# 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 siby the treasurer (or designated record keeper) and candidate.	igned	3. This Statement covers From: 03	/01/2015 Mo Day Year	To: 10/	18/20: Mo Day `	
1. Committee I.D. Number		4. Candidate Last Name	First Na	me		M.I.
C-2012-027		Petersen	Sally			
C-2012-027	•	4a. Office Sought including District	# or Community Serv	ed (If appli	icable)	
2. Committee Name		Other - Ann Arbor Cit	У	S.		WA.
Elect Sally Hart Petersen to Cit Council	У	4b. County of Residence Washtenaw		7 <u>0</u>	7915 OCT	WA SHTE
5. Committee's Mailing Address		6. Treasurer's Name & Residential	Address	四至	12	₹. <b>11</b>
2976 Hickory Lane Ann Arbor, MI 48013		Brian Weisman 3900 Pe <b>n</b> berton Ann Arbor, MI 4810	)5	RK/REGIS	ت ا ا	YM COUNTY MI ILEO
Area Code and Phone				05 75	7 <i>F</i>	1,
If the address in this box is different from the commi mailing address on the Statement of Organization, n may be sent to this address by the filing official.		Area Code & Phone (734) · 945	-1452	±0.−€	پ	- M
7. Treasurer's Business Address		8. Designated Record Keeper's Nar	ne and Mailing Addre	ess (If the o	committe	e has a
3900 Pe <b>n</b> berton Ann Arbor, MI 48105		Designated Record Keeper)				
Area Code and Phone		Area Code & Phone				_
9. TYPE OF STATEMENT		uired ONLY if candidate is	9e. Dissolution	of Candi	date Co	ommittee
9a. ☑ Pre-Election OR 9b. ☐ Post-Election		on the ballot for the ent year:	By checking to outstanding of the candidate	lebt by the	commit	lee to
Pre-Election or Post Election Statement relates to:	_	July Quarterly	here by disch	narged and	l forgiver	n and no
□Primary		October Quarterly	The committee	e has no e	outstand	ing
☐Special			assets, owes outstanding o		es or nas	sany
☐ Convention	00 [	A way at Otatawant	Further, if the			
✓ General	9c. [	Annual Statement  Coverage Year	granted, that request for th			
☐School	9d.	]	Effective D	ate of Dis	solution	
☐ Caucus		Amendment to Campaign Statement (Complete item				
Date of Election, Convention, or Caucus  11/03/2015		9a, 9b, 9c or 9e to indicate which Statement is being amended)	Note: The disp must be report the Summary I	ed on Sch Page.	edule 1E	3 and
Verification: I\We certify that all reasonable dilige best of my\our knowledge and belief the contents an	ence was e true, a	sused in the preparation of this stateme ocurate and complete.	ent and attached sche	edules (if a	ny) and	to the
Current Treasurer or Designated Record Keeper Brian Weisman	<b>, -</b>	BHW	Date Date	e 10	/22/20	015
Type or Print Name		Signature	10.0 -			
Candidate Sally Petersen Type or Print Name		/ Cally To	HULLY Date	e 10	/22/2	015

#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

1. Committee I.D. Number

C-2012-027

### **SUMMARY PAGE**

2. Committee Name Elect Sally Hart Petersen to City Council

**CANDIDATE COMMITTEE** Column II Column I RECEIPTS Cumulative for this Election cycle This Period 3. Contributions (3a.) \$33,140.00 a. Itemized (Schedule 1A - Column 6) (3b.) NOT APPLICABLE b. Unitemized (less than \$20.01 each - no Schedule) (18.)\$33,140.00 (3c.)\$33,140.00 c. Subtotal of "Contributions" (19.) \$0.00 \$0.00 4. Other Receipts (Schedule 1A-1, Column 6) (4.) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (20.)\$33,140.00 (5.)\$33,140.00 (Add line 3c + Line 4) **IN-KIND CONTRIBUTIONS & EXPENDITURES** (21.) \$0.00 6. In-Kind Contributions (Schedule 1-IK, Column 7) \$0.00 \$0.00 (22.) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) **EXPENDITURES** 8. Expenditures \$27,411.21 a. Itemized (Schedule 1B, Column 6) (8a.) (8b.) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) (8c.) \$27,556.38 (23.)\$27,556.38 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) (10a.) (10b.) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS \$0.00 (11.) (Add Line 10a + Line 10b) **DEBTS AND OBLIGATIONS** 12. Debts and Obligations (12a.) \$5,000.00 a. Owed by the Committee (Schedule 1E) (12b.) b. Owed to the Committee (Schedule 1E) BALANCE STATEMENT 13. Ending Balance of last report filed (13.) \$1,523.12 (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period \$33,140.00 (Line 5, Total Contributions & Other Receipts - Column I) (14.) +(15.) = 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period \$27,556.38 (Add lines 9 and 11) 17. FNDING BALANCE \$7,106.74\* (Subtract line 16 from line 15)

<sup>\*</sup>If your ending balance is negative, please recheck your math.

# MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

# ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

C-2012-027

CANDIDATE COMMITTEE	2. Committee Name	Elect	-			
Enter contributor's name and address. If contribution is from an individu and middle initial. Check box to indicate if contribution is from a Political Independent Committee (PAC) Report all contributions regardless of am	Committee or an	name,	6. Amount	Cumulative Cycle for E Contributo	Each or (Through	

· · · · · · · · · · · · · · · · · · ·					
3. Name & Address	PAC Receipt? YES	4. DATE OF RECEIPT	10/16/2015	_	
Allemang, Michael 3465 Vintage Valley Ann Arbor, MI 48105	Road			\$100.00	\$100.00
5. If over \$100.00 cumulative	, please provide:				
Occupation		Employer		<u>.</u>	
Business Address					
Type of Contribution: 🔽 Di	irect Loan from a p	erson Fund Raiser			- Language
3. Name & Address	PAC Receipt? YES	4. DATE OF RECEIPT	04/07/2015	_	
Allen, Peter					
2224 Applewood Ct Ann Arbor, MI 48103	-2304			\$100.00	\$100.00
E lá ouros \$400 00 aumulativa	nloseo provido:				
5. If over \$100.00 cumulative	, piedse provide.	Employer			
Occupation Business Address		Linployor			
	irect Loan from a p	erson			
3.			NE /22 /2015		
Name & Address	PAC Receipt? YES	4. DATE OF RECEIPT _	05/23/2015	_	
Anderson, Lizann					
191 Orchard Hills C				4246 64	\$200.00
Ann Arbor, MI 48104	-1070			\$200.00	\$200.00
5. If over \$100.00 cumulative	, please provide:				
Occupation Self Employe		Employer Self Emplo	oyed		
Business Address 3660 Pla	aza Dr Ste 4 Ann A	rbor, MI 48108-1685			
Type of Contribution: VD	irect Loan from a p	erson Fund Raiser			<u>~</u>
3.	PAC Receipt? YES	4. DATE OF RECEIPT	04/22/2015		
Name & Address					
Ause, Bob 1821 Sheridan Dr					
Ann Arbor, MI 48104	-4055			\$200.00	\$200.00
5. If over \$100.00 cumulative	a. please provide:				
Occupation Radiologist	A bronza broninas	Employer Self Empl	oyed		
Business Address 5301 E	Huron River Dr Ann				
<del></del>	irect  Loan from a p	r			

