



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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: 11/25/13 to 7/20/14

1. Committee I.D. Number
C-2006-025

2. Committee Name
Stephen Kunselman for Mayor

4. Candidate Last Name Kunselman First Name Stephen M.I.

4a. Office Sought Including District # or Community Served (If applicable)
Mayor of Ann Arbor

4b. County of Residence Washtenaw

5. Committee's Mailing Address
Stephen Kunselman
2885 Butternut St.
Ann Arbor, MI 48108

Area Code and Phone 734-975-4604

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
Robert Cain
1306 Fountain St.
Ann Arbor, MI
48103

Area Code & Phone 734-761-4649

7. Treasurer's Business Address
1306 Fountain St.
Ann Arbor, MI
48103

Area Code and Phone 734-761-4649

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
8/5/14

9c. Annual Statement (Coverage Year)

9d. Amendment to Campaign Statement (Complete from 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.

FILED
 WASHTEENAW COUNTY, MI
 2014 JUL 28 P 2:28
 LAWRENCE MESTRE
 COUNTY CLERK/REGISTRAR

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 Robert Cain Signature [Signature] Date 7/25/14

Candidate Stephen Kunselman Signature [Signature] Date 7/25/14



1. Committee I.D. Number C-2006-025

2. Committee Name Stephan Kunselman

**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>7474</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>7474</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>-</u>	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>7474</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>318</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>-</u>	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>10,186.22</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>10,186.22</u>	(23.) \$ _____
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>0</u>	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>3199.02</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>7474</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>10,673.02</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>10,186.22</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>486.80</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kunselman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>David & Micki Moray</u> Address: <u>1450 King George Blvd, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Claudette Stern</u> Address: <u>341 Evergreen Ph, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$20	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Sarah Mayfield</u> Address: <u>1700 Folwer St, Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$20	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Celia Heven</u> Address: <u>76 W. Adams, #507, Detroit, MI 48226</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$20	

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

\$160

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kunzelman

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Peter Eckstein</u> Address: <u>2551 Londonderry Rd, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: <u>Anne & Joan Hindler</u> Address: <u>430 Parkwood, Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: <u>Jane & John Lumm</u> Address: <u>3075 Overridge Dr, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>France</u> Employer <u>Eastern Michigan Uni</u> Business Address <u>Ypsilanti, MI 48197</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$200	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: <u>Anne Barnister</u> Address: <u>612 N. Main St., Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$25	

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

\$375

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kunselman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Veronique Liem</u> Address: <u>2751 Bunting Blvd, Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$75	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Robert Dascola</u> Address: <u>1815 Baldwin, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Mary Summers</u> Address: <u>1815 Baldwin, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Somi Kalasapathy</u> Address: <u>2530 Mallard Ct, Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$75	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$750	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kusekman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Jack Eaten & Cecile Lamb</u> Address: <u>1606 Dicken Dr., Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Law Office of Mark Cousins</u> Business Address <u>26761 Evergreen, Suite 110, Southfield, MI 48076</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$250	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Rita Mitchell & Ed Steinman</u> Address: <u>621 5th St., Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Peggy & Loues Robhi</u> Address: <u>1991 Upland Dr., Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27</u> Name: <u>Elizabeth Hunter</u> Address: <u>827 Broce, Ann Arbor, MI 48103</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	\$20	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$420	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephan Kunselman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Mike Anglin for Council Committee</u> Address: <u>803 Duncan St. Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>John & Gwen Nystuen</u> Address: <u>1016 Olivia, Ann Arbor MI, 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$300	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Leon Bryson</u> Address: <u>636 Center, Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$25	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Carrie Mayfoeld</u> Address: <u>2227 Parkwood Ave., Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Radiology Tech</u> Employer <u>VA</u> Business Address <u>Fuller Rd, Ann Arbor, MI 48105</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$199	

