Judge of Probate

County Division Code: AL040

Inst. # 2021092129 Pages: 1 of 3

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certify this instrument filed on

Address

FAIR CAMPAIGN PRACTICES ACT STATE OF ALABAMA

Candidate & Elected Official Campaign Finance Ronort SUMMARY FORM 1

Jefferson County, AL. 'c: WORTHYV

of Report (check one) 20210817000399590 1/3 \$.00 Amended Monthly Monthly Shelby Cnty Judge of Probate, AL Please Print in link or Type 08/17/2021 08:43:05 AM FILED/CERT Weekly Amended Weekly Name of Candidate or Elected Official TOUMENT PROPERTY CONTRACTOR OF THE PROPERTY OF For Monthly Reports Month for which the Office Sought of Held (include district or circuit number, if applicable) report is filed. For Weekly Reports Date of Friday in the Check box if reporting new address week for which the report is filed. State ZIP Code Telephone Number Total Number of Pages in Report

S	ummary of activity since last filed report								
1	Beginning balance (ending balance from previous filing)					1	927.20		
10. 2	Cash Contributions								
2a	Itemized cash contributions (total from Form 2)	2a	302	.6.7:	3				
2b	Non-itemized cash contributions	2b					s deserce significant de la companya de la company		
2c	Total cash contributions (add lines 2a and 2b)					2c	3026.	73so.	¢¢
	In-Kind Contributions								
За	Itemized in-kind contributions (total from Form 3)	За							
3b	Non-itemized in-kind contributions	3b							
3c	Total in-kind contributions (add lines 3a and 3b)	3c	E	}	\$0.00				
	Receipts from Other Sources					æ.	•		
4a	Itemized Receipts from Other Sources (total from Form 4)	4a							
4b	Non-itemized Receipts from Other Sources	4b							
4c	Total receipts from other sources (add lines 4a and 4b)					4c	-0	\$ 0.	00
	Expenditures				مراد المراد				
5a	Itemized expenditures (total from Form 5)	5a	269	86.7					
5b	Non-itemized expenditures	5b					<u> </u>		
5c	Total expenditures (add lines 5a and 5b)					5c	2686.	\$0.	00
	Expenditures on Line of Credit		بالتناون الأورالة الإروالة على ع			~*i			
6a	Itemized expenditures (total from Form 6)	6a							
6b	Non-itemized expenditures	6b							
6c	Total expenditures on credit (add lines 6a and 6b)	6c		0	\$0.00)			والراحة
7	Ending balance (add lines 1, 2c, & 4c, then subtract line 5c)					7	1267.	3 50.	. 0 0
			The second secon						

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures, and other required information during the applicable period of time.

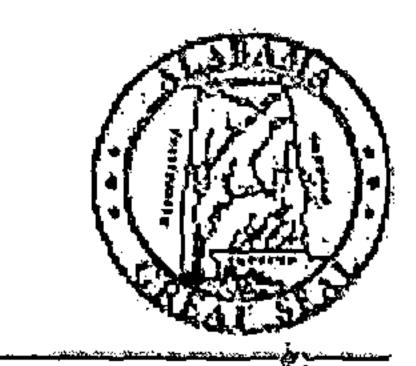
Signature of Candidate or Elected Official Date Sworn to and subscribed before me this day of _____. My commission expires day of JUNE of the year 2022 Signature of Notary Public

Print Notary's Name

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 2: Contributions received by candidate or elected official

NAME OF CANDIDATE OR ELECTED OFFICIAL: JAMES A. SULLIVAN



When total contributions from a single source exceed \$100.00, the FCPA requires all contributions from that source to be itemized. DO NOT LIST in-kind contributions or loans on this form. Use Forms 3 and 4 for those listings. SOURCE OF CONTRIBUTION (CHECK ONE) CONTRIBUTOR ADDRESS . DATE AMOUNT (INCLUDE FULL NAME) (ADDRESS SHOULD INCLUDE CONTRIBUTION OF STREET OR P.O. BOX. CITY, STATE, AND ZIP) CONTRIBUTION RECEIVED (mo./day/yr.) BOX 53045 JJohnson 500.00 8/5/2 Next-Creneration Flabona PA-C 2,496.73 8/5/2 Birmingham, 7-1 35207 3024.7300 TOTAL CASH CONTRIBUTIONS THIS PAGE FORM REVISED 9.2.2011

ALABAMA FAIR CAMPAIGN PRACTICES ACT - CAMPAIGN FINANCE REPORT FOR CANDIDATE & ELECTED OFFICIAL

FORM 5: Expenditures by candidate or elected official NAME OF CANDIDATE OR ELECTED OFFICIAL: TOMES-A. SULLIVAY



When total expenditures to a single recipient exceed \$100.00, the FCPA requires all expenditures to that recipient be itemized.

		PURPOSE OF EXPENDITURE (CHECK ONE)												
PERSON/GROUP/BUSINESS RECEIVING EXPENDITURE (INCLUDE FULL NAME)	ADDRESS (ADDRESS SHOULD INCLUDE STREET OR P.O. BOX, CITY, STATE, AND ZIP)	Administrative	Advartising	Consultants/	Contribution	Food	Fundraising	Loan Repayment	<u>6</u>	Transportation	OTHER GIVE BRIEF EXPLANATION	DATE OF EXPENDITURE (mo./day/yr.)	AMOUNT OF EXPENDITURE	
Elect Fest 2021.	20th/st N Birmingham, AL 3/1203						X				vendor Set-Up	8/2/21	51.75	
Kb Screative studio	119 Cyress Street Hulytown, Al. 35023		X								Flyer	8/5/21	50.00	
^ \ _ \	PO BOX 44146 Somerville, MD 02144	X	dar un Marian								Strice	8/5/21	11.26	
Diview Strategies, 4	C 2325 27th/St. Ensley Birmingham, AL 35208		X								Mailers	8/0/2/	2,496.73	
Hobby Lobby	255 Lakteshore PKWY Homewood, AL 35209		X								Posters/ Table Cloth	8/10/21	76.97	
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FORM REVISED 9.2:2011									AGE	2686.71				