

## FILED

# Appointment of

Office Sought (include district or circuit number, if applicable)

Address of the Committee (street or post office box)

Full Name of Candidate

William

# Principal Campaign Committee

Please print in ink or type.

# SCOTT W. HASSELL JUDGE OF PROBATE

1111 2 7 2020

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

### Type of Committee (check one)

I appoint myself as the sole member of my principal campaign committee.

Treasurer

State

I hereby appoint the individuals listed below to act as my principal campaign committee.

Email Address

ZIP Code

If 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.

ZIP Code

35,906

Political Party / Ballot Affiliation

Telephone Number

256-458-6143

Full Name

Address (street or post office box)

Signature of Appointee

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.

		Chair	person		Sec. Sec.
Full Name		Email Address			
William	Jan	د من	Jenkins	w)en Kinse	) Ctown
Address (stree	t or post off	ice box)			
106	Red	Barn	Ro	ZIP Code 35906	
City			State	ZIP Code	
Rainb	ow	Wity	AL	35906	
Tou	llia		ann		
		ommitte	e Memb	er	
Full Name			Ema	il Address	
Address (stree	t or post off	ice box)			
City			State	ZIP Code	
Signature of A	ppointee				
	C	ommitte	e Memb	er	
Full Name			Ema	il Address	
Address (stree	t or post off	ice box)			
City			State	ZIP Code	
Signature of A	ppointee				

Committee Member					
Full Name	Email Address				
Address (street or post of	fice box)				
City	State	ZIP Code			
Signature of Appointee					
Commit	tee Dissolution	Designee			
Full Name	Ema	Email Address			

# Full Name Email Address Melissa Watts Jenkins Address (street or post office box) 106 Real Barn Read City State ZIP Code Rancow City AL 35906 Signature of Appointee M. Jenkins

### 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 not establish electronic filing. To file electronically, visit fcpa.alabamavotes.gov and click "Committee Registration."

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.

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Signature of elected official	or candidate

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SCOTT W. HASSELL JUDGE OF PROBATE

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