County Division Code: AL040 Inst. # 2016122853 Pages: 1 of 1 I certify this instrument filed on: 11/22/2016 4:31 PM

Doc: ELPCC Alan L.King, Judge of Probate Jefferson County, AL

Clerk: LYNN



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Ave. S

Chairperson

State

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Office Sought (include district or circuit number, if applicable)

Address of the Committee (street or post office box)

Full Name of Candidate

David

Email Address of the Candidate.

3720 414

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Please print in ink or type.

Principal Campaign Committee

THIS AREA FOR OFFICIAL USE ONLY

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PROBATE COURT FILED IN OFFICE

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.

Treasurer

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 dearly print their names and addresses in the enaces below. Each appointee must sign his or her name.

Telephone Number

Political Party / Ballot Affiliation

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ZIP Code

35722

Full Name	Erneil Address	Full Name Email-Address	.,	
Churtophy	Hartell C-rentsellabolise	Fanila Marie Hubbard Jamila Zomani@qua	111. Con	
Address (street or post of	4va South # 532	Address (street or post office box) 546 5th Terrace 90th		
Ginning W	State ZIP Code Al. 35237	City State ZIP Code 2 75212	,,,,	
Signature of Appointee	2/11/	Signature of Applicated		
Committee Member		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	City State ZIP Code		
Signature of Appointee .		Signature of Appointée		
<u> </u>	Committee Member	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	City State ZIP Code		
Signature of Appointee		Signature of Appointee		
A note recarding	the dissolution designee	As required by the Alabama Fair Campaign Practices Act, i	i	

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 ...

1 .

State candidates file with the Office of the Secretary of State. County and municipal canidates file with their county's judge of probate.

hereby spar or affirm to the best of pro knowledge and belief that the information contained herein is true and correct.

icial or candidate

FORM REVISED 1.28.2016