Full Name of Candidate

FAIR CAMPAIGN PRACTICES ACRECEIVED IN OFFICE STATE OF ALABAMA

James A. Sullivan

District 5

State

Appointment of

Office Sought (include district or circuit number, if applicable)

Birmingham Board of Education

PO Box 59025

^{City} Birmingham

Address of the Committee (street or post office box)

PROBATE COURT

JUL 06 2021

JAMES P. NAFTEL, II

Political Party / Ballot Affiliation

Telephone Number

334.220.4054

Independent

Principal Campaign Committee Please print in ink or type,

ZIP Code

35259

County Division Code: AL040 Inst. # 2021077836 Pages: 1 of 1 I certify this instrument filed on 7/6/2021 2:48 PM Doc: ELPCC Judge of Probate Jefferson County, AL.

THIS AREA FOR OFFICIAL USE ONLY

Clerk: CRAWFORD

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 X 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.

Chair	person		
Full Name James A. Sullivan		il Address @millenforwar	d.com
Address (street or post office box) PO Box 59025			
City Birmingham	State AL	ZIP Code 35259	
Signature of Appointee	ll-		

	committee Wemb	er	
Full Name	Ema	ail Address	
Address (street or post of	fice box)		
City	State	ZIP Code	
Signature of Appointee			

	ommittee Memb	er	
Full Name	Ema	ail Address	
Address (street or post off	ice box)		
City	State	ZIP Code	
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."

	reasurer
Full Name	Email Address
Courtnie H. Anderson	canderson@sha-bhm.com
Address (street or post office box) 214 24th Street North	
City	State - ZIP Code
Birmingham	AL 35203
Signature of Appointee	oh

Full Name	Email Address	
Address (street o	r postoffica havi	
City	— 20210726000360520 1/1 \$.00	
Signature of Appo	Shelby Cnty Judge of Probate, AL 07/26/2021 02:13:10 PM FILED/CERT	

Email Address klsullivan2018@gmail.com
State , ZIP Code
AL 35259
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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 of elected official or candidate

Date

FORM REVISED 6.19.2017