lieu of an annual report.)



## Waiver of Report FOR CANDIDATES

(OPTIONAL FORM)

20160725000259190
20160725000259180 1/1 \$.00
Shelby Cnty Judge of Probate, AL
07/25/2016 03:40:59 PM FILED/CERT

Please Print in Ink or Ty	pe.			
Name of Candidate  Office Sought (include district or aircuit humber, if applicable)  Address Check box if reporting new address	Political Party/Ballot Affiliation  (Can  C	Type of Report (check one)  Monthly Report Month in which the report is filed.  Weekly Report Date that weekly report		
2004 long Brunch Con	clo	is due.	1-20-14	
City () (Ray State) Z	P Code Telephone Number  205-796 (9)	Calendar year covered by this report.		
(Note: This form is not for use by elected officials in				

This form is not for use by principal campaign committees of elected, public officials.

In any reporting period, no campaign finance report is required if the appropriate filing threshold has not been reached by the candidate. The filing threshold is \$1,000, regardless of the office sought:

- ▶ \$1,000 candidates for state offices
- ▶ \$1,000 candidates for State Senate
- \$1,000 candidates for State House of Representatives
- ▶ \$1,000 candidates for district or circuit offices
- ▶ \$1,000 candidates for local offices

I have not reached the filing threshold amount as set forth in the Fair Campaign Practices Act for the office for which I am seeking nomination or election.

This OPTIONAL form gives notice that no contribution or expenditure report will be submitted.

Signature of Candidate

Date