

Waiver of Report

OR CANDIDATES

OPTIONAL FORM)

FILED
MAY 2 9 2014
BOBBY M. JUNKINS
JUDGE OF PROBATI

Please Print in Ink or Type.		
ame of Cardidate. Aroly n Gree Sought (include district or circuit number, if applicable) Etowah County Commission Idress Check box if reporting newladdress Arouhud D	Monthly Report Monthly Report Month in which the report is filed. Weekly Report Date of Friday in the week in which the report is filed.	May 2014
State ZIP Code Telephone Number A 1 1 (28) 705-8-200	Annual Report Calendar year covered	

is form is not for use by principal campaign committees for elected, public officials.

any reporting period, no campaign finance report is required if the appropriate filing threshold has not been ched by the candidate. The filing thresholds are as follows:

- ▶ \$25,000 candidates for state offices
- ▶ \$10,000 candidates for State Senate
- ▶ \$5,000 candidates for State House of Representatives
- ▶ \$5,000 candidates for district or circuit offices
- ▶ \$1,000 candidates for local offices

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ve not reached the filing threshold amount as set forth in the Fair Campaign Practices Act for the office for the lam seeking nomination or election.

OPTIONAL form gives notice that no contribution or expenditure report will be submitted.

Date Date

Signature of Candidate

FORM REVISED 1.10.2012