

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

Please print in ink or type.

State

Email Address

Appointment of

Address of the Committee (street or post office box)

Full Name of Candidate

Full Name

FILED IN OFFICE PROBATE COURT

BISTAINGher

12:01:55 PM FILED/CERT

Political Party / Ballot Affiliation

Telephone Number

Principal Campaign Committee

Inst. # 2021078071 Pages: 1 of 1 I certify this instrument filed on 7/7/2021 9:42 AM Doc: ELPCC Judge of Probate Jefferson County, AL.

County Division Code: AL040

THIS AREA FOR OFFICIAL USE ONLY

Clerk: NICOLE

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.

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

Candidates who choose to be the sole member of their principal campaign committee the committee due to the possibility of death or incapacitation of the candidate.

Address (street or post office wax) ZIP Code State City 350 Signature of Appointee! Committee Member Email Address Full Name Address (street or post office box) ZIP Code State City Signature of Appointee Committee Member: Email Address Full Name Address (street or post office box) ZIP Code State City 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."

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	L'a Committee Member	
Full	Vame Email Address	
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City	State ZIP Code	
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Cina	ture of Appointed	
Signa	ature of Appointee	•
4	Committée Dissolution Designee	
Full	Name Email Address	
Addr	ess (street or post office box)	
City	State ZIP Code	

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

Signature of Appointee

FORM REVISED 6.19.2017