Page Subtotal

\$600.00

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

\$33,140.00

# MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

# SCHEDULE 1A

1. Committee I.D. Number

C-2012-027

CANDIDATE COMMITTEE

2. Committee Name Elect Sally Hart Petersen to City Council

Co

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

3. PAC Receipt? TYPS 4. DATE OF RECEIPT 04/22/2015

3.	PAC Receipt? YES	4. DATE OF RECEIPT	04/22/2015	_	
Name & Address					
Austin, John 817 Berkshire Rd					
Ann Arbor, MI 48104	4-2630			\$75.00	\$75.00
,					•
5. If over \$100.00 cumulative	e, please provide:				
Occupation		Employer			
Business Address					
Type of Contribution:	Direct Loan from a pe	erson Fund Raiser	ľ		Auto-an-
3.	PAC Receipt? TYES	4. DATE OF RECEIPT	04/19/2015		
Name & Address				_	
Bacon, Grace					
3911 Waldenwood Dr Ann Arbor, MI 4810	5-3008			\$100.00	\$100.00
211201 HI 4010			<u> </u>	+ + + + + + + + + + + + + + + + + + + +	,
5. If over \$100.00 cumulativ	e, please provide:				
Occupation		Employer			
Business Address	-				
Type of Contribution:	Direct Loan from a pe	erson	T		
3.	PAC Receipt? YES	4. DATE OF RECEIPT	10/06/2015		
3. Name & Address	PAC Receipt? YES	4. DATE OF RECEIPT	10/06/2015		
Name & Address Blessing, Thomas	PAC Receipt? YES	4. DATE OF RECEIPT	10/06/2015		
Name & Address Blessing, Thomas 1124 Brooks Street	_	4. DATE OF RECEIPT	10/06/2015	\$150.00	\$150.00
Name & Address Blessing, Thomas	_	4. DATE OF RECEIPT	10/06/2015	\$150.00	\$150.00
Name & Address Blessing, Thomas 1124 Brooks Street	3	4. DATE OF RECEIPT	10/06/2015	\$150.00	\$150.00
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulativ Occupation Attorney	3 ve, please provide:	Employer Universi	10/06/2015 — ty of Michigan	\$150.00	\$150.00
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810	3 ve, please provide:	Employer Universi		\$150.00	\$150.00
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulativ Occupation Attorney Business Address 500 S S	3 ve, please provide:	Employer Universi	ty of Michigan	\$150.00	\$150.00
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulativ Occupation Attorney Business Address 500 S S	3  Ye, please provide:  State St Ann Arbor,  Direct Loan from a p	Employer Universi	ty of Michigan	\$150.00	\$150.00
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810  5. If over \$100.00 cumulativ Occupation Attorney Business Address 500 S S Type of Contribution:	3 re, please provide: State St Ann Arbor,	Employer Universi MI 48109-1382 erson ∐Fund Raise	ty of Michigan	\$150.00	\$150.00
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulativ Occupation Attorney Business Address 500 S S Type of Contribution:	3  Ye, please provide:  State St Ann Arbor,  Direct  Loan from a proper PAC Receipt?  YES	Employer Universi MI 48109-1382 erson ∐Fund Raise	ty of Michigan	\$150.00	\$150.00
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulativ Occupation Attorney Business Address 500 S S Type of Contribution:   Name & Address Bobrin, Janis 3465 Vintage Valle	3  Ye, please provide:  State St Ann Arbor,  Direct Loan from a property TYES  Y Rd	Employer Universi MI 48109-1382 erson ∐Fund Raise	ty of Michigan		
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulativ Occupation Attorney Business Address 500 S S Type of Contribution:	3  Ye, please provide:  State St Ann Arbor,  Direct Loan from a property TYES  Y Rd	Employer Universi MI 48109-1382 erson ∐Fund Raise	ty of Michigan	\$150.00	\$150.00 \$500.00
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulativ Occupation Attorney Business Address 500 S S Type of Contribution:   Name & Address Bobrin, Janis 3465 Vintage Valle	3  Te, please provide:  State St Ann Arbor,  Direct  Loan from a proper PAC Receipt? YES  y Rd 5-2544	Employer Universi MI 48109-1382 erson ∐Fund Raise	ty of Michigan		
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulativ Occupation Attorney Business Address 500 S S Type of Contribution:   3.  Name & Address Bobrin, Janis 3465 Vintage Valle Ann Arbor, MI 4810:	3  Te, please provide:  State St Ann Arbor,  Direct  Loan from a proper PAC Receipt? YES  y Rd 5-2544	Employer Universi MI 48109-1382 erson ∐Fund Raise	ty of Michigan		
Name & Address Blessing, Thomas 1124 Brooks Street Ann Arbor, MI 4810:  5. If over \$100.00 cumulative Occupation Attorney Business Address 500 S S Type of Contribution:   3.  Name & Address Bobrin, Janis 3465 Vintage Valle Ann Arbor, MI 4810:  5. If over \$100.00 cumulative	3  Ye, please provide:  State St Ann Arbor,  Direct Loan from a property TYES  PAC Receipt? TYES  y Rd 5-2544  Ye, please provide:	Employer Universi MI 48109-1382 Person Fund Raise 4. DATE OF RECEIPT	er 03/29/2015		

Page Subtotal \$825.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

Council

Cumulative for Election

Cycle for Each

Contributor (Through date of receipt)

3.	PAC Rec	eipt? TYES	4. DATE	OF RECEIPT	04/18/2015		
Name & Address						_	
Brancheau, Monica 54795 Grenelefe C	ir E						
South Lyon, MI 48						\$100.00	\$100.00
5. If over \$100.00 cumulat	ive, please p	rovide:					
Occupation			Employer				
Business Address							
Type of Contribution:	]Direct	Loan from a pe	erson	✓ Fund Raiser			
3.	PAC Rec	ceipt? YES	4. DATE	OF RECEIPT	05/26/2015	_	
Name & Address				_			
Buatti, Carol							
2988 Hickory Ln Ann Arbor, MI 481	04-2865					\$50.00	\$50.00
					-	<u> </u>	
5. If over \$100.00 cumulat	live, please p	rovide:					
Occupation			Employer				
Business Address							
Type of Contribution:	/ Direct	Loan from a po	erson	Fund Raiser			A CONTRACTOR OF THE CONTRACTOR
3.	PAC Red	ceipt? TYES	4. DATE	OF RECEIPT	09/21/2015		
Name & Address						_	
Caswell, Elizabet							
5002 Quincy Court Saline, MI 48176	-					\$100.00	\$100.00
DULLING HI TOLIO							
5. If over \$100.00 cumulat	tive, please p	provide:					
Occupation			Employer				
Business Address						-	
Type of Contribution:	/ Direct	Loan from a p	erson	Fund Raiser	<u> </u>		<u> </u>
3.							
	PAC Re	ceipt? YES	4. DATE	OF RECEIPT	09/16/2015		
Name & Address	PAC Re	ceipt?  YES	4. DATE	OF RECEIPT _	09/16/2015	_	
Cocoros, Deb	PAC Re	ceipt?  YES	4. DATE	OF RECEIPT _	09/16/2015	_	
Cocoros, Deb 1725 glenwood rd		ceipt? YES	4. DATE	OF RECEIPT _	09/16/2015	\$100.00	\$100.00
Cocoros, Deb		ceipt?  YES	4. DATE	OF RECEIPT _	09/16/2015	\$100.00	\$100.00
Cocoros, Deb 1725 glenwood rd	104		4. DATE	OF RECEIPT _	09/16/2015	\$100.00	\$100.00
Cocoros, Deb 1725 glenwood rd ann arbor, MI 481	104		4. DATE	-	09/16/2015	\$100.00	\$100.00
Cocoros, Deb 1725 glenwood rd ann arbor, MT 481 5. If over \$100.00 cumula	104			-	09/16/2015	\$100.00	\$100.00
Cocoros, Deb 1725 glenwood rd ann arbor, MI 481  5. If over \$100.00 cumula Occupation Business Address	104		Employer	-	09/16/2015	\$100.00	\$100.00

