



Statement of Dissolution

FOR ELECTED OFFICIALS, CANDIDATES AND POLITICAL ACTION COMMITTEES

Please Print in Ink or Type.

| | | | |
|--|--------------------|--------------------------|--------------------------------|
| Name of Candidate or Elected Official, or Political Committee <i>Mary Lee Reynolds</i> | | | |
| Office Sought or Held (include district or circuit number, if applicable) <i>City Council # 5</i> | | | |
| Address <input type="checkbox"/> Check box if reporting new address <i>1677 # 82</i> | | | |
| City <i>Vincent</i> | State <i>AL</i> | ZIP Code <i>35178</i> | Telephone Number [REDACTED] |

Report Status (check one)

- No report required because I have had no activity since the last reporting period
- Termination report attached

Note:

If you have had activity since the last report filed, you are responsible for filing the requisite **Annual Report** covering the last year of activity. However, the submission of a **Termination Report** along with the **Statement of Dissolution** will satisfy this requirement.

This statement dissolves the above-named Principal Campaign Committee or Political Action Committee as of the _____ day of _____ in the year _____.

Pursuant to §17-5-7(a) [Code of Alabama, 1975], any excess funds shall be disposed of in the following manner:

As required by the Alabama Fair Campaign Practices Act, I hereby swear, or affirm, to the best of my knowledge and belief that this Statement of Dissolution is true and correct.

Mary Lee Reynolds | *9-6-16*
 Signature of Candidate or Elected Official, or Chairperson or Date
 Treasurer of Political Committee

