

Full Name of Candidate

Appointment of Principal Campaign Committee



Shelby Chty Judge of Probate, AL 07/19/2016 10:01:46 AM FILED/CERT

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

I hereby appoint the individuals listed below to act

Please print in ink or type.

JREENE

· · · · ·	TOWN of HAR	Political Party / Ballot Affiliation	independ	lent candidate.	OLIMITY & PECITION 38 8
Address of the Committee	(street or post office box)	Type of Committee (check one)			
P.O. BOX	463		l ap	point myself as the	sole member of my
City	State Z	P Code Telephone Number	- princ	cipal campaign com	mittee.
VINCENT AL 35178 Telephone Number			I hereby appoint the individuals listed below to as my principal campaign committee.		
If you are appointing other	rs to serve as your committee, you	ı must select at least two member			
should be designated as a and addresses in the sna	the chairperson of the committee. A	A second member should be design	gnated as the	treasurer. Please c	impers. One member learly print their names
		sign his or her name,			
Full Manage	Chairperson			Treasurer	
Full Name		Full Name			
Address (street or post office	e boxi			<u> </u>	
•	•	Address (stre	est or post offic	e box)	
City	State ZIP Code	City		State	ZIP Code
					Zii Code
Signature of Appointee		Signature of	Appointee		
		<u></u>			
	mmittee Member		Co	mmittee Memb	er
Full Name	•	Full Name			
Address (street or post office	box)	Address (stre	et or post office	box)	·
City	State ZIP Code		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
•	Otate ZIF Code	City		State	ZIP Code
Signature of Appointee		Signature of A	ppointee		·
Cor	nmittee Member	<u> </u>		·······	
Full Name	· · · · · · · · · · · · · · · · · · ·	Eilin	o Threehol	d Amounta for E	habita Offices
		T .		ld Amounts for F ir Campaign Pra	
Address (street or post office	box)		_		
•			\$1,000 \$1,000	Statewide office State Senate :	
City	State ZIP Code		\$1,000 \$1,000	State House a	
*	•		\$1,000 \$1,000	Circuit or distri County or mui	
Signature of Appointee		· · · · · · · · · · · · · · · · · · ·			
			, 	ma Fair Campaig	.

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.

	Treasurer	
Full Name		
Address (street or post	office box)	
City	State	ZIP Code
. •	•	•

Committee Member					
Full Name					
Address (street or pos	it office box)				
	State	ZIP Code			
City	2(2(4	ZIF COUR			
City		ZIF 0004			

Filing Threshold Amounts for Public Offices under the Fair Campaign Practices Act

\$1,000	Statewide office
\$1,000	State Senate seat
\$1,000	State House seat
\$1,000	Circuit or district office
\$1,000	County or municipal office

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