

## Waiver of Report FOR CANDIDATES (OPTIONAL FORM)

20160801000270220 1/1 \$.00
Shelby Cnty Judge of Probate, AL
08/01/2016 01:41:40 PM ET ED/CEDT

## Please Print in Ink or Type.

Name of Candidate	<u> </u>		Political Party/Ballot Affiliation	on Typ	e of Report (check one)	)
Bruan Scott  Office Sought (include district or circ	uit number, if applica	ıble)			Monthly Report  Month in which the report is filed.	
Pelham Cty a Address Check box if reporting	new address		Weekly Report Date that weekly report is due.			
City Pc-1ham	State	ZIP Code 35124	Telephone Number		Annual Report Calendar year covered by this report.	
					( <b>Note:</b> This form is not for u lieu of an annual report.)	se 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.

Scott Christian	8-1-16
Signature of Candidate	Date