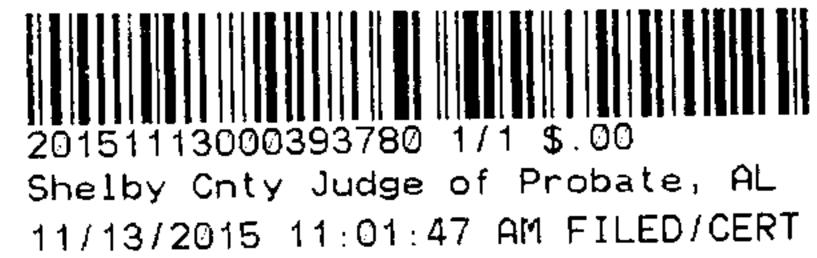
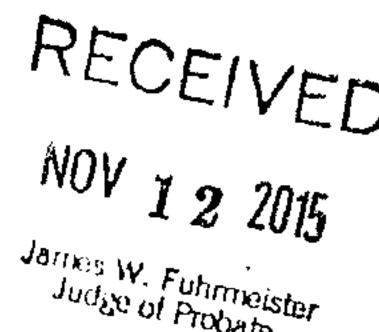


probate.

## Appointment of Shelby Cnty Judge of Probate 11/13/2015 11:01:47 AM FILE Principal Campaign Committee





	Tobate
Please print in ink or type.	
Full Name of Candidate  Office Solught (include district or circuit number, if applicable)  Political Party	This form is due within <b>five</b> (5) calendar days of reaching the threshold amount, or within <b>five</b> (5) calendar days of qualifying with a political party, or within <b>five</b> (5) calendar days of filing a petition as an independent candidate.
d. 1/2 / 050	200 Ca1 A
Address of the Committee (street or post office box)	Type of Committee (check one)
501 Liberby It dy VLX	I appoint myself as the sole member of my principal campaign committee.
City State SIP Code Teleph 35043	I hereby appoint the individuals listed below to ac as my principal campaign committee.
you are appointing others to serve as your committee, you must select a hould be designated as the chairperson of the committee. A second mem addresses in the spaces below. Each appointee must sign his or her in	at least two members. You may appoint up to five members. One member above should be designated as the treasurer. Please clearly print their names name.
Chairperson	Treasurer
Full Name	Full Name
Address (street or post office box)	Address (street or post office box)
City State ZIP Code	City State ZIP Code
Signature of Appointee	Signature of Appointee
Committee Member	Committee Member
Full Name	Full Name
Address (street or post office box)	Address (street or post office box)
City State ZIP Code	City State ZIP Code
Signature of Appointee	Signature of Appointed
	Signature of Appointee
Committee Member	
Full Name	Filing Threshold Amounts for Public Offices under the Fair Campaign Practices Act
Address (street or post office box)	\$1,000 Statewide office \$1,000 State Senate seat
City State ZIP Code	\$1,000 State House seat \$1,000 Circuit or district office
Signature of Appointee	\$1,000 County or municipal office
Where to file this form	As required by the Alabama Fair Campaign Practices Act, I
<ul> <li>State candidates file with the Office of the Secretary of State, located in the Alabama State Capitol, Room E-210. The mailing</li> </ul>	hereby swear or affirm to the best of my knowledge and belief that the information contained herein is true and correct.
address is P.O. Box 5616, Montgomery, Alabama 36103-5616.  County and municipal candidates file with their county's judge of	1 (20) / Dan 11111111111111111111111111111111111

FORM REVISED 4.13.2015

Signature of elected official or candidate