



C-2005-0260025

**CANDIDATE COMMITTEE  
COVER PAGE**

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

3. This Statement covers From: 01-01-07 to 11-26-07

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

4. Candidate Last Name RAPUNDALO First Name STEPHEN M.I. T  
4a. Office Sought Including District # or Community Served (If applicable) CITY COUNCIL - ANN ARBOR  
4b. County of Residence WASHTENAW

5. Committee's Mailing Address 3106 Bluett  
Ann Arbor, MI 48105  
Area Code and Phone 734 995-9507  
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.

6. Treasurer's Name & Residential Address Stephen Rapundalo  
3106 Bluett  
Ann Arbor, MI 48105  
Area Code & Phone 734 995-9507

7. Treasurer's Business Address MichBio  
330 E. Liberty  
Ann Arbor, MI 48104  
Area Code and Phone 734 527-9144

8. Designated Record keeper's Name and Mailing Address (if the committee has a Designated Record keeper)  
Area Code and Phone \_\_\_\_\_

9. TYPE OF STATEMENT  
9a.  Pre-Election OR 9b.  Post-Election  
Pre-Election or Post-Election Statement relates to:  
 Primary  General  
 Convention  School  
 Special  Caucus  
Date of Election, Convention or Caucus \_\_\_\_\_

9c.  Annual Statement ( \_\_\_\_\_ Coverage Year)  
9d.  Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)  
9e.  Dissolution of Candidate Committee  
Effective Date of Dissolution \_\_\_\_\_  
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.

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.**

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.  
Current Treasurer or Designated Record keeper Stephen Rapundalo Stephen Rapundalo Date 1-31-08  
Type or Print Name Signature  
Candidate Stephen Rapundalo Stephen Rapundalo Date 1-31-08  
Type or Print Name Signature



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I. D. Number C. 2005.026  
2. Committee Name Stephen Rapundalo for A<sup>2</sup> 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) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	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>Stephen Rapundalo</u> Address: <u>3106 Blumett</u> <u>Ann Arbor, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: <u>Exec. Director</u> Employer: <u>Mich Bio</u> Business Address: <u>330 E Liberty</u> <u>Ann Arbor, MI 48104</u> <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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>postage</u> 5. Date Of Receipt: <u>10.24.07</u> 6. Vendor Name & Address: <u>US Postal Service</u> <u>Liberty, Ann Arbor, 48104</u>	41.00	455.20
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name <u>Stephen Rapundalo</u> Address: <u>see above</u> If over \$100.00 cumulative, please provide: Occupation: Employer: <u>see above</u> 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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>lit printing</u> 5. Date Of Receipt: <u>10.25.07</u> 6. Vendor Name & Address: <u>Kolosos Printing</u> <u>301 E Liberty, Ann Arbor, 48104</u>	119.50	574.70
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name <u>Anne Rapundalo</u> Address: <u>3106 Blumett</u> <u>Ann Arbor MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: Employer: <u>St. Joseph Mercy Hosp.</u> Business Address: <u>Huron River Dr.</u> <u>Ann Arbor, MI</u> <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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>lit printing</u> 5. Date Of Receipt: <u>10.25.07</u> 6. Vendor Name & Address: <u>Kolosos Printing</u> <u>301 E Liberty, Ann Arbor, 48104</u>	119.50	119.50

Page Subtotal  
Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule)

280.00

Enter this total on line 6 of Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I. D. Number

C-2005-026

2. Committee Name

Stephen Rapundalo for A<sup>2</sup> 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>Stephen Rapundalo</u> Address: <u>3106 Bluett</u> <u>Ann Arbor MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: <u>Exec. Director</u> Employer: <u>MichBio</u> Business Address: <u>330 E Liberty</u> <u>Ann Arbor, MI 48104</u> <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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>lit printing</u> 5. Date Of Receipt: <u>11-02-07</u> 6. Vendor Name & Address: <u>Kolozsas Printing</u> <u>301 E. Liberty, Ann Arbor, 48104</u>	<p>133.11</p>	<p>707.81</p>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name <u>Anne Rapundalo</u> Address: <u>3106 Bluett</u> <u>Ann Arbor MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: Employer: <u>St. Joseph Mercy Hosp.</u> <u>Huron River Dr.</u> <u>Ann Arbor, MI</u> <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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>lit printing</u> 5. Date Of Receipt: <u>11-02-07</u> 6. Vendor Name & Address: <u>Kolozsas Printing</u> <u>301 E. Liberty Ann Arbor, 48104</u>	<p>133.00</p>	<p>252.50</p>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name <u>Stephen Rapundalo</u> Address: <u>see above</u> If over \$100.00 cumulative, please provide: Occupation: Employer: <u>see above</u> 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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>post-election reception</u> 5. Date Of Receipt: <u>11-06-07</u> 6. Vendor Name & Address: <u>Zanzibar</u> <u>216 S. State, Ann Arbor, 48104</u>	<p>75.20</p>	<p>783.01</p>

Page Subtotal  
Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule)

**341.31**

**1035.51**

Enter this total  
on line 6 of  
Summary  
Page