



**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

THIS AREA FOR OFFICIAL USE ONLY

Appointment of Principal Campaign Committee



20160720000252800 1/1 \$.00
Shelby Cnty Judge of Probate, AL
07/20/2016 08:09:06 AM FILED/CERT

Please print in ink or type.

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.

| | | | |
|---|--------------------|---|------------------|
| Full Name of Candidate Kimberly R. King | | | |
| Office Sought (include district or circuit number, if applicable) Columbiana City Counsel | | Political Party / Ballot Affiliation District 4 | |
| Email Address of the Candidate 103 Pinetree Circle | | | |
| Address of the Committee (street or post office box) familyofkings@bellsouth.net | | | |
| City Columbiana | State AL | ZIP Code 35051 | Telephone Number |

If you are appointing others to serve as your committee, you must select at least two members. You may appoint up to five members. One member should be designated as the chairperson of the committee. A second member should be designated as the treasurer. Please clearly print their names and addresses in the spaces below. Each appointee must sign his or her name.

| Chairperson | | Treasurer | |
|-------------------------------------|----------------|-------------------------------------|----------------|
| 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 Member | | Committee Dissolution Designee | |
|-------------------------------------|----------------|-------------------------------------|----------------|
| 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 | |

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 possibility of death or incapacitation of the candidate.

Where to file this form ...

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

Kim R. King 7-12-16
Signature of elected official or candidate Date