Page Subtotal

\$350.00

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

\$33,140.00

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City
Council

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

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

3. PAC Receipt? YES 4. DATE OF RECEIPT 05/23/2015		
Name & Address		
Cohen, Harry		
3140 W Dobson Pl Ann Arbor, MI 48105-2580	\$1,000.00	\$1,000.00
Ami Albol, MI 40103 2000	71,000.00	41,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Owner Employer Black Pearl		
Business Address 302 S Main St Ann Arbor, MI 48104-2108		
Type of Contribution: ✓ Direct		
3. PAC Receipt? YES 4. DATE OF RECEIPT 04/22/2015		
Name & Address		
Cohen, Jeff		
2406 Vinewood Blvd Ann Arbor, MI 48104-2768	\$350.00	\$350.00
Alli Albor, Mr 40104 2700		7000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Advisor Employer Northwestern Mutual		
Business Address 777 E Eisenhower Pkwy Ste 220 Ann Arbor, MI 48108-3273		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015		
Name & Address		
Cooper, Howard		
2405 Londonderry Rd	\$250.00	\$250.00
	\$250.00	\$250.00
2405 Londonderry Rd Ann Arbor, MI 48104-4015	\$250.00	\$250.00
2405 Londonderry Rd	\$250.00	\$250.00
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:	\$250.00	\$250.00
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:  Occupation retired Employer retired	\$250.00	\$250.00
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:  Occupation retired Employer retired  Business Address 2405 Londonderry Rd Ann Arbor, MI 48104-4015  Type of Contribution: Direct Loan from a person Fund Raiser	\$250.00	\$250.00
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide: Occupation retired Employer retired Business Address 2405 Londonderry Rd Ann Arbor, MI 48104-4015 Type of Contribution: Direct Loan from a person Fund Raiser	\$250.00	\$250.00
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:  Occupation retired Employer retired  Business Address 2405 Londonderry Rd Ann Arbor, MI 48104-4015  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/01/2015  Name & Address Cooper, Richard	\$250.00	\$250.00
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:  Occupation retired Employer retired  Business Address 2405 Londonderry Rd Ann Arbor, MI 48104-4015  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/01/2015  Name & Address  Cooper, Richard 1808 Linwood Ave		
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:  Occupation retired Employer retired  Business Address 2405 Londonderry Rd Ann Arbor, MI 48104-4015  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/01/2015  Name & Address Cooper, Richard	\$250.00	\$250.00 \$100.00
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:  Occupation retired Employer retired  Business Address 2405 Londonderry Rd Ann Arbor, MI 48104-4015  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/01/2015  Name & Address  Cooper, Richard 1808 Linwood Ave		
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:  Occupation retired Employer retired  Business Address 2405 Londonderry Rd Ann Arbor, MI 48104-4015  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/01/2015  Name & Address  Cooper, Richard 1808 Linwood Ave Ann Arbor, MI 48103-3663		
2405 Londonderry Rd Ann Arbor, MI 48104-4015  5. If over \$100.00 cumulative, please provide:  Occupation retired Employer retired  Business Address 2405 Londonderry Rd Ann Arbor, MI 48104-4015  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/01/2015  Name & Address  Cooper, Richard 1808 Linwood Ave Ann Arbor, MI 48103-3663  5. If over \$100.00 cumulative, please provide:		

Page Subtotal

\$1,700.00

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

\$33,140.00

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS **SCHEDULE 1A CANDIDATE COMMITTEE**

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

Cumulative for Election

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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	Cycle for Each Contributor (Through date of receipt)
3. PAC Receipt? YES 4. DATE OF RECEIPT 04/14/2015	<del></del>	
Name & Address		
Corey, James 6007 gabrielle ave		
ann arbor, MI 48103	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Development Employer University of Michigan		1
Business Address 3003 S State St Ann Arbor, MI 48109-1276	<del></del>	
Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 09/18/2015		
Name & Address	<u>.</u>	
Corey, James		
6007 gabrielle ave ann arbor, MI 48103	\$100.00	\$200.00
am albor, m solo	4100.00	
5. If over \$100.00 cumulative, please provide:		
Occupation Development Employer University of Michigan		
Business Address 3003 S State St Ann Arbor, MI 48109-1276		
Type of Contribution: ✓ Direct		
3. PAC Receipt? TYES 4. DATE OF RECEIPT 04/28/2015		
Name & Address		
Darling, Martha		
3340 E Dobson Pl	¢1 000 00	¢1 000 00
Ann Arbor, MI 48105-2583	\$1,000.00	\$1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation retired Employer Retired		
Business Address 3340 E Dobson Pl Ann Arbor, MI 48105-2583	•	
Type of Contribution: Direct Loan from a person Fund Raiser	<del></del>	
3. PAC Receipt? YES 4. DATE OF RECEIPT 04/19/2015		
Name & Address		
Dart, Abby		
1331 Sheehan Ave	454.00	650.00
1 Ann Arbor, MI 48104-3837	\$50.00	\$50.00
******		

Page Subtotal

\$1,250.00

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

✓ Fund Raiser

Employer

Loan from a person

\$33,140.00

Enter this total on line 3a of Summary Page.

Occupation Business Address

Type of Contribution:

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

Direct

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

Council

Council

Council

Council

Conditive for Election

Cycle for Each

Contributor (Through date of receipt)

			<del></del>		
3. Name & Address	PAC Receipt? YES	4. DATE OF RECEIPT	04/19/2015	-	
Davidson, Judith					
730 Heather Way					
Ann Arbor, MI 4810	04-2732		_	\$100.00	\$100.00
	h				
5. If over \$100.00 cumulati	ive, please provide:	Employee			
Occupation		Employer			
Business Address	7				
Type of Contribution:	Direct Loan from a pe	erson  Fund Raiser			
3.	PAC Receipt? YES	4. DATE OF RECEIPT	05/23/2015	~	:
Name & Address		_			
Deatrick, Don					
4879 Lone Oak Ct Ann Arbor, MI 481	08-8574			\$100.00	\$100.00
					<u> </u>
5. If over \$100.00 cumulat	ive, please provide:				
Occupation		Employer			
Business Address				<del>_</del>	
Type of Contribution:	Direct Loan from a p	erson Fund Raiser			
3.	PAC Receipt? TYES	4. DATE OF RECEIPT	04/22/2015		<del></del> -
Name & Address	17.0 (000)pt: [] 1EO			-	
DeRose, Elizabeth					
989 Aberdeen Dr				6100 00	6100 00
Ann Arbor, MI 481	V4-280/			\$100.00	\$100.00
5. If over \$100.00 cumulat	ive, please provide:				
Occupation	· · · · · · · · · · · · · · · · · · ·	Employer			
Business Address				<u></u>	
Type of Contribution:	Direct Loan from a p	person		-	
3.	PAC Receipt? YES	4. DATE OF RECEIPT	09/13/2015		
Name & Address	1 Vo Decembris T LEO	, J. HE OF RECENT	22, 20, 2020	_	
Dittmar, Amy					
1004 Spruce Dr	0.4			\$100.00	\$100.00
Ann Arbor, MI 481	· V ¬			4100.00	7100.00
5. If over \$100.00 cumulat	tive, please provide:				
Occupation		Employer			
Business Address					
<del></del>	Direct Loan from a p	nerson			

Page Subtotal

\$400.00

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

\$33,140.00

#### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report all contributions regardless of amount.

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

3.	PAC Receipt? TYES	4. DATE OF RECEIPT	04/17/2015		
Name & Address	. <u>.</u>	_		<del></del>	
Dixon, Mark	T				
1354 Wolverhampton Ann Arbor, MI 48105				\$100.00	\$100.00
THE TENOTY PR. 40100	·				·
5. If over \$100.00 cumulative	e, please provide:				
Occupation Engineer		Employer Ford Moto	r	<del></del>	
Business Address 1 Ameri	can Rd Dearborn, MI	48126-2701			
Type of Contribution:	Direct Loan from a pe	erson  Fund Raiser			
3.	PAC Receipt? YES	4. DATE OF RECEIPT	09/20/2015		
Name & Address		-		_	
Dixon, Mark	T				
1354 Wolverhampton Ann Arbor, MI 48105				\$150.00	\$250.00
THE PEROLI HE TOTAL					
5. If over \$100.00 cumulative	e, please provide:				
Occupation Engineer		Employer Ford Moto	r	<del></del> ;	
Business Address 1 Ameri	can Rd Dearborn, MI	48126-2701			
Type of Contribution:	Direct Loan from a pe	erson 🗸 Fund Raiser			
3.		4 DATE OF DECEMPT	04/22/2015		
J.	PAC Receipt? YES	4. DATE OF RECEIPT	04/22/2015		
Name & Address	PAC Receipt? []YES	4. DATE OF RECEIPT	04/22/2015	<del></del>	
Name & Address Dunfion, William	PAC Receipt? [_]YES	4, DATE OF RECEIPT	04/22/2015	_	
Name & Address Dunfion, William 500 Amherst Cir		4. DATE OF RECEIPT	04/22/2013	\$100.00	\$100.00
Name & Address Dunfion, William		4. DATE OF RECEIPT	04/22/2013	\$100.00	\$100.00
Name & Address Dunfion, William 500 Amherst Cir	366	4. DATE OF RECEIPT		\$100.00	\$100.00
Name & Address Dunfion, William 500 Amherst Cir Saline, MI 48176-13	366	Employer	04/22/2013	\$100.00	\$100.00
Name & Address  Dunfion, William  500 Amherst Cir  Saline, MI 48176-13  5. If over \$100.00 cumulativ	366	Employer		\$100.00	\$100.00
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation  Business Address	366	Employer		\$100.00	\$100.00
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation  Business Address	366 e, please provide:	Employer		\$100.00	\$100.00
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation  Business Address Type of Contribution:	366 re, please provide: Direct ☐Loan from a pa	Employer erson ☑Fund Raiser		\$100.00	\$100.00
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation  Business Address Type of Contribution:	366 re, please provide: Direct ☐Loan from a pa	Employer erson ☑Fund Raiser		\$100.00	\$100.00
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation Business Address Type of Contribution:	366  Te, please provide:  Direct Loan from a portugation of the provides of th	Employer erson ☑Fund Raiser		\$100.00	\$100.00
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation  Business Address Type of Contribution:	366  Te, please provide:  Direct Loan from a portugation of the provides of th	Employer erson ☑Fund Raiser		-	
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation Business Address Type of Contribution:	366  Te, please provide:  Direct	Employer erson ☑Fund Raiser		-	
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation Business Address Type of Contribution:	366  Te, please provide:  Direct	Employer erson ☑Fund Raiser		-	
Name & Address  Dunfion, William 500 Amherst Cir Saline, MI 48176-13  5. If over \$100.00 cumulativ Occupation Business Address Type of Contribution:	366  Te, please provide:  Direct	Employer erson Fund Raiser 4. DATE OF RECEIPT	09/12/2015	-	

