



FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA

FILED IN OFFICE
PROBATE COURT

JAN 20 REC'D

JAMES P. NAFTEL, II
Judge of Probate

THIS AREA FOR OFFICIAL USE ONLY

County Division Code: AL040
Inst. # 2021007826 Pages: 1 of 1
I certify this instrument filed on
1/20/2021 3:57 PM Doc: ELPCC
Judge of Probate
Jefferson County, AL.

Clerk: NICOLE

Appointment of Principal Campaign Committee

Please print in ink or type.

Full Name of Candidate James A. Sullivan			
Office Sought (include district or circuit number, if applicable) Birmingham Board of Education District 5		Political Party / Ballot Affiliation Independent	
Address of the Committee (street or post office box) PO Box 59025			
City Birmingham	State AL	ZIP Code 35259	Telephone Number [REDACTED]

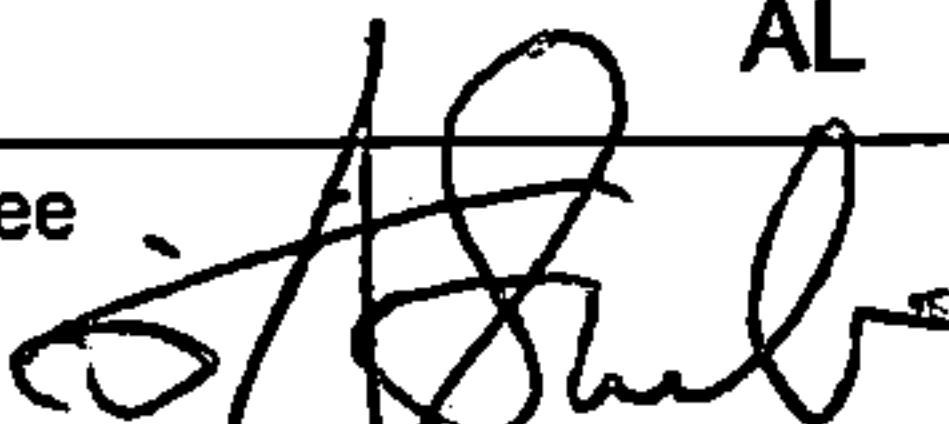
This form is due within five (5) calendar days of reaching the threshold amount, or within five (5) calendar days of qualifying with a political party, or within five (5) calendar days of filing a petition as an independent candidate.

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.

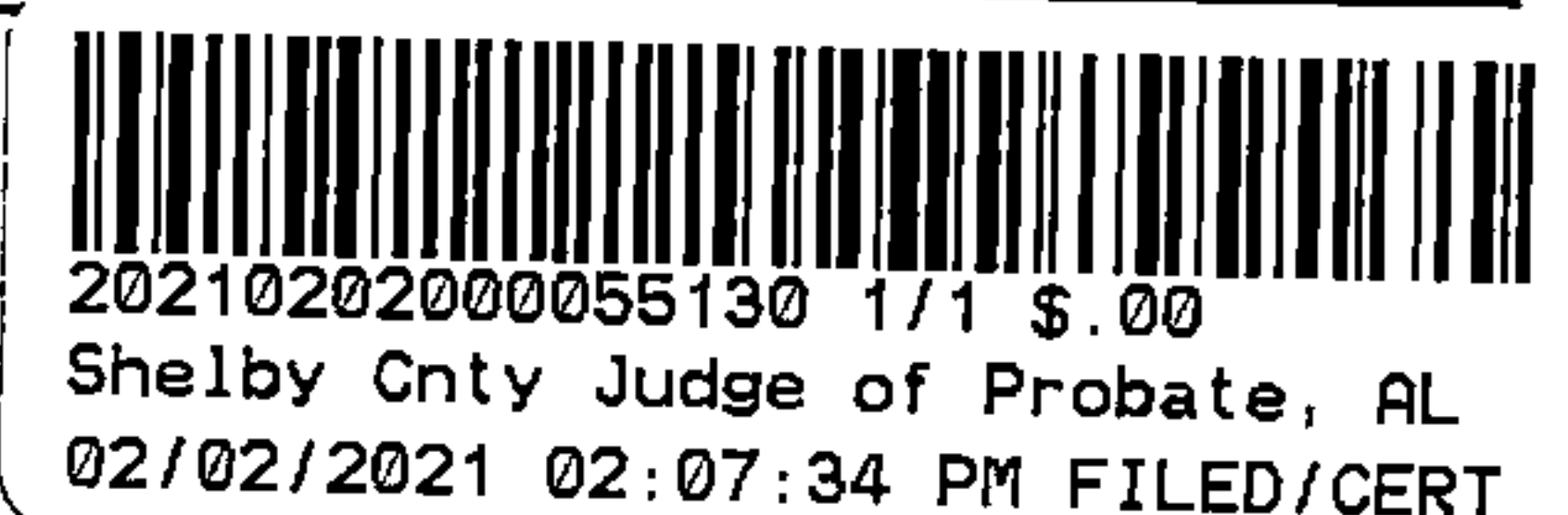
Candidates who choose to be the sole member of their principal campaign committee must choose a designee to dissolve the committee due to the possibility of death or incapacitation of the candidate.

