

Appointment of Principal Campaign Committee

FILED

JUL 08 2016

BOBBY M. JUNKINS JUDGE OF PROBATE

| Please print in ink or type. | | | This form is due within five (5) calendar days of | |
|--|--------------------------|--------------------------|--|--|
| Full Name of Candidate Pen Dobbins CGr Office Sought (include district or circuit number, if applicable) Political Party / Ballot Affiliation | | | 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. | |
| Email Address of the Candidate | | | Type of Committee (check one) | |
| Penny dobbins carr @ Gmail: Com Address of the Committee (street or post office box) 1103 6 + St Sw | | | I appoint myself as the sole member of my principal campaign committee. | |
| City | State ZIP Code A \ 35954 | Telephone Number | I hereby appoint the individuals listed below to act as my principal campaign committee. | |
| should be designated as the ch | | d member should be desig | s. You may appoint up to five members. One member nated as the treasurer. Please clearly print their names | |
| | hairperson | | Treasurer | |
| Full Name | Email Address | Full Name | Email Address | |
| Address (street or post office box) | | Address (street o | Address (street or post office box) | |
| City | State ZIP Code | City | State ZIP Code | |
| Signature of Appointee | | Signature of Appo | pintee | |
| Committee Member | | | Committee Member | |
| Full Name | Email Address | Full Name | Email Address | |
| Address (street or post office box) | | Address (street o | Address (street or post office box) | |
| City | State ZIP Code | City | State ZIP Code | |
| Signature of Appointee | | Signature of App | pintee | |
| Con | mittee Member | | Committee Dissolution Designee | |
| Full Name | ' Email Address | Full Name | Email Address | |
| Address (street or post office box |) | Address (street of | story St Sw | |
| City | State ZIP Code | City | State ZIP Code 35 95 4 | |
| Signature of Appointee | | Signature of App | | |
| A note regarding the d | issolution designee | | by the Alabama Fair Campaign Practices Act, I | |

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.

Where to file this form ...

State candidates file with the Office of the Secretary of State. County and municipal canidates file with their county's judge of probate.

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