



# Appointment of Principal Campaign Committee

**FILED**

**JUN 25 2014**

**BOBBY M. JUNKINS  
JUDGE OF PROBATE**

Please print in ink or type.

Full Name of Candidate <b>Mitchell Lashun James</b>			
Office Sought (include district or circuit number, if applicable) <b>Mayor - City of Gadsden, AL</b>		Political Party / Ballot Affiliation	
Address of the Committee (street or post office box) <b>P.O. Box 4224</b>			
City <b>Gadsden</b>	State <b>AL</b>	ZIP Code <b>35904</b>	Telephone Number <b>256 490 9972</b>

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 or third party candidate.

**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			
Full Name <b>TERRENCE McCAIN</b>			
Address (street or post office box) <b>114 SWEETWATER LN</b>			
City <b>RAINBOW CITY</b>	State <b>AL</b>	ZIP Code <b>35906</b>	
Signature of Appointee <i>Terrence McCain</i>			

Treasurer			
Full Name <b>Sharita Carlisle</b>			
Address (street or post office box) <b>205 North 8th St</b>			
City <b>Gadsden</b>	State <b>AL</b>	ZIP Code <b>35903</b>	
Signature of Appointee <i>Sharita H. Carlisle</i>			

Committee Member			
Full Name <b>Jack Washington Rowell Jr.</b>			
Address (street or post office box) <b>814 Sizemore St.</b>			
City <b>GADSDEN</b>	State <b>AL</b>	ZIP Code <b>35903</b>	
Signature of Appointee <i>Jack Rowell</i>			

Committee Member			
Full Name <b>Amanda Champion</b>			
Address (street or post office box) <b>207 Christopher St - Apt 80</b>			
City <b>Rainbow City</b>	State <b>AL</b>	ZIP Code <b>35904</b>	
Signature of Appointee <i>Amanda Champion</i>			

Committee Member			
Full Name <b>Robert D. Sykes</b>			
Address (street or post office box) <b>662 Sutton Bridge Road</b>			
City <b>Rainbow City</b>	State <b>AL</b>	ZIP Code <b>35906</b>	
Signature of Appointee <i>Robert Sykes</i>			

**Filing Threshold Amounts for Public Offices  
under the Fair Campaign Practices Act**

\$25,000	Statewide office
\$10,000	State Senate seat
\$5,000	State House seat
\$5,000	Circuit or district office
\$1,000	County or municipal office

**Where to file this form ...**

- ▶ State candidates file with the Office of the Secretary of State, located in the Alabama State Capitol, Room E-210. The mailing address is P.O. Box 5616, Montgomery, Alabama 36103-5616.
- ▶ 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.

*[Signature]*  
Signature of elected official or candidate

**6-25-2014**  
Date