

## Appointment of

Address of the Committee (street or post office box)

Full Name of Candidate

City

## Principal Campaign Committee

Please print in ink or type.

| SCOTT W. | HASSELL |
|----------|---------|
| JUDGE OF |         |

JUN 2 1 2022

This form is due within **five** (5) calendar days of reaching the threshold amount, or within **five** (5) calendar days of qualifying with a political party, or within **five** (5) calendar days of filing a petition as an independent candidate.

## Type of Committee (check one)

- l appoint myself as the sole member of my principal campaign committee.
  - I hereby appoint the individuals listed below to act as my principal campaign committee.

If you are appointing others to serve as your committee, you must select at least two members. You may appoint up to five members. One member should be designated as the chairperson of the committee. A second member should be designated as the treasurer. Please clearly print their names and addresses in the spaces below. Each appointee <u>must</u> sign his or her name.

ZIP Code

Political Party / Ballot Affiliation

Telephone Number

Candidates who choose to be the sole member of their principal campaign committee <u>must</u> choose a designee to dissolve the committee due to the possibility of death or incapacitation of the candidate.

| Chairperson                                   | Treasurer                           |
|---|-------------------------------------|
| Full Name Email Address                       | Full Name , Email Address           |
| Kenita Davis rhdsings4 christa                | MAILE LINDSey                       |
| Address (street or post office box)  Msn. Com | Address (street or post office box) |
| 402 North 9th St.                             | 15/4 Fas View AV                    |
| State ZIP Code  Gadsden AL 35903              | City ast Gausden State 3993         |
| Signature of Appointee<br>Kenita Llavis       | Signature of Appointee the Emakely  |
| Committee Member                              | Committee Member                    |
| Eull Name Email Address                       | Full Name Email Address             |
| ath Goggins cateat 1989 partick. a.           |                                     |
| Address (street or post office box)           | Address (street or post office box) |
| 625 Txlen St.                                 |                                     |
| State ZIP Code                                | City State ZIP Code                 |
| Jududen FIL 35901                             |                                     |
| Signature of Appointee and any one            | Signature of Appointee              |
| Committee Member                              | Committee Dissolution Designee      |
| Full Name  Marilyw Hendricks @gmail. Com      | Full Name Email Address             |
| Address (street or post office box)           | Address (street or post office box) |
| 80/ Avenue +                                  |                                     |
| Gadsden AL 35901                              | City State ZIP Code                 |
| Signature of Appointee Marily Hengrich        | Signature of Appointee              |
|   |                                     |

Where to file this form ...

• State candidates file with the Office of the Secretary of State.\*

- County candidates must file electronically at fcpa.alabamavotes.gov
- · Municipal candidates file with the county judge of probate.
- \* This form does not establish electronic filing. To file electronically, visit fcpa.alabamavotes.gov and click "Committee Registration."

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the information contained herein is true and correct.

Signature of elected official or candidate

FORM REVISED 6.19.2017