



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

FILED

JUL 25 2016

BOBBY M. JUNKINS
JUDGE OF PROBATE

THIS AREA FOR OFFICIAL USE ONLY

FILED IN OFFICE

Appointment of Principal Campaign Committee

JUL 25 2016

TIM MITCHELL
JUDGE OF PROBATE

Please print in ink or type.

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.

Full Name of Candidate James Michael Matthews			
Office Sought (include district or circuit number, if applicable) City Council		Political Party / Ballot Affiliation	
Email Address of the Candidate m-jmatthews@att.net			
Address of the Committee (street or post office box) 914 Brown St.			
City Boaz	State AL.	ZIP Code 35957	Telephone Number 256-593-5004

Type of Committee (check one)

- I appoint myself as the sole member of my principal campaign committee.
- I hereby appoint the individuals listed below to act as my principal campaign committee.

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 must sign his or her name.

Chairperson		Treasurer	
Full Name James Michael Matthews	Email Address m-jmatthews@att.net	Full Name SAME	Email Address
Address (street or post office box) 914 Brown St. Boaz, AL. 35957		Address (street or post office box)	
City Boaz	State AL.	City	State ZIP Code
Signature of Appointee <i>James M. Matthews</i>		Signature of Appointee	
Committee Member		Committee Member	
Full Name Ellen Jean Matthews	Email Address m-jmatthews@att.net	Full Name	Email Address
Address (street or post office box) Boaz 914 Brown St. AL. 35957		Address (street or post office box)	
City Boaz	State AL.	City	State ZIP Code
Signature of Appointee <i>Ellen Jean Matthews</i>		Signature of Appointee	
Committee Member		Committee Dissolution Designee	
Full Name	Email Address	Full Name Jill M. Lacks	Email Address
Address (street or post office box)		Address (street or post office box) Boaz AL. 35957	
City	State ZIP Code	City Boaz	State AL.
Signature of Appointee		Signature of Appointee <i>Jill M. Lacks</i>	

A note regarding the dissolution designee ...

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.

Where to file this form ...

State candidates file with the Office of the Secretary of State. County and municipal candidates 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.

James M. Matthews
Signature of elected official or candidate

Date