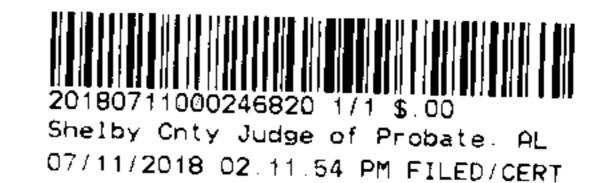


Appointment of Principal Campaign Committee



Full Name Candidate Committee Member Committee Member Committee Member Committee Member Committee Member Committee Committ	Please print in ink or type.	This form is due within five (5) calendar days of
Treasurer Full Name Email Address Address (street or post office box) City State ZIP Code Committee Member Full Name Email Address Address (street or post office box) City State ZIP Code Committee Member Full Name Email Address Committee Dissolution Designee Full Name Email Address Termifer Flair White Address Termifer Flair Whit	Office Sought (include district or circuit number, if applicable) Seat Welt Shelby Fire and Cescur Address of the Committee (street or post office box) Address of the Committee (street or post office box) City State ZIP Code Telephon AL 35115 If you are appointing others to serve as your committee, you must select at lesshould be designated as the chairperson of the committee. A second member and addresses in the spaces below. Each appointee must sign his or her natical Candidates who choose to be the sole member of their principal campaign committee.	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. I hereby appoint the individuals listed below to act as my principal campaign committee. east two members. You may appoint up to five members. One member er should be designated as the treasurer. Please clearly print their names ime.
Full Name		
Address (street or post office box) City State ZIP Code City State ZIP Code Signature of Appointee Committee Member Full Name Email Address Address (street or post office box) City State ZIP Code Committee Member Full Name Email Address Address (street or post office box) City State ZIP Code Signature of Appointee Committee Member Full Name Email Address Signature of Appointee Committee Member Full Name Email Address Full Name Email Address Committee Dissolution Designee Full Name Email Address Address (street or post office box) Address (street or post office box) Committee Dissolution Designee Full Name Email Address Address (street or post office box)	Chairperson	
City State ZIP Code City State ZIP Code City State ZIP Code Signature of Appointee Committee Member Full Name Email Address Address (street or post office box) City State ZIP Code Committee Member Full Name Email Address Committee Dissolution Designee Full Name Email Address Tennifer Elaine White Address (street or post office box) Lo Monte Verder LN City State ZIP Code Montevallo AL 35115	Full Name Email Address	Full Name Email Address
Signature of Appointee Committee Member Full Name Email Address	Address (street or post office box)	Address (street or post office box)
Committee Member Full Name Email Address Address (street or post office box) City State Committee Member Full Name City State City State Committee Member Signature of Appointee Committee Member Full Name Committee Dissolution Designee Full Name Email Address Committee Dissolution Designee Full Name Email Address Tennifer Flaine White Address (street or post office box) City State ZIP Code City State City State City State Committee Dissolution Designee Full Name Email Address Tennifer Flaine White Address (street or post office box) City State C	City State ZIP Code	City State ZIP Code
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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 Committee Member Full Name Email Address Full Name Email Address Full Name Email Address Tennifer Elaine White Address (street or post office box) City State ZIP Code City State ZIP Code City State ZIP Code Address (street or post office box) City State ZIP Code Address (street or post office box)	Committee Momber	Committee Member
City State ZIP Code City State ZIP Code City State ZIP Code Signature of Appointee Committee Member Full Name Email Address Address (street or post office box) City State ZIP Code		
Signature of Appointee Committee Member Full Name Email Address Address (street or post office box) City State Signature of Appointee Committee Dissolution Designee Full Name Email Address Tennifer Elaine White Address (street or post office box) 20 Monte Vender LN City State ZIP Code Montevallo AL 35115	Address (street or post office box)	Address (street or post office box)
Committee Member Full Name Email Address Full Name Email Address Tennifer Elaine White Address (street or post office box) City State City State Committee Dissolution Designee Full Name Email Address Tennifer Elaine White Address (street or post office box) LO Monte Vender LN City State City State City State State City	City State ZIP Code	City State ZIP Code
Full Name Email Address Full Name Email Address Tennifer Elaine White Address (street or post office box) Address (street or post office box) City State ZIP Code Montevallo AL 35115	Signature of Appointee	Signature of Appointee
Full Name Email Address Full Name Email Address Tennifer Elaine White Address (street or post office box) Address (street or post office box) City State ZIP Code Montevallo AL 35115	Committee Member	Committee Dissolution Designee
Address (street or post office box) City State ZIP Code Address (street or post office box) City State ZIP Code Montevallo AL 35115		Full Name Email Address
City State ZIP Code Montevallo AL 35115	Address (street or post office box)	Address (street or post office box)
	City State ZIP Code	City State ZIP Code
	Signature of Appointee	

Where to file this form ... State candidates file with the Office of the Secretary of State.*

County candidates must file electronically at fcpa.alabamavotes.gov

Municipal candidates file with the county judge of probate.

* This form does not establish electronic filing. To file electronically, visit fcpa.alabamavotes.gov and click "Committee Registration."

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