

Full Name of Candidate

City

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Appointment of Principal Campaign Committe

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

Address of the Committee (street or post office box)

FILED IN OFFICE PROBATE COURT

JUN 03 REC'D

Political Party / Ballot Affiliation

Telephone Number

Please print in ink or type.

Inst. # 2021064217 Pages: 1 of 1 certify this instrument filed on 6/3/2021 10:23 AM Doc: ELPCC

County Division Code: AL040

THIS AREA FOR OFFICIAL USE ONLY

Judge of Probate Jefferson County, AL.

Clerk: HENLEYT

This form is due within five (5) calendar days of

reaching the threshold amount,	or within five (5)
calendar days of qualifying with	
within five (5) calendar days of independent candidate.	filing a petition as an
Type of Committee	e (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.

ZIP Code

Candidataa wha abaasa ta ba tha aala maaahar af thair mirainal ign committee must choose a designee to dissolve the committee due to the

	Chairperson	
Full Name		ail Address
Address (street or post of	ffice box)	
City	State	ZIP Code
Signature of Appointee		
	Committee Mem	per
Full Name	Em	ail Address
Address (street or post of	fice box)	
City	State	ZIP Code
Signature of Appointee		
	committee Memi	oe.r
Full Name	Em	ail Address
Address (street or post of	fice box)	
City		
Signature of Appo Shell	0611000287070 1/1 by Cnty Judge of P 1/2021 01:14:00 PM	robate, AL

## 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."

Treasurer			
Full Name		ail Address	
Address (street or post of	ffice box)	•	
City	State	ZIP Code	
Signature of Appointee			

Committee Member			
Full Name	: Ema	ail Address	·
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee			

Committee Dissolution Designee		
Full Name	Email Address	
Adele Culo	adeleculo@gmail.com	
Address (street or post office box		
2972 Oucrton	Koad	
City	State ZIP Code	
Birminghan	1 11 35223	
Signature of Appointee		

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 berein is true and correct.

Signature of elected official or candidate Date