

## **Appointment of Principal Campaign Committee**



HIL 1 1 2016

JUDGE OF PROBATE

Please print in ink or type.			This form is due within five (5) calendar days of	
Full Name of Candidate Zackery S. Gorham			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.	
Email Address of the Candidate  The personal Trule			Type of Committee (check one)	
Address of the Committee (street or post office box)			appoint myself as the sole member of my principal campaign committee.	
12177 us Huy Boaz	State ZIP Code 35954	Telephone Number 256-593-6415	I hereby appoint the individuals listed below to act as my principal campaign committee.	
should be designated as the ch	serve_as_your_committee,_you_must_s airperson of the committee. A secon elow. Each appointee must sign his	nd member should be desig	—You-may-appoint-up-to-five-membersOne-member——— nated as the treasurer. Please clearly print their names	
C	hairperson		Treasurer	
Full Name	Email Address	Full Name	Email Address	
Address (street or post office box)		Address (street or	Address (street or post office box)	
City	State ZIP Code	City	State ZIP Code	
Signature of Appointee		Signature of Appo	Signature of Appointee	
Committee Member		Committee Member		
Full Name	Email Address	Full Name	Email Address	
Address (street or post office box)		Address (street or	Address (street or post office box)	
City	State ZIP Code	City	State ZIP Code	
Signature of Appointee		Signature of Appo	pintee	
Com	mittee Member		Committee Dissolution Designee	
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	<del> </del>	Signature of Appo	pintee	

## A note regarding the dissolution designee ...

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

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