

Waiver of Report FOR CANDIDATES

(OPTIONAL FORM)

FILED
AUG 0 5 2016
BOBBY M. JUNKINS
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Sandidate Political Party/Ballot Affiliation	Type of Report (check one)
POBERT 6. (7055) NA	Monthly Report Month in which the
Office Sought (include district or circuit number, if applicable)	report is filed.
HADALLA (147 (BUNC) DIST. #3	Weekly Report
Address	Date of Friday in the week in which the
524 LEE SK.	report is filed.
City State ZIP Code Telephone Number	Calendar year covered
AHAMA A/4. 35854 (256) 5382300	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 Date