Page Subtotal \$450.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

#### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS

and middle initial. Check box to indicate if contribution is from a Political Committee or an

1. Committee 1.D. Number

C-2012-027

Contributor (Through

SCHEDULE 1A	2. Committee Name	Elect Sally H	Mart Petersen to City
CANDIDATE COMMITTEE		Council 6 Amou	Completion for Floring
Enter contributor's name and address. If contribution is from an individual	ual, enter last name, first al Committee or an	name,	Cycle for Each

Independent Committee (PAC) Report all contributions regardless of amount. date of receipt) 4. DATE OF RECEIPT 10/11/2015 3. PAC Receipt? YES Name & Address Friedman, Richard 811 Berkshire Rd. \$100.00 \$100.00 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Employer Occupation Business Address Fund Raiser Loan from a person Type of Contribution: ✓ Direct 4. DATE OF RECEIPT 05/23/2015 PAC Receipt? YES Name & Address Geer, Michael 950 High School Way \$100.00 \$100.00 Apt 3214 Mountain View, CA 94041-1968 5. If over \$100.00 cumulative, please provide: Employer Occupation **Business Address** Fund Raiser Type of Contribution: Loan from a person ✓ Direct 4. DATE OF RECEIPT 10/12/2015 PAC Receipt? YES Name & Address GERE, Brewster 2106 Vinewood Blvd \$100.00 \$100.00 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Employer Occupation Business Address Fund Raiser Type of Contribution: Loan from a person ✓ Direct 08/28/2015 4. DATE OF RECEIPT 3. PAC Receipt? YES Name & Address Gielow, Curtis 3412 W Clubview Ct \$50.00 \$50.00 Mequon, WI 53092-5101 5. If over \$100.00 cumulative, please provide: Employer Occupation

Page Subtotal

\$350.00

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

Fund Raiser

Loan from a person

\$33,140.00

Enter this total on line 3a of Summary Page.

Business Address

Type of Contribution:

✓ Direct

#### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

CANDIDATE COMMITTEE

2. Committee Name

Elect Sally Hart Petersen to City

Council

Council

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

2. Committee Name

Elect Sally Hart Petersen to City

Council

Cumulative for Election

Cycle for Each

Contributor (Through date of receipt)

-3						
3. Name & Address	PAC Receipt? Y	ES 4. DATE	OF RECEIPT _	08/17/2015	_	
Giordani, Anne 1429 Kearney Rd Ann Arbor, MI 4810	)4-4061				\$50.00	\$50.00
5. If over \$100.00 cumulati	ive, please provide:	- •				
Occupation		Employer				
Business Address			<del></del>			
	Direct Loan fro	m a person [	Fund Raiser		, part	
3.	PAC Receipt?	ES 4. DATE	OF RECEIPT _	04/18/2015	_	
Name & Address			_			
Glusac, Kristina 885 Greenhills Dr					•	
Ann Arbor, MI 4816	05-2719		•		\$50.00	\$50.00
				<del></del>		_
5. If over \$100.00 cumulati	ive, piease provide:	Emalares				
Occupation		Employer ——				
Business Address	lpi-ri 🖂.	m o nor	✓ Fund Raiser		-	
Type of Contribution:						
3.				00 104 1007 5		
	PAC Receipt? Y	ES 4. DATE	OF RECEIPT _	03/31/2015	_	•
Name & Address		ES 4. DATE	OF RECEIPT _	03/31/2015	_	·
		ES 4. DATE	OF RECEIPT _	03/31/2015	_	
Name & Address Gronemeyer, Robers	t and Jessica	ES 4. DATE	OF RECEIPT _	03/31/2015	\$50.00	\$50.00
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 481	t and Jessica	ES 4. DATE	OF RECEIPT _	03/31/2015	\$50.00	\$50.00
Name & Address Gronemeyer, Robert 700 Miller Ave	t and Jessica	'ES 4. DATE  Employer	_	03/31/2015	\$50.00	\$50.00
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4816  5. If over \$100.00 cumulations	t and Jessica	-	_	03/31/2015	\$50.00	\$50.00
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4816  5. If over \$100.00 cumulate Occupation Business Address	t and Jessica 03-3336 live, please provide:	-	_		\$50.00	\$50.00
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4810  5. If over \$100.00 cumulati Occupation Business Address	t and Jessica  03-3336  live, please provide:	Employer om a person			\$50.00	\$50.00
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4816  5. If over \$100.00 cumulat Occupation Business Address Type of Contribution:	t and Jessica 03-3336 ive, please provide:	Employer om a person	Fund Raiser		\$50.00	\$50.00
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4816  5. If over \$100.00 cumulati Occupation Business Address Type of Contribution:   3.  Name & Address Gunn, Leah 2115 Nature Cove Apt 207	t and Jessica 03-3336  ive, please provide:  Direct Loan from PAC Receipt?	Employer om a person	Fund Raiser		\$50.00	\$50.00 \$100.00
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4814  5. If over \$100.00 cumulate Occupation Business Address Type of Contribution:  3.  Name & Address Gunn, Leah 2115 Nature Cove Apt 207 Ann Arbor, MI 481	t and Jessica  03-3336  ive, please provide:  Direct Loan from  PAC Receipt? Y  Ct  04-4986	Employer om a person	Fund Raiser		-	
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4810  5. If over \$100.00 cumulat Occupation Business Address Type of Contribution:   3.  Name & Address Gunn, Leah 2115 Nature Cove Apt 207 Ann Arbor, MI 481  5. If over \$100.00 cumulat	t and Jessica  03-3336  ive, please provide:  Direct Loan from  PAC Receipt? Y  Ct  04-4986	Employer om a person /ES 4. DATE	Fund Raiser		-	
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4810  5. If over \$100.00 cumulat Occupation Business Address Type of Contribution:   3.  Name & Address Gunn, Leah 2115 Nature Cove Apt 207 Ann Arbor, MI 481  5. If over \$100.00 cumulat Occupation	t and Jessica  03-3336  ive, please provide:  Direct Loan from  PAC Receipt? Y  Ct  04-4986	Employer om a person	Fund Raiser		-	
Name & Address Gronemeyer, Robert 700 Miller Ave Ann Arbor, MI 4816  5. If over \$100.00 cumulat Occupation Business Address Type of Contribution:  3.  Name & Address Gunn, Leah 2115 Nature Cove Apt 207 Ann Arbor, MI 481  5. If over \$100.00 cumulat Occupation Business Address	t and Jessica  03-3336  ive, please provide:  Direct Loan from  PAC Receipt? \( \)  Ct  04-4986  tive, please provide:	Employer om a person /ES 4. DATE	Fund Raiser	04/01/2015	-	

Page Subtotal

\$250.00

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

\$33,140.00

#### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

CANDIDATE COMMITTEE	Council	
Enter contributor's name and address. If contribution is from an individual, e and middle initial. Check box to indicate if contribution is from a Political Col Independent Committee (PAC) Report all contributions regardless of amoun	nter last name, first name, mmittee or an	Amount Cumulative for Election Cycle for Each Contributor (Through date of receipt)

