

City

Full Name

Full Name of Candidate

CVY.

Appointment of

Office Sought (include distrigit or circuit number, if application)

Address of the Committee (street or post office box)

FAIR CAMPAIGN PRACTICES ACT RECEIVED IN OFFICE PROBATE COURT STATE OF ALABAMA

JUL 06 2021

## Principal Campaign

State

Email Address

JAMES P. NAFTEL, II Judge of Probate

Please print in ink or type.

ZIP Code

County Division Code: AL040 Inst. # 2021077838 Pages: 1 of 1 I certify this instrument filed on 7/6/2021 2:53 PM Doc: ELPCC Judge of Probate Jefferson County, AL.

THIS AREA FOR OFFICIAL USE ONLY

Clerk: CRAWFORD

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)

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.

Political Party / Ballot Affiliation

グレーシン

Telephone Number

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.

Address (street or post office box)				
1333 7+0	LL ST			
City	State ZIP Code	)		
Signature of Appointee	\			
Committee Member				
Full Name	Email Address			
·		<u> </u>		
Address (street or post office box)				
City	State ZIP Code			
Signature of Appointee		<u>!</u>		
,	ì			
Comm	nittee Member			
Fuli Name	Email Address			
Address (street or post office box)				
City	State ZIP Code			
Signature of Appointee				
Where to file this form	•••			

State candidates file with the Office of the Secretary of State.\*

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

County candidates must file electronically at

fcpa.alabamavotes.gov

"Committee Registration."

Chairperson

	Heasurer	
Full Name	Email Address	
Address (street or post/		
City	20210709000334830 1/1 \$.00	
•	Shelby Cnty Judge of Probate, AL	
	07/09/2021 02:53:15 PM FILED/CERT	
Signature of Appointee		
•		
	Committee Member	
Full Name	Email Address	
Lani Lagrine		
Address (street or post of	office box)	
City	State ZIP Code	
1		
	<u> </u>	
Signature of Appointee		
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Comm	ittee Dissolution Designee	
	Email Address \	
Full Name ,		

As required by th	e Alabama Fair Ca	ampaign Practices Act, I
hereby swear or	affirm to the best of	of my knowledge and belief in is true and correct.
that the informati	on contained here	in is true and correct.
314		3/ <del>-</del> 4

Signature of elected official or candidate

Address (street or post office box),

Signature of Appointee

Date

Ne

**FORM REVISED 6.19.2017** 

ZIP Code