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

\$624

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

C-2006-025

2. Committee Name

Stephan Kunselman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Kenny Magee</u> Address: <u>2084 Liberty Heights, Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$20	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Theresa Mary</u> Address: <u>7835 Mapleridge, Northville, MI 48167</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$20	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

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

\$40

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephan Kuzelmann

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 4. Date of Receipt <u>7/9/14</u> Name: <u>Susan Perry</u> Address: <u>1708 Fair St., Ann Arbor, MI 48103</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	\$100	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 4. Date of Receipt <u>7/15/14</u> Name: <u>Mike Anthony</u> Address: <u>2509 Jade Ct, Ann Arbor, MI 48103</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	\$50	\$70
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 4. Date of Receipt <u>7/10/14</u> Name: <u>Luanne Bollinger</u> Address: <u>1801 S. Blvd, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$250	\$500
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 4. Date of Receipt <u>7/17/14</u> Name: <u>Larry Baird</u> Address: <u>1770 Riverwood, Ann Arbor, MI 48103</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	\$50	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$450	

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line 3 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kuselman

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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/29/14</u> Name: <u>Stephen Thorp</u> Address: <u>124 Chapin St., Ann Arbor, MI 48103</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	\$25	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/8/14</u> Name: <u>Raymond Hunter</u> Address: <u>1601 Dicken Dr., Ann Arbor, MI 48103</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	\$100	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/6/14</u> Name: <u>Richard & Marian Williams</u> Address: <u>1836 Saxon, Ann Arbor, MI 48103</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	\$100	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/6/14</u> Name: <u>Braxton Blake</u> Address: <u>1508 Longshore Dr., Ann Arbor, MI 48105</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	\$50	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$275	

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kusekman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Mike Anglin</u> Address: <u>549 S. First St, Ann Arbor, MI 48103</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	\$50	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/12/14</u> Name: <u>Stan Baker</u> Address: <u>829 S. Main St, Ann Arbor, MI 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	\$100	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/19/14</u> Name: <u>Patricia Koman</u> Address: <u>1525 Westfield, Ann Arbor, MI 48103</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	\$20	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/15/14</u> Name: <u>Mike Anthony</u> Address: <u>2509 Jade Ct., Ann Arbor, MI 48103</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	\$20	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$190	

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kunselman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/15/14</u> Name: <u>Dennis Dahlmann</u> Address: <u>300 S. Thayer, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Hotelier</u> Employer <u>Owner Dahlmann</u> Business Address <u>300 S. Thayer, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$1000	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/13/14</u> Name: <u>Kay Holzinger</u> Address: <u>2300 Kent St., Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$200	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: <u>Claudette Stern</u> Address: <u>341 Evergreen Pl, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Artist</u> Employer <u>Self-employed</u> Business Address <u>220 Felch St., Ann Arbor MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$1000	\$1020
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/23/14</u> Name: <u>Myra Larson</u> Address: <u>3575 E. Huron River Dr., Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$200	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$2400	

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kunselman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/21/14</u> Name: <u>Luanne Bollington</u> Address: <u>1801 S. Blvd, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$250	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/7/14</u> Name: <u>Jane Michener</u> Address: <u>2115 Devenshire, Ann Arbor, MI 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	\$25	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/6/14</u> Name: <u>Christine Hildebrand</u> Address: <u>2115 Devenshire, Ann Arbor, MI 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	\$100	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/4/14</u> Name: <u>Frank & Julia Casa</u> Address: <u>1410 Hill St., Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$200	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$575	

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephan Kunselman

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 <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/14</u> Name: <u>Thomas & Joan Overmire</u> Address: <u>3210 Hardman, Ann Arbor, MI 48108</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$200	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/2/14</u> Name: <u>Rita & Vince Caruso</u> Address: <u>556 Glendale Cir, Ann Arbor, MI 48103</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	\$50	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/26/14</u> Name: <u>Mora Clark</u> Address: <u>3054 Williamsburg, Ann Arbor, MI 48108</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	\$20	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/4/14</u> Name: <u>T.J. Rice</u> Address: <u>100 S. Fourth, Ann Arbor, MI 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	\$20	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$290	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kuselman

