

Waiver of Report FOR CANDIDATES

(OPTIONAL FORM)

FILEDJUL 2 6 2016

BOBBY M. JUNKINS JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate	Political Party/Ballot Affiliation	Type of Report (check one)	
Gabriel Fretzit Office Sought (include district or circuit number, if applicable)		Monthly Report Month in which the	
Council Member		report is filed. Weekly Report	
Address Check box if reporting new address Rd		Date of Friday in the week in which the report is filed.	
City State ZIP Code Attalla, Aha 35954	Telephone Number 256-538-636	Annual Report Calendar year covered	
1766911a, MAR 3575	DO 0 0 1 8-9 3 6 7	by this report.	

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

7-26-16

Date