

Waiver of Report

FOR CANDIDATES

(OPTIONAL FORM)

THIS AREA FOR OFFICIAL USE ONLY

Shelby Cnty Judge of Probate, AL 08/24/2020 01:50:33 PM FILED/CERT

Please Print in ink or Type.

Name of Candidate			Political Party/Ballot Affiliation	Typ	Type of Report (check one)		
Kim Rasco Kina					Monthly Report		
Office Sought (include district or circuit number, if applicable)					Month in which the report is filed. Weekly Report		
City Council District 4							
Address Check box if reporting new address			· 		Weekly Report Date that weekly report	7 (
$i \circ \circ$			· ·		is due.	8.24.20	
103 Pinetree Cire	بو				Į		
City	State	ZIP Code	Telephone Number		Annual Report		
Columbiana	Δι	3505 j			Calendar year covered by this report.		
					(Note: This form is not for us lieu of an annual report.)	se by elected officials in	

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.

Kom R. Deig	11 8.24.20
Signature of Candidate	Date