

## Statement of Dissolution

## FOR ELECTED OFFICIALS, CANDIDATES AND POLITICAL ACTION COMMITTEES

FILED

JUL 25 2016

BOBBY M. JUNKINS JUDGE OF PROBATE

Please Print in Ink or Type.	Report Status (check one)
Name of Candidate or Elected Official, or Political Committee	No report required because I have had no activity since the last reporting period
Office Sought of Held (include district or circuit number, if applicable)	Termination report attached -
Address Check box if reporting new address	Note:
Hwy 218	If you have had activity since the last report filed, you are responsible for filing the
City Cloore State ZIP Code Telephone Number 35951	requisite Annual Report covering the last year of activity. However, the submission of a Termination Report along with the Statement
	of Dissolution will satisfy this requirement.
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This statement dissolves the above-named Principal Campaign Comm	ittee or Political Action Committee as of
theday ofin	the year _ 2019
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Pursuant to §17-5-7(a) [Code of Alabama, 1975], any excess funds shamanner:	all be disposed of in the following
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As required by the Alabama Fair Campaign Practices Act, I hereby swear, or affirm, to the best of my knowledge and belief that this Statement of Dissolution is true and correct.	
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w Sue Jhon	main 11 7-7-16
Signature of Candidate or Elected Official Treasurer of Political Committee	or Chairperson or Date