



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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.

1. Committee I.D. Number C-2010-069		3. This Statement covers From: 1-1-16 to 10-23-16	
2. Committee Name Committee To Re-Elect Simone Lightfoot		4. Candidate Last Name Lightfoot First Name Simone M.I. D. 4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local 4b. County of Residence WASHTENAW	
5. Committee's Mailing Address 1323 South Forest Avenue Ann Arbor, MI 48104-3924 Area Code and Phone 734-663-4849 <small>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.</small>		6. Treasurer's Name & Residential Address Glenn L. Nelson 1323 South Forest Avenue Ann Arbor, MI 48104-3924 Area Code & Phone 734-663-4849	
7. Treasurer's Business Address 1323 South Forest Avenue Ann Arbor, MI 48104-3924 Area Code and Phone 734-663-4849		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) not applicable Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus 11-8-16		9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) 9e. <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven; and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
0. 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 Glenn L. Nelson Type or Print Name Simone D. Lightfoot Candidate Type or Print Name		Signature <i>Glenn L. Nelson</i> <i>Simone D. Lightfoot</i> Date 10/27/16 10-27-16	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number C-2010-069

2. Committee Name Committee To Re-Elect Simone Lightfoot

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS

3. Contributions

Column I
This Period

Column II
Cumulative this election cycle

a. Itemized (Schedule 1A - Column 6)

(3a.) \$ 4,143.57

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$ 4,143.57

4. Other Receipts (Schedule 1A-1, Column 6)

(4.) \$ 0.00

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

(5.) \$ 4,143.57

(18.) \$ 4,143.57

(19.) \$ 0.00

(20.) \$ 4,143.57

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$ 53.60

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$ 0.00

(21.) \$ 53.60

(22.) \$ 0.00

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$ 3,282.63

b. Itemized Get-Out-the-Vote (Schedule 1B-G)

(8b.) \$ 0.00

c. Unitemized (less than \$50.01 each - no Schedule)

(8c.) \$ 0.00

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)

(9.) \$ 3,282.63

(23.) \$ 3,282.63

INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)

10. Disbursements

a. Itemized (Schedule 1C, Column 6)

(10a.) \$ 0.00

b. Unitemized (less than \$50.01 each - no Schedule)

(10b.) \$ 0.00

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b)

(11.) \$ 0.00

(24.) \$ 0.00

DEBTS AND OBLIGATIONS

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E)

(12a.) \$ 2,738.50

b. Owed to the Committee (Schedule 1E)

(12b.) \$ 0.00

BALANCE STATEMENT

13. Ending Balance of last report filed
(Enter zero if no previous reports have been filed.)

(13.) \$ 145.04

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)

(14.) + \$ 4,143.57

15. SUBTOTAL Add lines 13 and 14

(15.) = \$ 4,288.61

16. Amount expended during reporting period
(Add lines 9 and 11)

(16.) - \$ 3,282.63

17. ENDING BALANCE

(Subtract line 16 from line 15)

(17.) \$ 1,005.98 *



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2010-069

1. Committee I.D. Number

Comm To Re-Elect Simone Lightfoot

2. Committee Name

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 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	2-19-2016
Name & Address: Briere, Sabra 1418 Broadway Ann Arbor, MI 48105		25.00	25.00
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		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3-3-2016
Name & Address: Nelson, Glenn L. 1323 South Forest Avenue Ann Arbor, MI 48104		100.00	100.00
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		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3-23-2016
Name & Address: Go, Les 2540 Bens Street Ann Arbor, MI 48103		5.00	5.00
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		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3-23-2016
Name & Address: Mallory, Mark 907 Dayton Street Cincinnati, OH 45214		100.00	100.00
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		Click Here for Memo Itemization	

Page Subtotal 230.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-069
2. Committee Name Comm To Re-Elect Simone Lightfoot

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 regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 5-2-2016

