



FAIR CAMPAIGN PRACTICES ACT  
STATE OF ALABAMA

County Division Code: ALU4U  
Inst. # 2020062761 Pages: 1 of 1  
I certify this instrument filed on  
6/17/2020 1:44 PM Doc: ELPCC  
Judge of Probate  
Jefferson County, AL.

Clerk: SMITHMO

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LED IN OFFICE  
PROBATE COURT

JUN 17 2020

ALAN L. KING  
Judge of Probate

E.O.D.

# Appointment of Principal Campaign Committee

Please print in ink or type.

Full Name of Candidate ROBIN F. SCHULTZ			
Office Sought (include district or circuit number, if applicable) HOOVER CITY COUNCIL		Political Party / Ballot Affiliation	
Address of the Committee (street or post office box) PO BOX 26762			
City BIRMINGHAM	State AL	ZIP Code 35260	Telephone Number

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.
- ☐ 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.

Chairperson			
Full Name ROBIN F. SCHULTZ		Email Address ROBIN@HOOVER.COM	
Address (street or post office box) PO BOX 26762			
City BIRMINGHAM	State AL	ZIP Code 35260	
Signature of Appointee 			

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	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 ZIP Code
Signature of Appointee	

Committee Dissolution Designee	
Full Name MARY E. SCHULTZ	Email Address MARY@HOOVER.COM
Address (street or post office box) PO BOX 26762	
City BIRMINGHAM	State AL ZIP Code 35260
Signature of Appointee Mary E. Schultz	

## 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](http://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](http://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

6/16/2020  
Date