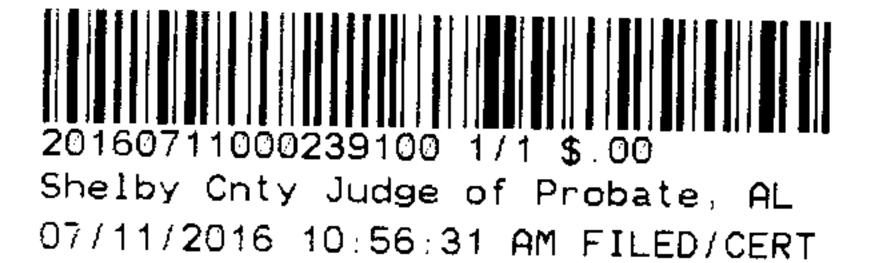
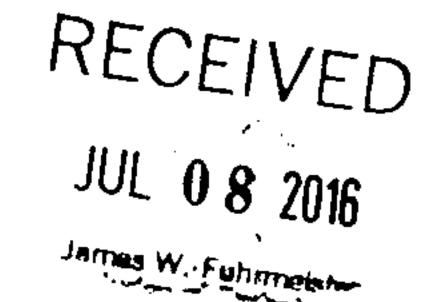
This form is due within five (5) calendar days of



municipal canidates file with their county's judge of probate.

Appointment of





Date

FORM REVISED 1.28.2016

Principal Campaign Committee

Please print in ink or type.