Name & Address:
Mexicotte, Debra L.
2660 Yost Boulevard
Ann Arbor, MI 48104

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 8-8-2016

Name & Address:
Lightfoot, Simone
2733 Arrowwood Trail
Ann Arbor, MI 48105

\$ 2000.00

\$ 2000.00

5. If over \$100.00 cumulative, please provide:

Occupation Director Employer National Wildlife Federation

Business Address PO Box 1583, Merrifield, VA 22116-1583

Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 8-9-2016

Name & Address:
Boeheim, Patrick
910 Sunset Road
Ann Arbor, MI 48103

\$ 25.07

\$ 25.07

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-2016

Name & Address:
Manley, Patricia
2645 Powell
Ann Arbor, MI 48104

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal 2,225.07

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-069
2. Committee Name Comm To Re-Elect Simone Lightfoot

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 regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1

PAC Receipt? ☐ YES

4. Date of Receipt 9-11-2016

Name & Address:

Stead, Christine M.
2433 Blueberry Lane
Ann Arbor, MI 48103-2214

\$ 200.00

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Consultant Employer Blue Cottage Consulting

Business Address 122 South Main St., Ann Arbor, MI 48104

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 10-1-2016

Name & Address

Wallace, Bruce T.
435 Hillspur Road
Ann Arbor, MI 48105

\$ 200.00

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer HHPB & Wallace

Business Address 126 South Main St., Ann Arbor, MI 48104-1945

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt 10-11-2016

Name & Address:

Nelson, Glenn L.
1323 South Forest Avenue
Ann Arbor, MI 48104-3924

\$ 110.45

\$ 210.45

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Business Address

Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 10-14-2016

Name & Address

Nelson, Glenn L.
1323 South Forest Avenue
Ann Arbor, MI 48104-3924

\$ 628.05

\$ 855.88

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Business Address

Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 1,138.50

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-069
2. Committee Name Comm To Re-Elect Simone Lightfoot

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 regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt 10-17-2016

Name & Address:

Lasinski, Donna P.
4977 St. Annes Court
Ann Arbor, MI 48103

\$ 500.00

\$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation Executive Employer ThinkStretch

Business Address 215 E. Washington, Suite 200, Ann Arbor, MI 48104

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 10-19-2016

Name & Address:

Woods, Ronald
2034 Liberty Heights
Ann Arbor, MI 48103

\$ 25.00

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt 10-19-2016

Name & Address:

Woods, Wendy
2034 Liberty Heights
Ann Arbor, MI 48103

\$ 25.00

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address

\$ _____

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal 550.00

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

4,143.57

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number

C-2010-069

2. Committee Name

Committee To Re-Elect Simone Lightfoot

CANDIDATE COMMITTEE

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? ☐ Yes

Name & Address:
Boeheim, Patrick
910 Sunset Road
Ann Arbor, MI 48103

If over \$100.00 cumulative, please provide:
Occupation:

Employer Name & Business Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description Placard for Candidate Display

5. Date Of Receipt: 9-2-2016

6. Vendor Name & Address:

Staples
2601 Jackson Road
Ann Arbor, MI 48103

[Click Here for Memo Itemization](#)

\$ 36.22

\$ 61.29

☐ Fund Raiser Contribution

Contribution # 2 PAC Receipt? ☐ Yes

Name & Address
Nelson, Glenn L.
1323 South Forest Avenue
Ann Arbor, MI 48104

If over \$100.00 cumulative, please provide:
Occupation:

Employer Name & Address:

Retired

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description Photocopies Used in Mailing

5. Date Of Receipt: 10-12-2016

6. Vendor Name & Address:

Dollar Bill Copying
611 Church Street
Ann Arbor, MI 48104

[Click Here for Memo Itemization](#)

\$ 17.38

\$ 227.83

☐ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description _____

5. Date Of Receipt: _____

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

Page Subtotal

53.60

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

53.60

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

C-2010-069

1. Committee I. D. Number

2. Committee Name

Committee To Re-Elect Simone Lightfoot

3. Name and address of person or vendor to whom paid

4. Purpose (Required Information)

5. Date 6. Amount

Expenditure #1

Name Hess Printing

Address
201 Elm, Suite A
Wyandotte, MI 48192

☐ Fund Raiser

Purpose: T-Shirts

7-26-16

Date

\$ 556.50

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

Expenditure #2

Name Messenger Printing Service, Inc.

