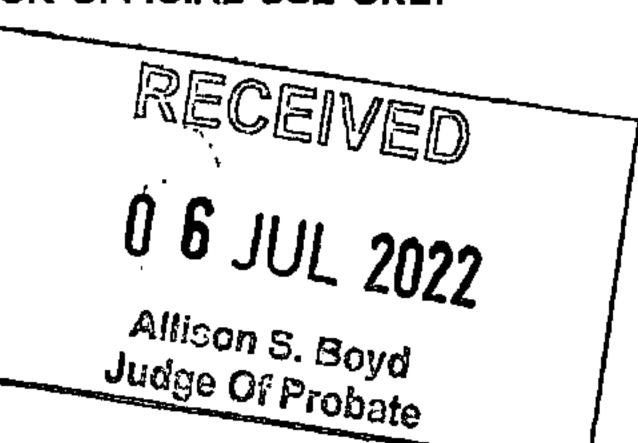


## Appointment of Principal Campaign Committee



202207060000268160 1/1 \$.00 Shelby Cnty Judge of Probate, AL 07/06/2022 01:57:02 PM FILED/CERT



Please print in ink or type.

| Full Name of Candidate   | <del> </del>  | <u> </u>          | <del></del>                      | This form is due within <b>five</b> (5) calendar days of reaching the threshold amount, or within <b>five</b> (5) |  |  |
|--|---|-------------------|----------------------------------|---|--|--|
|  |   | •                 |                                  | calendar days of qualifying with a political party, or  |  |  |
| <b>P</b>   | t or circuit number, if applicat                      |                   | ical Party / Ballot Affiliation  | within <b>five</b> (5) calendar days of filing a petition as an independent candidate.                            |  |  |
| SEAT 2 WEST  |   | •                 | -                                |   |  |  |
| Address of the Committee (s  |   |                   |                                  | Type of Committee (check one)   |  |  |
| 21 MONTE VE  | ERDELANE  |                   |                                  | l appoint myself as the sole member of my principal campaign committee.   |  |  |
| City   | State   | ZIP Code          | Telephone Number                 | I hereby appoint the individuals listed below to act  |  |  |
| MONTEVALLO   | AL_   | 35115             | 205.612.7013                     |   |  |  |
| If you are appointing other should be designated as the and addresses in the space | he chairperson of the com                             | mittee. A secor   | nd member should be desig        | s. You may appoint up to five members. One member names inated as the treasurer. Please clearly print their names |  |  |
| Candidates who choose to possibility of death or inca                              | be the sole member of the pacitation of the candidate | neir principal ca | impaign committee <u>must</u> ch | oose a designee to dissolve the committee due to the  |  |  |
|  | Chairperson   |                   |                                  | Treasurer   |  |  |
| Full Name  | Email Addre   | ess               | Full Name                        | Email Address   |  |  |
| Address (street or post office   | e box)  | <u> </u>          | Address (stre                    | eet or post office box)   |  |  |
|  |   |                   |                                  |   |  |  |
| City   | State ZII   | Code              | City                             | State ZIP Code  |  |  |
| Signature of Appointee   |   |                   | Signature of A                   | Appointee   |  |  |
| Committee Member   |   |                   |                                  | Committee Member  |  |  |
| Full Name  | Email Address   |                   | Full Name                        | Email Address   |  |  |
| Address (street or post office   | e box)  |                   | Address (stre                    | eet or post office box)   |  |  |
| City   | State ZIF   | <sup>2</sup> Code | City                             | State ZIP Code  |  |  |
| Signature of Appointee   |   |                   | Signature of A                   | Signature of Appointee  |  |  |
|  |   |                   |                                  |   |  |  |
|  | mmittee Member  |                   |                                  | Committee Dissolution Designee  |  |  |
| Full Name  | Email Addre   | <b>25</b> \$      | Full Name                        | Email Address   |  |  |
| Address (street or post office box)  |   |                   | 1 1                              | JENNIFER FLAINE WHITE Address (street or post office box)   |  |  |
|  |   | <u></u>           | Lea Ma                           | NTE VERDE LANE  |  |  |
| City   | State ZIF   | Code              | City                             | State ZiP Code  |  |  |
|  |   |                   | ) I                              | EVALIO AL 35115   |  |  |
| Signature of Appointee   |   |                   | Signature of A                   | Signature of Appointee  |  |  |
| Where to file this fo  | rm<br>th the Office of the Se                         |                   | As required                      | by the Alabama Fair Campaign Practices Act, I   |  |  |

 County candidates must file electronically at fcpa.alabamavotes.gov Municipal candidates file with the county judge of probate.

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

\* This form does not establish electronic filing. To file electronically, visit fcpa.alabamavotes.gov and click "Committee Registration."

| Watother Jance della damatotta            | orla |
|---|------|
| Signature of a cted Official or candidate | Date |

that the information contained herein is true and correct.

hereby swear or affirm to the best of my knowledge and belief

FORM REVISED 6.19.2017