	PAC Receipt? YES	4. DATE OF RECEIPT	10/12/2015		
Name & Address					
Hagerup, Will 700 E Briarwood Pl					· ·
Milwaukee, WI 53217				\$50.00	\$50.00
E lé over édan an auminimétres	niesee provider				
5. If over \$100.00 cumulative,	, hiense hi Asine.	Employer			j
Occupation Business Address					
· · · · · · · · · · · · · · · · · · ·	rect Loan from a pe	erson Fund Raiser			•
			0.4.10.2.10.0.7.		
	PAC Receipt? TYES	4. DATE OF RECEIPT	04/21/2015		
Name & Address					
Hastie, Larry 3000 Glazier Way					
Apt 160				\$250.00	\$250.00
Ann Arbor, MI 48105-			-		
5. If over \$100.00 cumulative,	, please provide:				
Occupation Investment A			t Income Soluti	Ons	
Business Address 455 E Ei			48108-3324		
Type of Contribution: Dir	rect Loan from a pe	erson 🗸 Fund Raiser	<del></del>		
3.	PAC Receipt? YES	4. DATE OF RECEIPT	03/27/2015	_	
Name & Address	<u>—</u>	<del>-</del> -			
Hauptman, Jeff					
611 Stratford Dr Ann Arbor, MI 48104-	-2745			\$500.00	\$500.00
THE TYPOST, LIT SOTOS	•				
5. If over \$100.00 cumulative	, please provide:				
Occupation CEO			operty Manageme	ent ——	
Business Address 210 S 5t	th Ave Ann Arbor Ar	nn Arbor, MI 48104-2	2216		
Type of Contribution: 🗸 Di					
3.	PAC Receipt? YES	4. DATE OF RECEIPT	09/20/2015		
Name & Address		_		_	
Herzig, David					
3540 Windemere Dr	_2042			\$200.00	\$200.00
Ann Arbor, MI 48105	-2042			γ200.00	7200100
5. If over \$100.00 cumulative	, please provide:				
Occupation Retired	• •	Employer Retired			
Business Address 3540 Wir	ndemere Dr Ann Arbo	or, MI 48105-2842			
<del></del> -	irect Loan from a p				

Page Subtotal

\$1,000.00

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

\$33,140.00

#### **BUREAU OF ELECTIONS**

#### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE**

C-2012-027

ITEMIZED CONTRIBUTIONS	1. Committee I.D. Number			
SCHEDULE 1A CANDIDATE COMMITTEE	2. Committee Name	Elect		Petersen to City
Enter contributor's name and address. If contribution is from an individual and middle initial. Check box to indicate if contribution is from a Political Independent Committee (PAC) Report all contributions regardless of	Committee or an		6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)

PAC Receipt? YES 4. DATE OF RECEIPT 08/31/2015		
Name & Address		
Hiniker, Jerome and Mary 2989 Hickory Ln		
Ann Arbor, MI 48104-2840	\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Retired		
Business Address 2989 Hickory Ln Ann Arbor, MI 48104-2840		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		·
3. PAC Receipt? TYES 4. DATE OF RECEIPT 08/31/2015 Name & Address		
Hoffer, Carol 22 Haverhill Ct		
Ann Arbor, MI 48105-1407	\$25.00	\$25.00
		<del></del> -
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		•
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 07/13/2015		
Name & Address		
Hogikyan, Claire		
1011 Spruce Drive 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	#a	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/19/2015		
Name & Address		
Huget, Lesa	•	
500 Barton Shore Drive	\$250.00	\$250.00
Ann Arbor, MI 48105	<u>پر ۵۵۰٬۵۵</u>	7230,00
5. If over \$100.00 cumulative, please provide:		
Occupation Retied Employer Retired		
Business Address 500 Barton Shore Dr Ann Arbor, MI 48105-1020		
Type of Contribution:   ✓ Direct Loan from a person Fund Raiser	180	

Page Subtotal \$575.00 Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

#### **BUREAU OF ELECTIONS**

#### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE**

C-2012-027 1 Committee LD, Number

II LIMIZED COMPANDO HOME	1. Committee i.b. Number			
SCHEDULE 1A CANDIDATE COMMITTEE	2. Committee Name	Elect		Petersen to City
Enter contributor's name and address. If contribution is from an individu and middle initial. Check box to indicate if contribution is from a Political Independent Committee (PAC) Report all contributions regardless of am	Committee or an		6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3.	PAC Receip	ot? TYES	4. DATE	OF RECEIPT	04/20/201	5	
Name & Address	·			-			
Ireland, Patty							
356 Ausable Pl Ann Arbor, MI 48	104-1810					\$50.00	\$50.00
AIII ALDOL, MI 40	101 1010	•				400.00	
5. If over \$100.00 cumul	ative, please pro	vide:					
Occupation			Employer			<u></u>	
Business Address							
Type of Contribution:	Direct	Loan from a pe	erson	✓ Fund Raiser	1		
3.	PAC Recei	pt? ☐YES	4. DATE	OF RECEIPT	07/30/201	.5	
Name & Address	1 : 12 : 12 001			•		<del></del>	
Jones, Carrie							
7386 Laprairie I Ann Arbor, MI 48						\$100.00	\$100.00
ARII AIDOI, MI 40	,103 0000					7200.00	
5. If over \$100.00 cumul	lative, please pro	vide:					
Occupation			Employer			<del>.</del>	
Business Address							
Type of Contribution:	✓ Direct	Loan from a pe	erson	Fund Raise	r		
3.	PAC Recei	pt? TYES	4. DATE	OF RECEIPT	04/19/201	.5	
3. Name & Address	PAC Recei	pt?  YES	4. DATE	OF RECEIPT	04/19/201	.5	
Name & Address Kerry, Karen		pt?	4. DATE	OF RECEIPT	04/19/201	.5	
Name & Address Kerry, Karen 3031 Cedarbrook	Rd	pt? ∐YES	4. DATE	OF RECEIPT	04/19/201		\$200.00
Name & Address Kerry, Karen	Rd	pt? []YES	4. DATE	OF RECEIPT	04/19/201	\$200.00	\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook	Rd 3105-3406	_	4. DATE	OF RECEIPT	04/19/201		\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48	Rd 3105-3406	_	4. DATE		04/19/201	\$200.00	\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48 5. If over \$100.00 cumul	Rd 3105–3406 lative, please pro	vide:	Employer	Karen Ke	rry DDS, PLC	\$200.00	\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist	Rd 3105-3406 lative, please pro	vide:	Employer Ann Arbo	Karen Ke	erry DDS, PLC 5-2555	\$200.00	\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist Business Address 3250	Rd 3105-3406  lative, please pro Plymouth Ro	vide: d Ste 104 P ]Loan from a pa	Employer Ann Arbo erson	Karen Ke	erry DDS, PLC 5-2555	\$200.00	\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist Business Address 3250 Type of Contribution:	Rd 3105-3406  lative, please pro Plymouth Ro	vide: d Ste 104 P	Employer Ann Arbo erson	Karen Ke r, MI 4810 ☑Fund Raise	rry DDS, PLC 5-2555	\$200.00	\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist Business Address 3250 Type of Contribution: 3. Name & Address Ketelaar, Dan	Rd 3105-3406  lative, please pro Plymouth Ro Direct PAC Recei	vide: d Ste 104 P ]Loan from a pa	Employer Ann Arbo erson	Karen Ke r, MI 4810 ☑Fund Raise	rry DDS, PLC 5-2555	\$200.00	\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist Business Address 3250 Type of Contribution: 3. Name & Address Ketelaar, Dan 225 S. Ashley St	Rd 3105-3406  lative, please pro Plymouth Ro Direct PAC Recei	vide: d Ste 104 P ]Loan from a pa	Employer Ann Arbo erson	Karen Ke r, MI 4810 ☑Fund Raise	rry DDS, PLC 5-2555	\$200.00	
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist Business Address 3250 Type of Contribution: 3. Name & Address Ketelaar, Dan	Rd 3105-3406  lative, please pro Plymouth Ro Direct PAC Recei	vide: d Ste 104 P ]Loan from a pa	Employer Ann Arbo erson	Karen Ke r, MI 4810 ☑Fund Raise	rry DDS, PLC 5-2555	\$200.00	\$200.00
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist Business Address 3250 Type of Contribution: 3. Name & Address Ketelaar, Dan 225 S. Ashley St Ann Arbor, MI 48	Rd 3105-3406  lative, please pro Plymouth Ro Direct PAC Recei	vide:  1 Ste 104 P  Loan from a pe  pt? \( YES\)	Employer Ann Arbo erson	Karen Ke r, MI 4810 ☑Fund Raise	rry DDS, PLC 5-2555	\$200.00	
Name & Address Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist Business Address 3250 Type of Contribution: 3. Name & Address Ketelaar, Dan 225 S. Ashley St	Rd 3105-3406  lative, please pro Plymouth Ro Direct PAC Receives	vide:  1 Ste 104 P  Loan from a pe  pt? \( YES\)	Employer Ann Arbo erson	Karen Ker, MI 4810 Fund Raise OF RECEIPT	rry DDS, PLC 5-2555	\$200.00	
Name & Address  Kerry, Karen 3031 Cedarbrook Ann Arbor, MI 48  5. If over \$100.00 cumul Occupation Dentist Business Address 3250 Type of Contribution: 3.  Name & Address Ketelaar, Dan 225 S. Ashley St Ann Arbor, MI 48  5. If over \$100.00 cumul	Rd 3105-3406  lative, please pro Plymouth Ro Direct PAC Receive.	vide:  1 Ste 104 A  Loan from a pe  pt? YES	Employer Ann Arbo erson  4. DATE	Karen Ker, MI 4810 Fund Raise OF RECEIPT	erry DDS, PLC 5-2555 r 07/23/201	\$200.00	

