

City

Full Name of Candidate

FAIR CAMPAIGN PRACTICES ACT

STATE OF ALABAMA

Appointment of

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

Address of the Committee (street or post office box)

FILED IN OFFICE PROBATE COURT

JUL 07 REC'D

JAMES P. NAFTEL, II Judge of Probate E.O.D. L.T. L.

Political Party / Ballot Affiliation

Telephone Number

Principal Campaign-

Please print in ink or type.

7/7/2021 8:37 AM Doc: ELPCC Judge of Probate Jefferson County, AL. 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.

THIS AREA FOR OFFICIAL USE ONLY

County Division Code: AL040

Inst. # 2021078007 Pages: 1 of 1

I certify this instrument filed on

## Type of Committee (check one)

<u> </u>	I appoint myself as the sole member of my principal campaign committee.
	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

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. Treasurer

Cha	irperson
Full Name	Email Address
Barbara Mca	204 braccoy 730@gmail.
Address (street or post office box)	
6029 Overle	
City	State ZIP Code
<u>Bessemer</u>	AL 50022
Signature of Appointee	MCCON
	ittee Member
Full Name /	Email Address
Address (street or post office box)	
City	State ZIP Code
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Signature of Appointee	_ I
Comm	nittee Member
Full Name	Email Address
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Signature of Appointee	į
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Where	to file	this	torm	••

- 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

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ity all	State ZIP Code
ignature of Appoi	ntee) Palusain
	Committee Wember
Full Name	Email Address
Address (street or	post c
City	Shelby Cnty Judge of Probate, AL 10/04/2021 11:02:18 AM FILED/CERT
Signature of Appo	ointee
<b>5.5</b>	
C	ommittee Dissolution Designee
Full Name	Email Address
f Mill Francis	
Address (street c	r post office box)
City	State ZIP Code
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.

nature of elected official or candidate