



## Waiver of Report

## FOR CANDIDATES

(OPTIONAL FORM)

## FIED IN OFFICE

OCT U3 2016

TIM MITCHELL JUDGE OF PROBATE

Please Print in Ink or Type.			
Name of Candidate	Political Party/Ballot Affiliation	Type of Report (check one)	
David Dyar		Monthly Report  Month in which the	٠
Office Sought (include district or circuit number, if applicable)		report is filed.	_
Mayor of SOAL		Weekly Report  Date that weekly report	
Address		Date that weekly report is due.	
119 misTy Lane			
City O State ZIP Code	Telephone Number	Annual Report	
BOGZ A 35956	2565066973	Calendar year covered by this report.	

(Note: This form is not for use by elected officials in lieu of an annual report.)

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

In any reporting period, no campaign finance report is required if the appropriate filing threshold has not been reached by the candidate. The filing threshold is \$1,000, regardless of the office sought:

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

I have not reached the filing threshold amount as set forth in the Fair Campaign Practices Act for the office for which I am seeking nomination or election.

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

Signature of Candidate

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