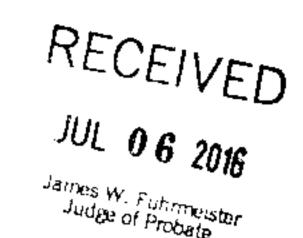


Appointment of Shelby Cnty Judge of Probate, AL 07/08/2016 09:30:15 AM FILED/CERT Principal Campaign Committee



Please print in ink or type.							
Full Name of Candidate Smith Office Sought (include district or circuit number, if applicable) Political Party / Ballot Affiliation Councine by State Address of the Committee (street or post office box) State State ZIP Code If you are appointing others to serve as your committee, you must select at least two members should be designated as the chairperson of the committee. A second member should be designant addresses in the spaces below. Each appointee must sign his or her name.					This form is due within five (5) calendar days of reaching the threshold amount, or within five (5) calendar days of qualifying with a political party, or within five (5) calendar days of filing a petition as an independent candidate. Type of Committee (check one) I appoint myself as the sole member of my principal campaign committee. I hereby appoint the individuals listed below to act as my principal campaign committee. You may appoint up to five members. One member nated as the treasurer. Please clearly print their names		
Chairperson					Treasurer		
Full Name	pordon		Full Name		TTCUSUTCI		
Address (street or post office box)			Address (str	eet or post office t	oox)		
City	State	ZIP Code	City		State	ZIP Code	
Signature of Appointee			Signature of	Appointee			
Committ		Committee Member					
Full Name			Full Name				
Address (street or post office box)			Address (stre	et or post office b	ox)		
City	State	ZIP Code	City		State	ZIP Code	
Signature of Appointee	<u></u>		Signature of	Appointee	<u>-</u>		
Committ	ee Membe				·		
Full Name			Fili	na Threshold	Amounts for P	ublic Offices	
				–	r Campaign Pra		
Address (street or post office box)		<u> </u>		\$1,000 \$1,000	Statewide office State Senate s	seat	
City	State	ZIP Code		\$1,000 \$1,000 \$1,000	State House s Circuit or distri County or mur	ct office	
Signature of Appointee		· · · · · · · · · · · · · · · · · · ·		· · · <u>- · · · · · · · · · · · · · · · ·</u>	······································		

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.

As required by the Alabama 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

FORM REVISED 4.13.2015