



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

THIS AREA FOR OFFICIAL USE ONLY

Appointment of Principal Campaign Committee

Please print in ink or type.

Full Name of Candidate BRIAN G. STAUSS			
Office Sought (include district or circuit number, if applicable) INDIAN SPRINGS VILLAGE TOWN COUNCIL PLACE #3		Political Party / Ballot Affiliation	
Email Address of the Candidate brian@staussfamily.com			
Address of the Committee (street or post office box) 240 CAHABA OAKS TRAIL			
City INDIAN SPRINGS	State AL	ZIP Code 35124	Telephone Number 205-987-9997

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Shelby Cnty Judge of Probate, AL
07/22/2016 10:08:25 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 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.

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	
Signature of Appointee		Signature of Appointee	
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	
Signature of Appointee		Signature of Appointee	
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	
Signature of Appointee		Signature of Appointee	
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	
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.

Brian G. Stauss 7/20/2016
Signature of elected official or candidate

Signature of elected official or candidate