Page Subtotal \$550.00 \$33,140.00

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

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

Council

Cumulative for Election

Cycle for Each

Contributor (Through date of receipt)

3. PAC Receipt? YES 4. DATE OF RECEIPT 04/27/2015		
Name & Address		
Kinnear, Tom 2651 Hawthorne Rd Ann Arbor, MI 48104-4033	\$250.00	\$250.00
5. If over \$100.00 cumulative, please provide:		
Occupation Professor Employer University of Michigan		
Business Address 500 S State St Ann Arbor, MI 48109-1382	-	
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/19/2015		
Name & Address		į
Kochman, David		
480 First Street Brooklyn, NY 11215	\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	<b>u</b> a.	:
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 07/20/2015		
No. 10 Address		
Name & Address		
Kotarski, John		
	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide:	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation Employer	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation Business Address	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution:	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/22/2015 Name & Address	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution:  Direct  Loan from a person  Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/22/2015 Name & Address Krehbiel, Martha and David	\$50.00	\$50.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide:  Occupation Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/22/2015 Name & Address	\$50.00	\$50.00 \$200.00
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/22/2015  Name & Address  Krehbiel, Martha and David 2940 Provincial Dr Ann Arbor, MI 48104-4116		
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/22/2015 Name & Address Krehbiel, Martha and David 2940 Provincial Dr Ann Arbor, MI 48104-4116  5. If over \$100.00 cumulative, please provide:		
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution:  Direct  Loan from a person  Fund Raiser  3. PAC Receipt? YES  4. DATE OF RECEIPT  04/22/2015 Name & Address Krehbiel, Martha and David 2940 Provincial Dr Ann Arbor, MI 48104-4116  5. If over \$100.00 cumulative, please provide: Occupation retied  Employer retired		
Kotarski, John 1230 Saunders Crescent Ann Arbor, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/22/2015 Name & Address Krehbiel, Martha and David 2940 Provincial Dr Ann Arbor, MI 48104-4116  5. If over \$100.00 cumulative, please provide:		

Page Subtotal

\$550.00

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

\$33,140.00

#### **BUREAU OF ELECTIONS**

## **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City **CANDIDATE COMMITTEE** Council Cumulative for Election 6. Amount

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Cycle for Each Contributor (Through Independent Committee (PAC) Report all contributions regardless of amount. date of receipt)

3.	PAC Receipt? TYES	4. DATE OF RECEIPT	09/13/2015	_	
Name & Address					
Langa, Lucy and Ken 2542 Hawthorne Rd	l .				
Ann Arbor, MI 48109	ı			\$100.00	\$100.00
5. If over \$100.00 cumulative	e, please provide:				
Occupation		Employer			
Business Address					
Type of Contribution: 🗸 D	irect Loan from a p	erson Fund Raise	<u> </u>		
3.	PAC Receipt? YES	4. DATE OF RECEIPT	09/06/2015	_	
Name & Address					
Larson, Myra 3575 E Huron River	Dr				
Ann Arbor, MI 48104				\$100.00	\$100.00
			-		
5. If over \$100.00 cumulative	e, please provide:				
Occupation		Employer			
Business Address					
Type of Contribution:	Direct Loan from a p	erson Fund Raise	PT		A CONTRACTOR OF THE CONTRACTOR
3.	DAG Bassinto FIVEO	4. DATE OF RECEIPT	04/22/2015		
٧.	PAC Receipt? YES	4. DATE OF RECEIPT	04/22/2010	_	
Name & Address	PAC Receipt? YES	4. DATE OF RECEIPT	04/22/2010		
Name & Address Lax, Jerry	PAC Receipt? []YES	4. DATE OF NEOER 1	04/22/2010	_	
Name & Address  Lax, Jerry 1015 Berkshire Rd		4, DATE OF NEOLET	01,22,2010	- \$100.00	\$100.00
Name & Address Lax, Jerry		4. DATE OF NEOER 1	01/22/2010	\$100.00	\$100.00
Name & Address  Lax, Jerry 1015 Berkshire Rd	4-2753	4. DATE OF NEOER 1	04) 22/ 2010	\$100.00	\$100.00
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810  5. If over \$100.00 cumulativ Occupation Attorney	4-2753 e, please provide:	<b>Employer</b> Bodman		\$100.00	\$100.00
Name & Address Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 48104  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I	4-2753 e, please provide:	E <b>mployer</b> Bodman nn Arbor, MI 48104	4-2201	\$100.00	\$100.00
Name & Address Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I	4-2753 e, please provide:	Employer Bodman nn Arbor, MI 48104	4-2201	\$100.00	\$100.00
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution:	4-2753  e, please provide:  Division St # 400 A	Employer Bodman nn Arbor, MI 48104	4-2201 er	\$100.00	\$100.00
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution:	4-2753  e, please provide:  Division St # 400 A  Direct  Loan from a p	Employer Bodman nn Arbor, MI 48104 person ☑Fund Raisa	4-2201 er	\$100.00	\$100.00
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 48104  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution:	4-2753  e, please provide:  Division St # 400 A  Direct  Loan from a p	Employer Bodman nn Arbor, MI 48104 person ☑Fund Raisa	4-2201 er	\$100.00	\$100.00
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 48104  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution:   3.  Name & Address  Lax, Jerry 1015 Berkshire Rd	4-2753  e, please provide:  Division St # 400 A  Direct	Employer Bodman nn Arbor, MI 48104 person ☑Fund Raisa	4-2201 er	\$100.00	\$100.00
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 48104  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution:	4-2753  e, please provide:  Division St # 400 A  Direct	Employer Bodman nn Arbor, MI 48104 person ☑Fund Raisa	4-2201 er		
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 48104  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution:   3.  Name & Address  Lax, Jerry 1015 Berkshire Rd	e, please provide:  Division St # 400 A  Direct  Loan from a p  PAC Receipt?  YES	Employer Bodman nn Arbor, MI 48104 person ☑Fund Raisa	4-2201 er		
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 48104  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution: [I]  3.  Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810  5. If over \$100.00 cumulativ Occupation Attorney	e, please provide:  Division St # 400 A  Direct  Loan from a p  PAC Receipt?  YES  4-2753  re, please provide:	Employer Bodman  ann Arbor, MI 48104  berson Fund Raise  4. DATE OF RECEIPT  Employer Bodman	4-2201 er 09/20/2015		
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810.  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution: [I]  3.  Name & Address Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810  5. If over \$100.00 cumulativ	e, please provide:  Division St # 400 A  Direct  Loan from a p  PAC Receipt?  YES  4-2753  re, please provide:	Employer Bodman  Ann Arbor, MI 48104  Derson Fund Raise  4. DATE OF RECEIPT  Employer Bodman  Ann Arbor, MI 48104	4-2201 er 09/20/2015		
Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810.  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I Type of Contribution: [I]  3.  Name & Address  Lax, Jerry 1015 Berkshire Rd Ann Arbor, MI 4810  5. If over \$100.00 cumulativ Occupation Attorney Business Address 201 S I	e, please provide:  Division St # 400 A  Direct  Loan from a p  PAC Receipt?  YES  4-2753  re, please provide:	Employer Bodman  Ann Arbor, MI 48104  Derson Fund Raise  4. DATE OF RECEIPT  Employer Bodman  Ann Arbor, MI 48104	4-2201 er 09/20/2015		

