

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

Please Print in Ink or Type.  Name of Candidate or Elected Official, or Political Committee  Colt Anderson Turner  Office Sought or Held (include district or circuit number, if applicable)  City Council				Report Status (check one)  No report required because I have had no				
						activity since the last reporting period  Termination report attached		
				Note:				
				Address Check box if reporting new address				If you have had activity since the last report
				209 Main Street West				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				
Glencoe	Al	35905	2567060508	Termination Report along with the Statement of Dissolution will satisfy this requirement.				
the 1 day of Dec				_ in the year <u>2020</u>				
Pursuant to §17-5-7 manner:	'(a) [Code of Alaba	ma, 1975], 	any excess funds	s shall be disposed of in the following				
F	ILED							
JAI	N 3 1 2021							
sc sc	OTT W. HASSELL DGE OF PROBATE							
As required by the <i>l</i> knowledge and beli	-	_	•	swear, or affirm, to the best of my correct.				
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Signature of Candidate or Elected Official, or Chairperson or

FORM REVISED 9,2,2011

Treasurer of Political Committee