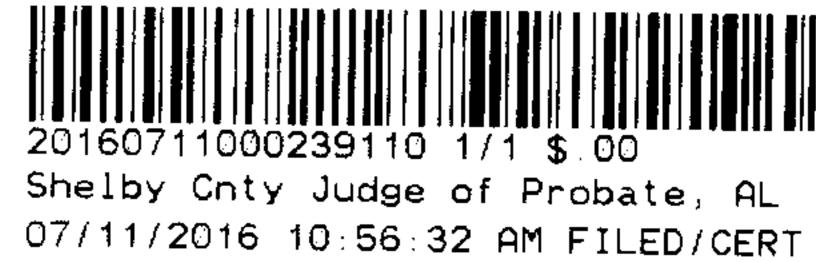


Appointment of

Where to file this form ...

State candidates file with the Office of the Secretary of State. County and

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



RECEIVED

JUL - 8 2016

James W. Fuhrmeister Judge of Probate

Principal Campaign Committee

Please print in ink or type.

Email Address of the Candidate Scott brakefield @ bellsouth.ret Address of the Committee (street or post office box) City State ZIP Code Tele Alphaster AL Scott If you are appointing others to serve as your committee, you must select should be designated as the chairperson of the committee. A second metals and the committee of the committee.	principal campaign committee. I hereby appoint the individuals listed below to act as my principal campaign committee. It at least two members. You may appoint up to five members. One member should be designated as the treasurer. Please clearly print their names
and addresses in the spaces below. Each appointee must sign his or h	
Chairperson	Treasurer Full Name Email Address
Full Name Email Address	Full Name Email Address
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 Email Address	Full Name Email Address
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 Manage	Committee Dissolution Designee
Full Name Committee Member Email Address	Full Name Email Address
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
A note regarding the dissolution designee Candidates who choose to be the sole member of their principal campa committee <u>must</u> choose a designee to dissolve the committee due to the possibility of death or incapacitation of the candidate.	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 1.28.2016