Full Name of Candidate	reaching the threshold amount, or within five (5)
Jamia Alexander Williams	calendar days of qualifying with a political party, or
Office Sought (include district or circuit number, if applicable) Political Party / E	within five (5) calendar days of filing a petition as an independent candidate.
Diabacter City Council Word 5	macpondent danialator
Email Address of the Candidate	Type of Committee (check one)
iamiatorcitycouncil@amail.com	I appoint myself as the sole member of my
Address of the Committee (street or post office box)	principal campaign committee.
144 Cedar Grove Tarkway	
City State ZIP Code Telephon	e Number I hereby appoint the individuals listed below to act
Maylen 35/14/	as my principal campaign committee.
	est tue resmbare. Vou mou annoint un to five mombere. One momber
If you are appointing others to serve as your committee, you must select at less should be designated as the chairperson of the committee. A second membe	r should be designated as the treasurer. Please clearly print their names
and addresses in the spaces below. Each appointee must sign his or her nai	
Chairperson	Treasurer
Full Name Email Address	Full Name Email Address
(next Donoll Chery Schollegagnail.	Kachel Machare Mpatisa juno com
Address (street or post office box)	Address (street or post office box)
302 horwick lane Alabana 35007	144 (edar anne tarkway
City CS State M ZIP Code	
Ett Shoel aldustan 35007	City State ZIP Code 35114
Signature of Appointee	Signature of Appointee
Chl 1. 1. 201	DOMA MARKET
Ch Shell	Committee Member
Committee Member	
Full Name Email Address \(\alpha \)	1 Full Name Email Address
	Ten Arbright Teritane quail-con
Address (street or post office box) Thegoodfox Address (street or post office box)	
Address (street or post office box) Hegoodfox Address (street or post office box)	Ten Albrialit Teri 4 auc quail-co Address (street or post office box)
Address (street or post office box) Hegoodfox Address (street or post office box)	Ten Arbright Teritane quail-con
Address (street or post office box) 408 Cornwall Dr. City State ZIP Code	Ten Albright Tev 14au Quail-co Address (street or post office box) 2133 N. Grande Vian L. City State ZIP Code
Address (street or post office box) 408 Cornwall Dr. City Maylene AL 35114	Ten Albright Tevi 4 aug guail-co- Address (street or post office box) 2133 N. Grande Vian L City State ZIP Code Maylone, A. 35714
Address (street or post office box) HOS Cornwall Dr. City State ZIP Code Al Signature of Appointed	Ten Albright Tev 14au Quail-co Address (street or post office box) 2133 N. Grande Vian L. City State ZIP Code
Address (street or post office box) 408 Covnwall Dv. City State ZIP Code AL 35-114 Signature of Appointee AL APPOINTEE A	Ten Albrialt Tevi 4 aug quail-co Address (street or post office box) 2133 N. Grande Vian L City State ZIP Code Naylue, A. 35714 Signature of Appointee Cuty
Address (street or post office box) HOS Covnwall Dv. City State ZIP Code AL 3514 Signature of Appointee Committee Member	Ten Albrialet Ter, 4aue quail-co Address (street or post office box) 233 N. Grandeliau L. City State ZIP Code Naylue, A. 35714 Signature of Appointee Committee Dissolution Designee
Address (street or post office box) HOS Covnwall Dv. City State ZIP Code AL 3514 Signature of Appointed Committee Member Full Name Email Address	Ten Albrialit Tevi Aaue quail-co Address (street or post office box) 233 N. Grandelian L. City State ZIP Code Naylue, A. 35114 Signature of Appointee Committee Dissolution Designee Full Name Email Address
Address (street or post office box) HOS Covnwall Dv. City State ZIP Code AL 35 14 Signature of Appointee Committee Member Full Name Email Address	Ten Albrialit Tevi Aaue quail-co Address (street or post office box) 233 N. Grandelian L. City State ZIP Code Naylue, A. 35114 Signature of Appointee Committee Dissolution Designee Full Name Email Address
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Address (street or post office box) 408 Cornwall Dr. City Mayler AL 3514 Signature of Appointee Full Name Email Address Melissa Madden msmaddenabelsow	Ten Albrialit Ter Aue quail-co Address (street or post office box) 233 N. Grandelian L. City State ZIP Code Number 35714 Signature of Appointee Committee Dissolution Designee Full Name Email Address
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Address (street or post office box) HOS Cornwall Dr. City Maylew AL 35/14 Signature of Appointed Appointed Email Address Melissa Madden msmaddenabellsowa Address (street or post office box) Lol Dogwood Trl City State ZIP Code Address (street or post office box) Lol Dogwood Trl City State ZIP Code Alabaster A 35007	Ten Albrialt Ten 4aue guail-co Address (street or post office box) 2433 N. Grandelian L. City State ZIP Code Naylone, A. 35714 Signature of Appointee Committee Dissolution Designee Full Name Email Address Address (street or post office box) City State ZIP Code
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Address (street or post office box) City State Committee Member Full Name Email Address Address (street or post office box) Address (street or post office box) Lol Dogwood Tri City State ZIP Code Medical Member Email Address Address (street or post office box) Lol Dogwood Tri City State ZIP Code Alchaster State ZIP Code Alchaster A note regarding the dissolution designee Candidates who choose to be the sole member of their principal campaign committee must choose a designee to dissolve the committee due to the	Ten Arbright Tev; 4aue gueil-co Address (street or post office box) 2433 N. Grandeli au lu. City State ZIP Code Naybue, B. 35114 Signature of Appointee Committee Dissolution Designee Full Name Email Address Address (street or post office box) City State ZIP Code Signature of Appointee As required by the Alabama Fair Campaign Practices Act, I
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Address (street or post office box) City State Committee Member Full Name Email Address Address (street or post office box) Address (street or post office box) Lol Dogwood Tri City State ZIP Code Medical Member Email Address Address (street or post office box) Lol Dogwood Tri City State ZIP Code Alchaster State ZIP Code Alchaster A note regarding the dissolution designee Candidates who choose to be the sole member of their principal campaign committee must choose a designee to dissolve the committee due to the	Ten Arbrialit Tev, 4aue quail-co Address (street or post office box) City State ZIP Code Nayther, A 35714 Signature of Appointee Committee Dissolution Designee Full Name Email Address Address (street or post office box) City State ZIP Code Signature of Appointee As required by the Alabama Fair Campaign Practices Act, I herepy swear or affirm to the best of my knowledge and belief

ture of elected official or candidate