

Appointment of Principal Campaign Committee

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	Cnty Judge of Probate, AL	

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Please print in ink or type. This form is due within five (5) calendar days of reaching the threshold amount, or within five (5) Full Name of Candidate calendar days of qualifying with a political party, or within five (5) calendar days of filing a petition as an Office Sought (include district or circuit number, if applicable) Political Party / Ballot Affiliation independent gandidate. PELHAM CITY COUNCIL PLACE #2 Type of Committee (check one) Email Address of the Candidate RON, SCOTT & CHARTER. NOT I appoint myself as the sole member of my Address of the Committee (street or post office box) principal campaign committee. I hereby appoint the individuals listed below to act Telephone Number ZIP Code City State as my principal campaign committee

1 EL 7 FM	12 35 124		as my principal campaign committee.
should be designated as the chair	_	er should be designa	You may appoint up to five members. One member ited as the treasurer. Please clearly print their names
Cha	airperson		Treasurer
Full Name	Email Address	Full Name	Email Address
RONALD GVY 500			NONE
Address (street or post office box)		Address (street or pe	ost office box)
1332 CAL15T	on WAY		
City PelHAM	State ZIP Code # 25/24	City	State ZIP Code
Signature of Appointee		Signature of Appoint	ee
	ittee Member		Committee Member
Full Name	Email Address	Full Name	Email Address
	NONQ		NON e
Address (street or post office box)		Address (street or po	ost office box)
City	State ZIP Code	City	State ZIP Code
Signature of Appointee		Signature of Appoint	ee
Commi	ittee Member	Co	mmittee Dissolution Designee
Full Name	Email Address	Full Name	Email Address
	NoNo		NONE
Address (street or post office box)		Address (street or po	
City	State ZIP Code	City	State ZIP Code
Signature of Appointee		Signature of Appoint	
		J.g. atai o or rappoint	

A note regarding the dissolution designee ...

Candidates who choose to be the sole member of their principal campaign committee <u>must</u> 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 canidates 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.

Signature of elected official or candidate

Date /

FORM REVISED 1.28.2016