

Appointment of Principal Campaign Committee

THIS AREA FOR OFFICIAL USE ONLY



Shelby Cnty Judge of Probate, AL 07/23/2020 02:43:52 PM FILED/CERT

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.

Full Name of Candidate				
DANNY EUGER	VE BA	RR	<u>/</u>	
Office Sought (include district or circuit n	•			al Party / Ballot Affiliation
City Council				
Address of the Committee (street or post	t office box)			
2041-Awy. 3	3			
City	State		ZIP Code	Telephone Number
PFLHam	AL.	3	5124	

Email Address

Please print in ink or type.

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.

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 must sign his or her name.

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.

DANNY BACRY	INV	ISADAN BAOL.COM
Address (street or post office box)	•	-
2041- Have 33		
City	State	ZIP Code
Ext tol	41	3574Y
Signature of Appointee	24	
Commit	tee Memb	per
Full Name	Em	ail Address
Address (street or post office box)		
City	State	ZIP Code
Signature of Appointee		
Commit	tee Memb	per
Full Name	Ema	ail Address
Address (street or post office box)		
City	State	ZIP Code
Signature of Appointee	_	
_		

Chairperson

Full Name

Treasurer 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 ZIP Code State Signature of Appointee

Full Name	Ema	Email Address			
Address (street or post office box)					
City	State	ZIP Code			

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.