Chairperson			
Full Name James A. Sullivan		Email Address jasullivan@millenforward.com	
Address (street or post office box) PO Box 59025			
City Birmingham	State AL	ZIP Code 35259	
Signature of Appointee 			

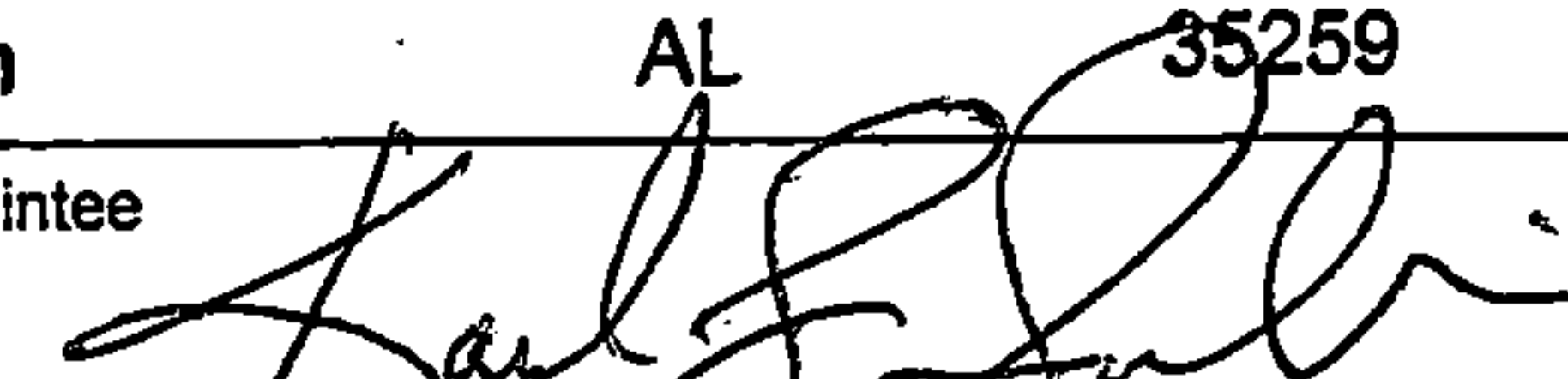
Treasurer		
Full Name		Email Address
Address (street or post office box)		
City	State	ZIP Code
Signature of Appointee		

Committee Member			
Full Name		Email Address	
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee			

Committee Member		
Full Name		Email Address
Address (street or post office box)		
City	State	ZIP Code
Signature of Appointee		



Committee Member			
Full Name		Email Address	
Address (street or post office box)			
City	State	ZIP Code	
Signature of Appointee			


Committee Dissolution Designee		
Full Name Kayla L. Sullivan		Email Address klsullivan2018@gmail.com
Address (street or post office box) PO Box 59025		
City Birmingham	State AL	ZIP Code 35259
Signature of Appointee 		

Where to file this form ...

- State candidates file with the Office of the Secretary of State.*
- County candidates must file electronically at fcpa.alabamavotes.gov
- Municipal candidates file with the county judge of probate.

* This form does not establish electronic filing. To file electronically, visit fcpa.alabamavotes.gov and click "Committee Registration."

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.

 **1/20/21**
Signature of elected official or candidate Date