



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

FILED
WASHTENAW COUNTY MI
1. Committee I.D. Number

C 99028

2005 OCT - 3 A 10:58
Committee Name

CTE MRACIA HIGGINS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regarding		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name: <u>PETER ALLEN</u> Address: <u>2224 APPLEWOOD</u> <u>48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>7-20-05</u>	75.00	75.00
3. Contribution #2 Name: <u>NICHOLS ROUMEL</u> Address: <u>2718 HAMPSHIRE</u> <u>48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>7-21-05</u>	40.00	40.00
3. Contribution #3 Name: <u>LLOYD POWELL</u> Address: <u>POB 722</u> <u>48107</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>7-22-05</u>	100.00	100.00
3. Contribution #4 Name: <u>JOAN LOWENSTEIN</u> Address: <u>502 BURSUN PL.</u> <u>48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>JAFU, RAITT, HUBB, WEISS</u> Business Address <u>201 S. MAIN</u> <u>48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>7-16-05</u>	250.00	250.00

Page Subtotal
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

465

Enter this total on line 3 of Summary Page.

Page _____ of _____



C-1999-0280015

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

FILED
WASHTENAW COUNTY MI
C99028
2. Committee Name
MARCIA HIGGINS
2005 OCT - 3
A 11:00
LAURENCE R. STENBAUM
COUNTY CLERK REGISTER

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name: JANE BARNEY Address: 423 W. LIBERTY 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: 7-18-05	25.00	25.00
3. Contribution #2 Name: JEROLD LAX Address: 1015 BERKSHIRE 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: 7-25-05	25.00	25.00
3. Contribution # 3 Name: JUNE RUSTEN Address: 1733 DUNMORE 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: 7-20-05	25.00	25.00
3. Contribution # 4 Name: THOMAS HEWWOOD Address: POB 177 DUNDON 48131 5. If over \$100.00 cumulative, please provide: Occupation: EXEC. DIR. Employer: STATE ST. ASSOC. Business Address: 527 E. LIBERTY 48104 Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: 7-16-05	300.00	300.00

Page Subtotal
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

375.00

Enter this total on
line 3 of Summary
Page.