THIS AREA FOF

RECEIVED IN OFFICE PROBATE COURT

MAR - 2 2029

County Division Code: AL040
Inst. # 2021023845 Pages: 1 of 1
I certify this instrument filed on
3/2/2021 4:06 PM Doc: ELPCC
Judge of Probate
Jefferson County, AL.

Clerk: SSTEPHENS

Appointment of

Principal Campaign Committee Judge of Probate."

Please print in ink or type.

	This form is due within the (2)
Full Name of Candidate John R. Hilliard	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
Office Sought (include district or circuit number, if applicable) Political Party / Ballot Affiliation BIMINGNAM CITY COUNCI DISTRICT 9	within five (5) calendar days of filing a petition as an independent candidate.
Address of the Committee (street or post office box)	Type of Committee (check one)
1625 Castleberry Way	l appoint myself as the sole member of my principal campaign committee.
Birmingham. AL 35214 Telephone Number	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 should be designated as the chairperson of the committee. A second member should be designated as the chairperson of the committee. A second member should be designed and addresses in the spaces below. Each appointee <u>must</u> sign his or her name.	c Vou may appoint up to five many
Candidatas who alcass to the the sale months of the first sections.	

Candidates who choose to be the sole member of their principal campaign committee <u>must</u> choose a designee to dissolve the committee due to the possibility of death or incapacitation of the candidate.

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Full Name	En	nail Address	
Alexandria Hilliard			
Address (street or post office box)	- · · · · · · · · · · · · · · · · · · ·	_	
1936 Castleberr	y Way	\	
City	State '	ZIP Code	
Birmingham	AL	35214	·
Signature of Appointed	GAI-00-		
LUZMINATILL	78 UCA	arcx	
Commit	tee Mem	ber	
Full Name	Ēm	all Address	
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Address (street or post office box)	<u> </u>		
City	State	ZIP Code	
	Olalo	211 OOGG	
Signature of Appointee	<u> </u>		<u>-</u>
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Full Name	Em	all Address	
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Address (street or post office box)			
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City	State	ZIP Code	
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Signature of Appointce	 		
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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."

Full Name		reasurer	ail Address		
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	or post office box)				
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	مأد	State	ZIP Code	!	
Birmin	Train	AL	97208		
Signature of Ap		70016	6 19		
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Committee Member					
Full Name		Em	ail Address		
Address (street	or post office box)				
City					
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Signature of App		22/2021 01:0	00:06 PM FILED	CERT	
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Full Mome	ommittee Di				
Full Name		Ema	il Address		
					
Address (street o	or post office box)				
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City	,	State	ZIP Code		
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Signature of App	ointee				
	/				

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

FORM REVISED 6.19.2017