

Waiver of Report FOR CANDIDATES

(OPTIONAL FORM)

FILED

JUL 2 9 2016

BOBBY M. JUNKINS JUDGE OF PROBATE

Please Print in Ink or Type

Name of Candidate	Political Party/Ballot Affiliation	Type of Report (check one)	1
Office Sought (include district or circuit number, if applicable)	Independent	Monthly Report Month in which the report is filed.	
Council Place 5 Address Check box if reporting new address		Weekly Report Date that weekly report is due.	
12177 US HUNG 431 City State ZIP BOUR AL 3595	Code Telephone Number 254 · 593 · 6415	Annual Report Calendar year covered by this report.	439.00
		(Note: This form is not for u	ise by elected unividis in

This form is not for use by principal campaign committees of 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 threshold is \$1,000, regardless of the office sought:

- \$1,000 candidates for state offices
- \$1,000 candidates for State Senate
- \$1,000 candidates for State House of Representatives
- \$1,000 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.

