

Appointment of

JUL 2 4 2020

Principal Campaign Committee

Please print in ink or type.

SCOTT W. HASSELL
JUDGE OF PROBATE

Patrick Chumler	reaching the threshold amount, or within five (5) calendar days of qualifying with a political party, or
Office Sought (Include district or circuit number, if applicable) Political Party / Ballot Affiliation SouthSide C: Ly Council Place # 4	within five (5) calendar days of filing a petition as an independent candidate.
Address of the Committee (street or post office box)	Type of Committee (check one)
3453 Lister Ferry Rd	I appoint myself as the sole member of my principal campaign committee.
Southside State ZIP Code Telephone Number AL 35907 256-504-6533	Thompson and the facility of the second
you are appointing others to serve as your committee, you must select at least two members hould be designated as the chairperson of the committee. A second member should be designed addresses in the spaces below. Each appointee <u>must</u> sign his or her name.	Vou mon and interest 5

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			
Full Name	Ema	all Address	
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee			
Committee Member			

Committee Member			
Full Name	Ema	Email Address	
Address (street or post off	ice box)		
City	State	ZIP Code	
Signature of Appointee			

Committee Member			
Full Name	Ema	ail Address	-
Address (street or post office box)			
City	State	ZIP Code	
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 file electronically, "Committee Regi	not establish electronic filing. To visit fcpa.alabamavotes.gov and stration."	click

	Treasurer	
Full Name	Em	all Address
Address (street or post	office box)	
City	State	ZIP Code

Full Name	Em	ail Address	
Address (street or post o	ffice box)		
City	State	ZIP Code	
Signature of Appointee			

Committee Dissolution Designee		
Ema	ail Address	
Schumi	ey 08@gmail.	
	1000	
or Re		
State	ZIP Code	
AL	35907	
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	Schumi Ty Ro	

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.

Patrick	humle
Signature of elected	official or candidate