

## Waiver of Report

## FOR CANDIDATES

(OPTIONAL FORM)

FILED

JUN 29 2012

BOBBY M. JUNKINS JUDGE OF PROBATE

## Please Print in Ink or Type.

Name of Candidate	Political Party/Ballot Affiliation Type of Report (check one)				
Office Sought (include district or circuit number, if applicable)	REP	P	Monthly Report  Month in which the report is filed.	JUN 39 201	د
Address Check box if reporting new address	NOT 1117 3		Weekly Report Date of Friday in the week in which the		
TICO DULLE SP65 N City State SIP Code ATTAUA A 35950	Telephone Number >56 393 26/8		report is filed.  Annual Report  Calendar year covered 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.

Date