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/14</u> Name: <u>Kathy Griswold</u> Address: <u>3565 Fox Hunt Dr., Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/14</u> Name: <u>Mike & Nina Hemel</u> Address: <u>3473 Wooddale Ct, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/14</u> Name: <u>Charles Lewis</u> Address: <u>330 S. Seventh St., Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/14</u> Name: <u>Brad & Cindy Cook</u> Address: <u>1481 Pine Valley Blvd, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	

Page Subtotal
Grand Total of All Schedules 1A
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\$250

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kunzelman

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/14</u> Name: <u>Michael Naughton</u> Address: <u>3135 S. State St. Suite 108, Ann Arbor, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/14</u> Name: <u>Mary Summers</u> Address: <u>1815 Baldwin, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	\$100
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/14</u> Name: <u>Harvey & Nancy Kaplan</u> Address: <u>3065 Hunting Valley Dr., Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$200	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/14</u> Name: <u>John & Gwen Mystruen</u> Address: <u>1016 Olivia, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100	\$400
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$450	

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line 3 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kuselman

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/19</u> Name: <u>Robert Dascola</u> Address: <u>1815 Baldwin, Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$50	\$100
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$50	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kuselman

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/16/14</u> Name: <u>Douglas White</u> Address: <u>330 S. Seventh, Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$25	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: <u>Mary Underwood</u> Address: <u>1219 Traver, Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$300	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/16/14</u> Name: <u>Dawn Bizzell</u> Address: <u>1614 Longshore Dr, Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$250	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/16/14</u> Name: <u>Kate Barald</u> Address: <u>404 W. Keech, Ann Arbor, MI 48103</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	\$100	

Page Subtotal
Grand Total of All Schedules 1A
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\$675
\$7474

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line 3 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number C-2006-025
2. Committee Name Stephen Kuselman

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>Erbo Uras</u> Address: <u>3077 N. Foxridge</u> <u>Ann Arbor, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: Employer: Business Address: <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>Appetizers</u> 5. Date Of Receipt: <u>4/27/14</u> 6. Vendor Name & Address: _____	\$73	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name <u>Letitia Kuselman</u> Address: <u>2885 Dutton St</u> <u>Ann Arbor, MI 48108</u> If over \$100.00 cumulative, please provide: Occupation: Employer: Business Address: <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>Appetizers</u> 5. Date Of Receipt: <u>4/27/14</u> 6. Vendor Name & Address: _____	\$100	
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
Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

173.00

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number

C-2006-025

2. Committee Name

Stephen Kuselman

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>Dawn Brazell</u> Address: <u>1614 Langshore Dr.</u> <u>Ann Arbor, MI 48105</u> 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 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>Appetizers</u> 5. Date Of Receipt: <u>7/16/14</u> 6. Vendor Name & Address:	\$ 75	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name <u>Bitsy Lamb</u> Address: <u>1606 Dickan Dr.</u> <u>Ann Arbor, MI 48105</u> 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 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>Appetizers</u> 5. Date Of Receipt: <u>7/10/14</u> 6. Vendor Name & Address:	\$100	
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
Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

\$ 175
\$ 378

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on line 6 of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2006-025
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>US Postal Service</u> Address <u>Liberty St. Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/18/14</u>	<u>\$204</u>
Expenditure #2 Name <u>Fed Ex office</u> Address <u>2800 S. State St.</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Copies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/18/14</u>	<u>\$168.67</u>
Expenditure #3 Name <u>Hillers</u> Address <u>Washburn Ave Ann Arbor, MI 48105</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Appetizers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/27/14</u>	<u>\$187.09</u>
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		

Subtotal this page
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

\$559.76

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2006-025
2. Committee Name Stephen Kuselman

