

Statement of Dissolution FOR ELECTED OFFICIALS, CANDIDATES AND POLITICAL ACTION COMMITTEES

FILED

SEP 13 2018

BOBBY M. JUNKINS JUDGE OF PROBATE

Please Print in Ink or Type.	Report Status (check one)
Name of Candidate or Elected Official, or Political Committee	No report required because I have had no
Ben Reed	activity since the last reporting period
Office Sought or Held (include district or circuit number, if applicable)	Termination report attached
City Courcil Dist. 7	Note:
Address Check box if reporting new address	If you have had activity since the last report
917 Bellevue Dr.	filed, you are responsible for filing the requisite Annual Report covering the last
City State ZiP Code Telephone Number	year of activity. However, the submission of a
City State ZIP Code Telephone Number GADS den , AL 35984 1-22-325-2958	Termination Report along with the Statement of Dissolution will satisfy this requirement.
07.00000 7.01	di Dissolution will satisfy this requirement
	sittee or Political Action Committee as of
This statement dissolves the above-named Principal Campaign Comm	
the 13 day of September in	the year 20/8
the day of sq;remove	<u></u>
Pursuant to §17-5-7(a) [Code of Alabama, 1975], any excess funds sh	all be disposed of in the following
manner:	
Nove)	<u> </u>
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As required by the Alabama Fair Campaign Practices Act, I hereby sw	vear, or affirm, to the best of my
knowledge and belief that this Statement of Dissolution is true and co	rrect.
	11 6 10 11
1	9-13-18

Signature of Candidate or Elected Official, or Chairperson or Treasurer of Political Committee

Date