Page Subtotal \$400.00 Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

#### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City
Council

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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

Cycle for Election

Cycle for Each

Contributor (Through date of receipt)

3.	MC Dessieto ETVES	4. DATE OF RECEIPT	10/13/2015		
Name & Address	PAC Receipt? TYES	4. DATE OF RECEIPT	10/13/2013	-	
Le Baron, Edward					
2743 Antietam Ct	1424			6100 00	\$100.00
Ann Arbor, MI 48105-3	3434			\$100.00	7100.00
5. If over \$100.00 cumulative, p	olease provide:				
Occupation		Employer			
Business Address					
Type of Contribution:	ect Loan from a pe	erson Fund Raiser		<u>,</u>	
3. F	PAC Receipt? TYES	4. DATE OF RECEIPT	05/23/2015	_	
Name & Address		_		_	
Liem, Veronique					
2751 Byington Blvd Ann Arbor, MI 48105-9	9683			\$50.00	\$50.00
			-		
5. If over \$100.00 cumulative, p	please provide:				
Occupation		Employer			
Business Address					
Type of Contribution: V Dire	ect Loan from a po	erson Fund Raiser			
· <u> </u>			71 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
3.	PAC Receipt? TYES	4. DATE OF RECEIPT	08/19/2015		
3. Name & Address			08/19/2015		
3. Name & Address Lockwood, William			08/19/2015	_	
3. Name & Address			08/19/2015	\$50.00	\$50.00
Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103	PAC Receipt? <b>YES</b>		08/19/2015	\$50.00	\$50.00
Name & Address Lockwood, William 564 Galen Circle	PAC Receipt? <b>YES</b>	4. DATE OF RECEIPT	08/19/2015	\$50.00	\$50.00
Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, possible of the companion of the compani	PAC Receipt? <b>YES</b>		08/19/2015	\$50.00	\$50.00
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address	PAC Receipt?	4. DATE OF RECEIPT	08/19/2015	\$50.00	\$50.00
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution:	PAC Receipt?	4. DATE OF RECEIPT  Employer  erson Fund Raiser		\$50.00	\$50.00
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution:	PAC Receipt?	4. DATE OF RECEIPT	08/19/2015	\$50.00	\$50.00
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution:	PAC Receipt?	4. DATE OF RECEIPT  Employer  erson Fund Raiser		\$50.00	\$50.00
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution:	PAC Receipt?	4. DATE OF RECEIPT  Employer  erson Fund Raiser		\$50.00	
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution:	PAC Receipt?	4. DATE OF RECEIPT  Employer  erson Fund Raiser		\$50.00	\$50.00 \$100.00
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution:	PAC Receipt? _YES  please provide:  ectLoan from a p  PAC Receipt? _YES	4. DATE OF RECEIPT  Employer  erson Fund Raiser			
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution: Direct  3. Name & Address Lowenstein, Joan 502 Burson Pl Ann Arbor, MI 48104  5. If over \$100.00 cumulative,	PAC Receipt? _YES  please provide:  ectLoan from a p  PAC Receipt? _YES	4. DATE OF RECEIPT  Employer  erson Fund Raiser  4. DATE OF RECEIPT	04/22/2015		
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution:  Dire  3. Name & Address Lowenstein, Joan 502 Burson Pl Ann Arbor, MI 48104  5. If over \$100.00 cumulative, I Occupation Attorney	PAC Receipt? _YES  please provide:  ectLoan from a p  PAC Receipt? _YES  please provide:	4. DATE OF RECEIPT  Employer  erson Fund Raiser  4. DATE OF RECEIPT  Employer Jaffe Law	04/22/2015		
3. Name & Address Lockwood, William 564 Galen Circle Ann Arbor, MI 48103  5. If over \$100.00 cumulative, I Occupation Business Address Type of Contribution: Direct  3. Name & Address Lowenstein, Joan 502 Burson Pl Ann Arbor, MI 48104  5. If over \$100.00 cumulative,	please provide:  ect	4. DATE OF RECEIPT  Employer  4. DATE OF RECEIPT  4. DATE OF RECEIPT  Employer Jaffe Law Arbor, MI 48104-21	04/22/2015		

Page Subtotal

\$300.00

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

\$33,140.00

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS **SCHEDULE 1A CANDIDATE COMMITTEE**

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council Cumulative for Election 6. Amount Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Cycle for Each Contributor (Through Independent Committee (PAC) Report all contributions regardless of amount. date of receipt)

2 A SATE OF DECEMPT AND ASSAULT		İ
3. PAC Receipt? YES 4. DATE OF RECEIPT 09/16/2015 Name & Address		
Lowenstein, Joan		
502 Burson Pl Ann Arbor, MI 48104	\$100.00	\$200.00
5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Jaffe Law		
Business Address 201 S Main St Ste 300 Ann Arbor, MI 48104-2168		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 09/16/2015		1
Name & Address		
Luckenbach, Carl 517 Oswego		
Ann Arbor, MI 48104	\$100.00	\$100.00
-		
5. If over \$100.00 cumulative, please provide:  Cocupation Employer		
Occupation		
Business Address  Type of Contribution:	<del></del>	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		- Walter Specific
3. PAC Receipt? TYES 4. DATE OF RECEIPT 04/14/2015	<del>-</del>	
Name & Address	·	
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct	_	4400.00
Name & Address Lugauer, Bernard and Roswitha	\$100.00	\$100.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407	_	\$100.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct	_	\$100.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide: Occupation  Business Address	_	\$100.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide: Occupation Employer	_	\$100.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$100.00	\$100.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$100.00	\$100.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015  Name & Address  Malani, Preeti	\$100.00	\$100.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015  Name & Address  Malani, Preeti 705 Arlington Blvd	\$100.00	\$100.00 \$200.00
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015  Name & Address  Malani, Preeti.	\$100.00	
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015  Name & Address  Malani, Preeti 705 Arlington Blvd Ann Arbor, MI 48104-2727  5. If over \$100.00 cumulative, please provide:	\$100.00	
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide: Occupation  Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015 Name & Address Malani, Preeti 705 Arlington Blvd Ann Arbor, MI 48104-2727  5. If over \$100.00 cumulative, please provide: Occupation MD  Employer University of Michigan	\$100.00	
Name & Address  Lugauer, Bernard and Roswitha 26 Haverhill Ct Ann Arbor, MI 48105-1407  5. If over \$100.00 cumulative, please provide: Occupation  Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015 Name & Address  Malani, Preeti 705 Arlington Blvd Ann Arbor, MI 48104-2727  5. If over \$100.00 cumulative, please provide:	\$100.00	

Page Subtotal

\$500.00

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

\$33,140.00

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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

Cycle for Election

Cycle for Each

Contributor (Through date of receipt)

3.	PAC Receipt? YES	4. DATE OF RECEIPT	10/01/2015		
Name & Address	—	_			
Manczak, Richard 3785 Fox Hunt Dr Ann Arbor, MI 48105				\$100.00	\$100.00
5. If over \$100.00 cumulative	, please provide:				
Occupation		Employer			
Business Address					
Type of Contribution:	irect Loan from a pe	erson Fund Raiser			
3.	PAC Receipt? YES	4. DATE OF RECEIPT	09/20/2015		
Name & Address		-		_	
Margolis, Nancy					
228 Riverview Dr Ann Arbor, MI 48104	-1846			\$100.00	\$100.00
11111 1111011 HT 40104	•				
5. If over \$100.00 cumulative	, please provide:				
Occupation		Employer			
Business Address					
Type of Contribution:	Direct Loan from a pe	erson			
3.	PAC Receipt? YES	4. DATE OF RECEIPT	08/20/2015	_	
Name & Address		_			
Martin, Jenifer					
3300 E Dobson Pl Ann Arbor, MI 48105	5-2583			\$500.00	\$500.00
5. If over \$100.00 cumulative	e, please provide:				
Occupation Professor			y of Michigan		
Business Address 500 S S	tate St Ann Arbor,				
Type of Contribution: 🔽 🗸	Direct Loan from a pe	erson Fund Raiser		<del></del>	
3.	PAC Receipt? YES	4. DATE OF RECEIPT	04/22/2015	_	
Name & Address		_		-	
Matthews, Mary					
7 Southwick Ct Ann Arbor, MI 48105	5-1409			\$150.00	\$150.00
THE TIENOT   MT 40100			<del></del>		
5. If over \$100.00 cumulative	e, please provide:				
Occupation retired	_	Employer retired			
	_	MI 48105-1409			
Occupation retired  Business Address 7 South	_	MI 48105-1409			

