

City

Calera

Full Name

Appointment of Principal Campaign Committee

State

Alabama

Email Address

THIS AREA FOR OFFICIAL USE ONLY



Shelby Cnty Judge of Probate, AL 07/07/2020 12:36:02 PM FILED/CERT

I hereby appoint the individuals listed below to act

as my principal campaign committee.

Please print in ink or type.		This form is due within five (5) calendar days of
ull Name of Candidate		reaching the threshold amount, or within five (5)
David Braxton Hobson	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) Lity Council Of (a)e(a)	Political Party / Ballot Affiliation Republican	independent candidate.
ddress of the Committee (street or post office box)		Type of Committee (check one)
116 Savannah Lane		I appoint myself as the sole member of my principal campaign committee.

Telephone Number

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 clearly print their names and addresses in the spaces below. Each appointee <u>must</u> sign his or her name.

ZIP Code

35040

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.

`			
Address (street or post office box)		•	
City	State	ZIP Code	
Signature of Appointee			
Commit	tee Memb	per	
Full Name	Email Address		
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee			
Commit	tee Memb	per	
Full Name	Email Address		
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee			

Chairperson

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."

Treasurer				
Fuli Name	Email Address			
Address (street or post office box)				
		\		
City	State	ZIP Code	•	
Signature of Appointee				
			•	
			-	

Committee Member			
Full Name	Ema	Email Address	
Address (street or post of	office box) ,		
City	State	ZIP Code	
Signature of Appointee	•		

Committee Dis	ssolution D	esignee		
Full Name	Email	Email Address		
Lauren Carter Hobson	laurenc3	laurenc391@yahoo.com		
Address (street or post office box) 1116 Savannah Lane				
City	State	ZIP Çode		
Calera	Alabama	35040		
Signature of Appointee Laurent Carle	r Hob	SON /		

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

] [7/6/2020]

FORM REVISED 6.19.2017