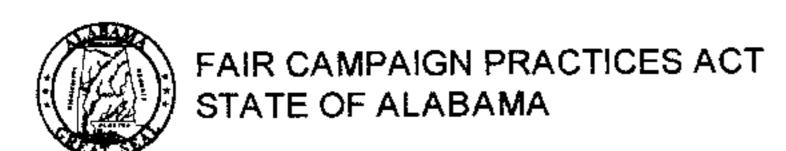
This form is due within ¿ve (5) calendar days of

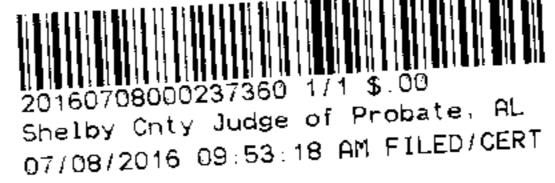


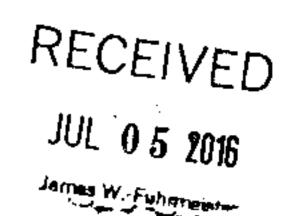
Appointment of

Where to ¿le this form ...

State candidates ale with the Oface of the Secretary of State. County and

municipal canidates ¿le with their county's judge of probate.





Principal Campaign Committee

Please print in ink or type.

Full Name of Candidate William C. Gosson R. Of ce Sought, (include district or circuit number, if applicable) Email Address of the Candidate W C. Gosson & Delsouth Net Address of the Committee (street or post of ce box) 430 (Pestview Lix Cle City Control of the Candidate City City City City City City City City			reaching the threshold amount, or within ¿ve (5) calendar days of qualifying with a political party, or within ¿ve (5) calendar days of ¿ling a petition as an independent candidate. Type of Committee (check one) 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. S. You may appoint up to ¿ve members. One member gnated as the treasurer. Please clearly print their names	
	Chairperson		Treasurer	
Full Name	Email Address	Full Name	Email Address	
Address (street or post of¿ce box)		Address (street o	Address (street or post of ce box)	
City	State ZiP Code	City	State ZIP Code	
Signature of Appointee		Signature of App	ointee	
	Committee Member		Committee Member	
Full Name	Email Address	Full Name	Emeil Address	
Address (street or post of	f¿ce box)	Address (street o	or post of ¿ce box)	
City	State ZIP Code	City	State ZIP Code	
Signature of Appointee		Signature of App	ointee	
Committee Member			Committee Dissolution Designee	
Full Name	Email Address	Full Name	ae Closson we Glosson a bel sour	
Address (street or post of	f¿ce box)	Address (street of	rest view like	
City	State ZIP Code	Monte	NA 110 AL 35115	
Signature of Appointee		Signature of App	ointee Land	
Candidates who choose committee <i>must</i> choose	the dissolution designee e to be the sole member of their principal campa e a designee to dissolve the committee due to the capacitation of the candidate.	aign hereby swea	by the Alabama Fair Campaign Practices Act, I or aftern to the best of my knowledge and belief mation contained herein is true and correct.	

Signature of elected of ¿cial or candidate

Date

FORM REVISED 1.28.2016