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>US Postal Service</u> Address <u>Liberty St</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/17/14</u>	<u>\$15.68</u>
Expenditure #2 Name <u>US Postal Service</u> Address <u>Liberty St.</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/30/14</u>	<u>\$7.84</u>
Expenditure #3 Name <u>Fed Ex Office</u> Address <u>2800 S. State St.</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Copies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/12/14</u>	<u>\$13.99</u>
Expenditure #4 Name <u>Go Daddy.com</u> Address <u>14455 N. Hayden, Ste 226</u> <u>Scottsdale, AZ</u> <u>85260</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/14/14</u>	<u>\$2.17</u>
Expenditure #5 Name <u>Go Daddy.com</u> Address <u>14455 N. Hayden Ste 226</u> <u>Scottsdale, AZ</u> <u>85260</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/14/14</u>	<u>\$53.88</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>93.06</u>

Enter this total on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2006-025
2. Committee Name Stephan Kuselman

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Elmo's Main St. T-shirts</u> Address <u>220 S. Main St. Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>T-shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/10/14</u>	<u>\$170.93</u>
Expenditure #2 Name <u>Ann Arbor Jaycees Foundation</u> Address <u>Ann Arbor, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/26/14</u>	<u>\$57.18</u>
Expenditure #3 Name <u>Unit Packaging & Mailing</u> Address <u>119 Enterprise Dr. Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/30/14</u>	<u>\$484.59</u>
Expenditure #4 Name <u>Unit Packaging & Mailing</u> Address <u>119 Enterprise Dr. Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/18/14</u>	<u>\$2876.09</u>
Expenditure #5 Name <u>Fed Ex office</u> Address <u>2800 S. State St. Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Copies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/31/14</u>	<u>\$224.49</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>3807.28</u>

Enter this total on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2006-025
2. Committee Name Stephen Kuselman

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>City Printing</u> Address <u>411 West Cross St. Ypsilanti, MI 48198</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/5/14</u>	<u>\$854.36</u>
Expenditure #2 Name <u>City Printing</u> Address <u>411 West Cross St. Ypsilanti, MI 48198</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/29/14</u>	<u>\$964.60</u>
Expenditure #3 Name <u>City Printing</u> Address <u>411 West Cross St. Ypsilanti, MI 48198</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/11/14</u>	<u>\$303.16</u>
Expenditure #4 Name <u>City Printing</u> Address <u>411 West Cross St. Ypsilanti, MI 48198</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/16/14</u>	<u>\$2067.00</u>
Expenditure #5 Name <u>Sawicki & Son</u> Address <u>1521 W. Lafayette Detroit, MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/21/14</u>	<u>\$1537.00</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>5726.12</u> <u>\$10,186.22</u>

Enter this total on line 8a of Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kuselman

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>4/27/14</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>35</u>	5. Type of Fund Raising Activity <u>Appetizers</u>	6. Address and Name (If any) of the place where the activity was held. <u>Metal</u> <u>220 Felch St.</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$ 1869
8. Other Receipts -
9. Gross Receipts (Add lines 7 and 8) \$ 1869
10. Total Cost of Event \$ 360.09
(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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephen Kunselman

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>7/10/14</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>25</u>	5. Type of Fund Raising Activity <u>Appetizers</u>	6. Address and Name (If any) of the place where the activity was held. <u>1606 Dicken Dr.</u> <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions \$ 750
8. Other Receipts -
9. Gross Receipts (Add lines 7 and 8) \$ 750
10. Total Cost of Event \$ 100
(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 (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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- 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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025
2. Committee Name Stephan Kuselman

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>7/16/14</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>20</u>	5. Type of Fund Raising Activity <u>Appetizers</u>	6. Address and Name (If any) of the place where the activity was held. <u>1614 Longshore</u> <input checked="" type="checkbox"/> <u>Ann Arbor, MI 48105</u> Private Residence
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7. Total Contributions \$ 675
8. Other Receipts -
9. Gross Receipts (Add lines 7 and 8) \$ 675
10. Total Cost of Event \$ 75
(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.