



**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

THIS AREA FOR OFFICIAL USE ONLY



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Shelby Cnty Judge of Probate, AL
08/10/2020 03:05:10 PM FILED/CERT

Waiver of Report FOR CANDIDATES (OPTIONAL FORM)

Please Print in Ink or Type.

Name of Candidate <u>Kendal Hope Finley</u>		Political Party/Ballot Affiliation	
Office Sought (include district or circuit number, if applicable) <u>City Council District 2</u>			
Address ☐ Check box if reporting new address <u>415 Springs Crossing Drive</u>			
City <u>Columbiana</u>	State <u>AL</u>	ZIP Code <u>35051</u>	Telephone Number <u>[REDACTED]</u>

Type of Report (check one)

☐ **Monthly Report**
Month in which the
report is filed.

☒ **Weekly Report**
Date that weekly report
is due.

☐ **Annual Report**
Calendar year covered
by this report.

(Note: This form is not for use by elected officials in
lieu of an annual report.)

This form is not for use by principal campaign committees of elected, public officials.

In any reporting period, no campaign finance report is required if the appropriate filing threshold has not been reached by the candidate. The filing threshold is \$1,000, regardless of the office sought:

- ▶ \$1,000 - candidates for state offices
- ▶ \$1,000 - candidates for State Senate
- ▶ \$1,000 - candidates for State House of Representatives
- ▶ \$1,000 - candidates for district or circuit offices
- ▶ \$1,000 - candidates for local offices

I have not reached the filing threshold amount as set forth in the Fair Campaign Practices Act for the office for which I am seeking nomination or election.

This **OPTIONAL** form gives notice that no contribution or expenditure report will be submitted.

Kendal Hope Finley
Signature of Candidate

8/10/2020
Date