

## Waiver of Report FOR CANDIDATES

(OPTIONAL FORM)

FILED
MAY 2 7 2014
BOBBY M. JUNKINS

Please Print in Ink or Type.

News of Condidate	Political Party/Ballot Affiliation Type of Report (check one)		
Name of Candidate  Oran Dix   Ix   Ix   Ix   Ix   Ix   Ix   Ix		Monthly Report  Month in which the report is filed.	
Office Sought (include district or circuit number, if applicable)  Attalla City Bu of Education  Address Check box if reporting new address	District 2	Weekly Report Date of Friday in the	( a = 11 (
1208 Old Boar W	Nhor	week in which the report is filed.  Annual Report	52514
City State ZIP Code  At 1/1/10 AL 35/951/	756-504-033)	1 1 1	

This form is not for use by principal campaign committees for 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 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

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

Date