



Waiver of Report FOR CANDIDATES (OPTIONAL FORM)

FILED

JUL 07 2016

**BOBBY M. JUNKINS
JUDGE OF PROBATE**

Please Print in Ink or Type.

Name of Candidate MYRNA BAKER		Political Party/Ballot Affiliation	
Office Sought (include district or circuit number, if applicable) COUNCIL MEMBER, DIST. #1			
Address <input type="checkbox"/> Check box if reporting new address 511 3RD ST. NW APT. 6			
City ATTALLA	State AL	ZIP Code 35954	Telephone Number (256) 335-9095

Type of Report (check one)

- Monthly Report**
Month in which the report is filed.
- Weekly Report**
Date of Friday in the week in which the report is filed.
- Annual Report**
Calendar year covered by this report.

July

This form is not for use by principal campaign committees for 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 thresholds are as follows:

- ▶ \$25,000 - candidates for state offices
- ▶ \$10,000 - candidates for State Senate
- ▶ \$5,000 - candidates for State House of Representatives
- ▶ \$5,000 - 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.

Myrna Baker
Signature of Candidate

07/07/16
Date