



Waiver of Report FOR CANDIDATES (OPTIONAL FORM)

FILED

JUL 21 2016

BOBBY M. JUNKINS
JUDGE OF PROBATE

Please Print in Ink or Type.

Name of Candidate ANTHONY E. CYLAR		Political Party/Ballot Affiliation		Type of Report (check one) <input checked="" type="checkbox"/> Monthly Report Month in which the report is filed. July <input type="checkbox"/> Weekly Report Date of Friday in the week in which the report is filed. <input type="checkbox"/> Annual Report Calendar year covered by this report.
Office Sought (include district or circuit number, if applicable) COUNCIL MEMBER #2				
Address <input type="checkbox"/> Check box if reporting new address 813 4TH ST NW,				
City ATLANTA	State AL.	ZIP Code 35954	Telephone Number 256-538-8940	

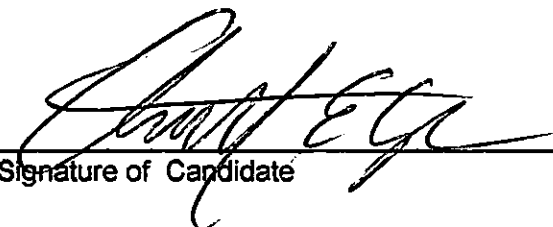
This form is not for use by principal campaign committees for elected, public officials.

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.


 Signature of Candidate

7/21/2016
 Date