

Appointment of

Office Shught (include district or circuit number, if applicable)

Address of the Committee (street or post office box)

Full Name of Candidate

RECEIVED IN OFFICE

JAMES P. NAFIEL, II

Principal Campaign Committee

Please print in ink or type.

State

THIS AREA FOR OFFICIAL USE ONLY

County Division Code: AL040 Inst. # 2021018447 Pages: 1 of 1 i certify this instrument filed on 2/17/2021 3:12 PM Doc: ELPCC Judge of Probate Jefferson County, AL.

Clerk: CRAWFORD

	This form is due within five (5) calendar days of
	reaching the threshold amount, or within five (5)
an	calendar days of qualifying with a political party, or
Political Party / Ballot Affiliation	within five (5) calendar days of filing a petition as an independent candidate.

Type of Committee (check one)

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.

Telephone Number

ZIP Code

ign committee must choose a designee to dissolve the committee due to the

possibility of death or incapacitati	sole memion of the ca	per of their principal campa andidate.
Chai	rperson	
Full Name	<u> </u>	nail Address
11.011.		
FCASTON MIN	Than I	
Address (street or post office box)	- , -	
224 10th Ave S	W	
City	State	ZIP Code
Birminaham	AL	35203
Signature of Appointee	$\Lambda \Lambda$	
Libral II. In	TILLADI	Man
Commit	ee Mem	per
Fuli Name	Em	ail Address
		-
Address (street or post office box)		,
City	State	ZIP Code
Signature of Appointee		
Committ	ee Memb	per
Full Name		ail Address
-		}
Address (street or post office box)		
City	Štate	ZIP Code
		· · · · · · · · · · · · · · · · · · ·
Signature of Appointee		

Where to file this form ...

- State candidates file with the Office of the Secretary of State.*
- County candidates must file electronically at fcpa.álabamavotes.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."

	reasurer		
Full Name	En	nail Address	
Mary E. Smith	PJC100 CHO		
Address (street or post office box)	UT TITLE		
224 16th AV		SW	
Birmingham	State A.	ZIP Code 352//	
Signature of Appointee	i den	man)	
Comm	ittee Mem	ber	
Full Name	Fm	ail Address	
MAOMILY SMITHERMAN			
Address (street or post office box)			
22H 16th Ave SW			
City	State	ZIP Code	
BIRMINGHAM	AL	35211	
Signature of Appointee Amount to	nen		
Committee Di	ssolution	Designee	
Fuli Name		ail Address	
Address (street or post office box)			
City		0143160 1/1 \$.00	
Signature of Appointee	Shelby Cnt	y Judge of Probate, AL 01:00:00 PM FILED/CER	

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 Date

FORM REVISED 6.19.2017