Address
20136 Ecorse Road
Taylor, MI 48130

☐ Fund Raiser

Purpose: Palm Cards

7-31-16

Date

\$ 980.50

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

Expenditure #3

Name Ann Arbor State Bank

Address
125 West William
Ann Arbor, MI 48104

☐ Fund Raiser

Purpose: Printed Checks

9-9-16

Date

\$ 20.53

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

Expenditure #4

Name Messenger Printing Service, Inc.

Address
20136 Ecorse Road
Taylor, MI 48130

☐ Fund Raiser

Purpose: Palm Cards

9-28-16

Date

\$ 980.50

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

Expenditure #5

Name PayPal

Address
2211 North First Street
San Jose, CA 95131

☐ Fund Raiser

Purpose: PayPal Fee

10-1-16

Date

\$ 6.10

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

Subtotal this page

2,544.13

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

C-2010-069

1. Committee I. D. Number

2. Committee Name

Committee To Re-Elect Simone Lightfoot

3. Name and address of person or vendor to whom paid

4. Purpose (Required Information)

5. Date

6. Amount

Expenditure #1

Name U. S. Postal Service

Address
2075 W. Stadium Blvd.
Ann Arbor, MI 48103-9998

Purpose: Stamps

10-11-16

Date

\$ 90.67

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

☐ Fund Raiser

Expenditure #2

Name Staples

Address
2601 Jackson Road
Ann Arbor, MI 48103

Purpose: Envelopes

10-11-16

Date

\$ 19.78

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

☐ Fund Raiser

Expenditure #3

Name Sawicki & Son

Address
1521 West Lafayette
Detroit, MI 48216

Purpose: Yard Signs

10-14-16

Date

\$ 628.05

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

☐ Fund Raiser

Expenditure #4

Name

Address

Purpose:

Date

\$

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

☐ Fund Raiser

Expenditure #5

Name

Address

Purpose:

Date

\$

Click Here for Memo Itemization Type

☐ Check box if this expenditure is payment of
debt or obligation reported on previous
statement

☐ Fund Raiser

Subtotal this page

738.50

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

3,282.63

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-069
2. Committee Name Committee To Re-Elect Simone Lightfoot

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
--	--	------------------------------------	---------------------------------------	--

Debt #1 Corp? ☐ Yes
Owed to or by:
Lightfoot, Simone
2733 Arrowwood Trail
Ann Arbor, MI 48105

4. Type: Mult Items

5. Date Debt Was Incurred:
8-8-2016

6. Original Amount of Debt:
\$ 2000.00

\$
\$
\$
\$
\$

\$ 0.00

\$ 2000.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Debt #2 Corp? ☐ Yes
Owed to or by:
Nelson, Glenn
1323 South Forest Avenue
Ann Arbor, MI 48104

4. Type: Mailing

5. Date Debt Was Incurred:
10-11-16

6. Original Amount of Debt:
\$ 110.45

\$
\$
\$
\$
\$

\$ 0.00

\$ 110.45

☐ FORGIVEN

If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Debt #3 Corp? ☐ Yes
Owed to or by:
Nelson, Glenn
1323 South Forest Avenue
Ann Arbor, MI 48104

4. Type: Yard Signs

5. Date Debt Was Incurred:
10-14-16

6. Original Amount of Debt:
\$ 628.05

\$
\$
\$
\$
\$

\$ 0.00

\$ 628.05

☐ FORGIVEN

If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

2,738.50

(Complete on last page of Schedule showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

2,738.50

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.