

Appointment of Principal Campaign Committee

20220711000272610 1/1 \$.00 Shelby Cnty Judge of Probate, AL 07/11/2022 10:35:15 AM FILED/CERT

P	lease print in ink	or type.	
Full Name of Candidate Morgan Franklin Bar	nes		
Office Sought (include district or circ North Shelby Library Bo		•	al Party / Ballot Affiliation Republican
Address of the Committee (street or 3713 Woodbine Way	post office box)		
City Birmingham	State AL	ZIP Code 35242	Telephone Number
If you are appointing others to se should be designated as the chain and addresses in the spaces below	irperson of the comm	ittee. A secon	d member should be design
Candidates who choose to be the cossibility of death or incapacitat		ir principal ca	mpaign committee <u>must</u> cho
Cha	irperson		

his form is due within **five** (5) calendar days of eaching the threshold amount, or within five (5) alendar days of qualifying with a political party, or

within fiv	• •		_	of filing	a petitio	n as
	Type	of Co	mmi	Itee (ch	eck one)

	I appoint myself as the sole member of my principal campaign committee.
ı Y	principal campaign committee.

I hereby appoint the individuals listed below to act as my principal campaign committee.

ou may appoint up to five members. One member d as the treasurer. Please clearly print their names

a designee to dissolve the committee due to the

Full Name	Ema	Email Address		
Address (street or post office b	юх)			
City	State	ZIP Code		
Signature of Appointee				
Con	ımittee Memb	er		
Full Name	Ema	il Address		
Address (street or post office b) (xox)			
City	State	ZIP Code		
Signature of Appointee		<u> </u>		
Con	nmittee Memb	er		
Full Name	Ema	ail Address		
Address (street or post office t	oox)			
City	State	ZIP Code		
Signature of Appointee		,		

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 "Committee Registration."

County candidates must file electronically at fcpa.alabamavotes.gov

Where to file this form ...

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

Committee Member			
Full Name	Email Address		
Address (street or post of	ffice box)		
City	State	ZIP Code	

Full Name		ail Address	
Lauralee E. Barnes	fizzgigg@bellsouth.ne		
Address (street or post office box) 3713 Woodbine Way			
City	State	ZIP Code	
Birmingham	AL	35242	
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 herein is true and correct.

Signature of elected official or candidate

Date

FORM REVISED 6.19.2017