



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS



C-2005-0260011

FILED
WASHTENAW COUNTY, MI

**CANDIDATE COMMITTEE
COVER PAGE**

2005 NOV 30 P 4: 46

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

| | | | |
|--|--|---|--|
| <p>1. Committee I.D. Number <u>C-2005-026</u></p> <p>2. Committee Name <u>Stephen Rapundalo for Ann Arbor Council</u></p> | | <p>3. This Statement covers From: <u>8 20 05</u> to <u>10 23 05</u> Mo Day Year Mo Day Year</p> <p><u>COUNTY CLERK/REGISTER</u></p> | |
| <p>5. Committee's Mailing Address <u>3106 Bluett Rd</u> <u>Ann Arbor, MI 48105</u></p> <p>Area Code and Phone <u>(313) 995-9507</u></p> <p>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p> | | <p>4. Candidate Last Name <u>RAPUNDALO</u> First Name <u>STEPHEN</u> M.I. <u>T</u></p> <p>4a. Office Sought Including District # or Community Served (if applicable) <u>City Council - Ann Arbor</u></p> <p>4b. County of Residence <u>Washtenaw</u></p> | |
| <p>7. Treasurer's Business Address _____</p> <p>Area Code and Phone () _____</p> | | <p>6. Treasurer's Name & Residential Address <u>Nathan Sterken</u> <u>737 Packard</u> <u>Ann Arbor, MI 48104</u></p> <p>Area Code & Phone <u>(313) 717-1481</u></p> | |
| <p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Convention <input type="checkbox"/> School</p> <p><input type="checkbox"/> Special <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>November 8 2005</u> Month Day Year</p> | | <p>9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year)</p> <p>9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) <u>1-K, 1F</u></p> <p>9e. <input type="checkbox"/> Dissolution of Candidate Committee</p> <p>Effective Date of Dissolution _____ Month Day Year</p> <p>By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p> | |
| <p>A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.</p> | | | |
| <p>10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p> <p>Current Treasurer or Designated Record keeper <u>NATHAN STERKEN</u>, <u>Nathan Sterken</u> Date <u>11 30 05</u> Type or Print Name Signature Mo Day Year</p> <p>Candidate <u>STEPHEN RAPUNDALO</u>, <u>Stephen Rapundalo</u> Date <u>11 30 05</u> Type or Print Name Signature Mo Day Year</p> | | | |



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number C-2005-026
2. Committee Name Stephen Rapurdulo For Ann Arbor Council

**SUMMARY PAGE
CANDIDATE COMMITTEE**

| RECEIPTS | Column I This Period | Column II Cumulative this election cycle |
|--|--------------------------------|---|
| 3. Contributions | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ <u>2855.00</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>2855.00</u> | (18.) \$ <u>5915.00</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ <u>-</u> | (19.) \$ <u>-</u> |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>2855.00</u> | (20.) \$ <u>5915.00</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>129.48</u> | (21.) \$ <u>129.48</u> |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ <u>-</u> | (22.) \$ <u>-</u> |
| EXPENDITURES | | |
| 8. Expenditures | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ <u>1710.74</u> | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ <u>-</u> | |
| c. Unitemized (less than \$50.01 each - no Schedule) | (8c.) \$ <u>-</u> | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ <u>1710.74</u> | (23.) \$ <u>3961.32</u> |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | |
| 10. Disbursements | | |
| a. Itemized (Schedule 1C, Column 6) | (10a.) \$ <u>-</u> | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ <u>-</u> | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) | (11.) \$ <u>-</u> | (24.) \$ <u>-</u> |
| DEBTS AND OBLIGATIONS | | |
| 12. Debts and Obligations | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ <u>471.80</u> | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ <u>-</u> | |
| BALANCE STATEMENT | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ <u>809.42</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>2855.00</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ <u>3664.42</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ <u>1710.74</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ <u>1953.68</u> | |



**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2005-026
2. Committee Name Stephen Rapundalo for Ann Arbor Council

| 3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions. | 4. Type of In-Kind Contribution (Check applicable box) | 7. Amount or Fair Market Value | 8. Cumulative for Election Cycle (Through date in Item 5) |
|--|--|--------------------------------|---|
| Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name <u>Derezinski, Anthony</u> Address: <u>1345 Glendaloch Circle</u> <u>Ann Arbor, MI 48104</u> If over \$100.00 cumulative, please provide: Occupation: <u>Director, Government Affairs</u> Employer: <u>Michigan Assoc. of School Boards</u> Business Address: <u>Lansing, MI</u> <input checked="" type="checkbox"/> Fund Raiser Contribution | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Food for fundraiser</u> 5. Date Of Receipt: <u>10/18/05</u> 6. Vendor Name & Address: <u>Trader Joe's,</u> <u>Hilliers Market, GFS</u> | <u>\$129.48</u> | <u>\$129.48</u> |
| Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name _____ Address: _____ If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Business Address: _____ <input type="checkbox"/> Fund Raiser Contribution | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: _____ | | |
| Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name _____ Address: _____ If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Business Address: _____ <input type="checkbox"/> Fund Raiser Contribution | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: _____ | | |

Page Subtotal \$129.48
 Grand Total of all Schedules 1-IK (Complete on last page of Schedule) \$129.48
 Enter this total on line 6 of Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2005-026
2. Committee Name Stephen Rapundalo For Ann Arbor Council

- USE A SEPARATE SHEET FOR EACH EVENT -

| | | | |
|--|---|---|--|
| 3. Date Event Was Held <u>10</u> / <u>18</u> / <u>2005</u> <small>Month Day Year</small> | 4. Number of Individuals Attending or Participating (whichever is greater) <u>12</u> | 5. Type of Fund Raising Activity <u>Meet the Candidate</u> | 6. Address and Name (If any) of the place where the activity was held <u>1345 Alendloch Circle</u> <u>Ann Arbor, MI 48104</u> <input checked="" type="checkbox"/> Private Residence |
|--|---|---|--|

7. Total Contributions \$ 280.00

8. Other Receipts —

9. Gross Receipts (Add lines 7 and 8) \$ 280.00

10. Total Cost of Event \$ 129.48
 (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

| Co-Sponsor(s) | Contribution Split (%) | Expenditure Split (%) |
|---------------|------------------------|-----------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.