

Appointment of Principal Campaign Committee Please print in ink or type.

JUN 1.7 2022

SCOTT W. HASSELL JUDGE OF PROBATE

This form is due within five (5) calendar days of

	This form is due within tive (b) calcindar days or	
Full Name of Candidate Ronald Wayne Barnard Jr.	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	
Office Sought (include district or circuit number, if applicable) Political Party / Ballot Affiliation	independent candidate.	
Mayor of Gadsden	Type of Committee (check one)	
Address of the Committee (street or post office box) 506 N 33** 57	I appoint myself as the sole member of my principal campaign committee.	
City Gadsden AL 35904 256-458-9453	I hereby appoint the individuals listed below to ac as my principal campaign committee.	
you are appointing others to serve as your committee, you must select at least two members.	You may appoint up to five members. One member	

should be designated as the chairperson of the committee. A second member should be designated as the treasurer. Please clearly print their names and addresses in the spaces below. Each appointee <u>must</u> sign his or her name.

Candidates who choose to be the sole member of their principal campaign committee must choose a designee to dissolve the committee due to the possibility of death or incapacitation of the candidate.

Address (street or post offi	ce box)		
City	State	ZIP Code	
Signature of Appointee			
	ommittee Memb		
Full Name	Em.	ail Address	
Address (street or post offi	ce box)		
City	State	ZIP Code	
Signature of Appointee			
C	ommittee Memi	per	
Full Name	Em	ail Address	
Address (street or post offi	ice box)		
City	State	ZIP Code	
Signature of Appointee			

Chairperson

Email Address

Full Name

Where to file this form ...

- State candidates file with the Office of the Secretary of State.*
- · County candidates must file electronically at fcpa.álabamavotes.gov
- · Municipal candidates file with the county judge of probate.
- * This form does not establish electronic filing. To file electronically, visit fcpa.alabamavotes.gov and click "Committee Registration."

Full Name	Email Address
Address (street or post of	ffice box)

Full Name	Email Address	
Address (street or post of	office box)	· · · · · · · · · · · · · · · · · · ·
City	State	ZIP Code

Committee Dissolution Designee			
Full Name Thatlotte Soumwithe	Email Address barrard Darnard 2118 i Cloud Car		
Address (street or post office box) 1705 State St			
Gadsden Al	State ZIP Code 35904		
Signature of Appointed	ta Bourerd		

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

FORM REVISED 6.19.2017