Page Subtotal

\$850.00

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

\$33,140.00

#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

#### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE**

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

Council

Enter contributor's name and add and middle initial. Check box to i Independent Committee (PAC) R	iress. If contribution is fro	rom a Political Committee of	ame, first name,	6, Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. F Name & Address Matthews, Middy 2825 Windwood Dr Apt 32 Ann Arbor, MI 48105-1	PAC Receipt? YES	4. DATE OF RECEIPT	04/22/2015	\$50.00	\$50.00
5. If over \$100.00 cumulative, p Occupation Business Address Type of Contribution:		Employer			
	PAC Receipt?  YES	4. DATE OF RECEIPT	04/19/2015	\$100.00	\$100.00
5. If over \$100.00 cumulative, p Occupation Business Address	please provide:	Employer			

1812 S State St #24 Chicago, IL 60616	\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Ra	ılser	<u>-</u>
3. PAC Receipt? YES 4. DATE OF RECEIPT Name & Address	PT 05/23/2015	
McMurtrie, Daniel 2119 Melrose Ave Ann Arbor, MI 48104-4067	\$250.00	\$250.00
5. If over \$100.00 cumulative, please provide:		
Occupation Physician Employer St. Jo	oseph Mercy Hospital	
Business Address 5333 McAuley Dr Ste R-2108 Ypsilanti, MI	48197-1014	

✓ Fund Raiser

4. DATE OF RECEIPT

Loan from a person

Loan from a person

PAC Receipt? YES

Page Subtotal

10/15/2015

\$450.00

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

Fund Raiser

\$33,140.00

Enter this total on line 3a of Summary Page.

Type of Contribution:

Type of Contribution:

Name & Address McCarthy, Claire

3.

Direct

Direct

#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS

# **SCHEDULE 1A**

1. Committee I.D. Number

C-2012-027

SCHEDULE 1A CANDIDATE COMMITTEE	2. Committee Name	Elect Sal	lly Hart	Petersen to City
Enter contributor's name and address. If contribution is from an individual middle initial. Check box to indicate if contribution is from a Politic Independent Committee (PAC) Report all contributions regardless of a	al Committee or an		- Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)

		<u> </u>		****			
3.	PAC Rec	eipt?	4. DATE	E OF RECEIPT	04/18/2015	<u>.</u>	
Name & Address							
Meyer, Patrici 1716 Shadford Ann Arbor, MI	Rd					\$100.00	\$100.00
5. If over \$100.00 cun	nulative, please p	rovide:					
Occupation			. Employe	er			1
Business Address							
Type of Contribution:	Direct	Loan from a pe	erson	✓ Fund Raiser		Ann Ann	
3.	PAC Red	eipt? []YES	4. DATI	E OF RECEIPT	04/22/2015	_	
Name & Address				_			
Miller, Jane 760 Watershed	Dr						
Ann Arbor, MI						\$75.00	\$75.00
5. If over \$100.00 cur	nulative, please p	rovide:	Employe	ar.			
Occupation			Employe	<u> </u>		<u> </u>	
Business Address		<u> </u>		[Altumal Delegat			
Type of Contribution:	Direct	Loan from a pe	erson	✓ Fund Raiser			
3.	PAC Red	ceipt? YES	4. DAT	E OF RECEIPT	09/20/2015	_ <del>_</del>	
Name & Address							
Miller, Kevin 1041 Arlingtor	ı Blvd						
Ann Arbor, MI						\$25.00	\$25.00
E 15 0400 00	mulativa nlagaca	vovido:					
5. If over \$100.00 cu	muiative, piease p	AOYIUG.	Employe	er			
Occupation Business Address			p.030				
Type of Contribution:	Direct	Loan from a p	erson	Fund Raiser		<u> </u>	
3.	<del></del>	ceipt? TYES		E OF RECEIPT	05/26/2015	5. <del>-</del>	
Name & Address	FAG RE	redut; □1E2	T, D/N	_ 0, ,,_0,,, ,	30, 20, 2010	_	
Miller, Phill:	ip & Ayumi						
1615 Brooklyn						\$100.00	\$100.00
Ann Arbor, MI	40104-4420				<del></del>	7100.00	, =
5. If over \$100.00 cu	mulative, please	provide:					
Occupation			Employe	er		<del></del>	
Business Address						-	
Type of Contribution:	✓ Direct	Loan from a p	erson	Fund Raise		<u></u>	

\$300.00 Page Subtotal Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

#### **BUREAU OF ELECTIONS**

## **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City **CANDIDATE COMMITTEE** Council Cumulative for Election 6. Amount Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. Cycle for Each

Contributor (Through date of receipt)

3. PAC Receipt? YES 4. DATE OF RECEIPT 04/22/2015	_	
Name & Address	<del>-</del>	
Millman, Darren		
1505 Sheridan Dr	\$50.00	\$50.00
Ann Arbor, MI 48104-4051		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☐Direct ☐Loan from a person ✓Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 05/23/2015	_	
Name & Address		
Milshtyen, Alex		ļ
315 2nd St Apt 516	\$200.00	\$200.00
Ann Arbor, MI 48103-4991		
5. If over \$100.00 cumulative, please provide:		
Occupation Realtor Employer Coldwell Banker	·· <del>··</del>	
Business Address 1898 W Stadium Blvd Ann Arbor, MI 48103-4504	-	
Type of Contribution: ✓ Direct  Loan from a person Fund Raiser	<del></del>	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/19/2015	_	
Name & Address		
Morgan, Daniel		
2967 Devonshire Road	\$50.00	\$50.00
Ann Arbor, MI 48104		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	_	
Type of Contribution:		<del></del>
3. PAC Receipt? TYES 4. DATE OF RECEIPT 08/28/2015		
Name & Address	<del></del>	
Nelson, Stewart		
2975 Hickory Ln	\$200.00	\$200.00
Ann Arbor, MI 48104-2840		
5. If over \$100.00 cumulative, please provide:		
Occupation Agent Employer Kapnick Insurance		
Business Address 201 S Main St Ste 300 Ann Arbor, MI 48104-2168	_	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		

Page Subtotal

\$500.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS **SCHEDULE 1A CANDIDATE COMMITTEE**

1. Committee I.D. Number

C-2012-027

Cumulative for Election

\$350.00

2. Committee Name Elect Sally Hart Petersen to City

Council

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	o. Amount	Cycle for Each Contributor (Through date of receipt)
3. PAC Receipt? FIVES 4. DATE OF RECEIPT 04/20/2015		
3. PAC Receipt? YES 4. DATE OF RECEIPT 04/20/2015 Name & Address	_	
Newman, Haskell		
1071 Young Place		4100.00
Ann Arbor, MI 48105	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:		
Occupation retired Employer retired		
Business Address 1071 Young Pl Ann Arbor, MI 48105-2587		
Type of Contribution: Direct Loan from a person Fund Raiser	·	
3. PAC Receipt? YES 4. DATE OF RECEIPT 09/16/2015		
Name & Address		
Newman, Haskell		
1071 Young Place	\$250.00	\$350.00
Ann Arbor, MI 48105		
5. If over \$100.00 cumulative, please provide:		
Occupation retired Employer retired		
Business Address 1071 Young Pl Ann Arbor, MI 48105-2587	_	
Type of Contribution: ✓ Direct		gan's gan a gan
3. PAC Receipt? YES 4. DATE OF RECEIPT 04/05/2015	_	
Name & Address		
Newman, Jan Barney		
1071 Young Place Ann Arbor, MI 48105	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:		
Occupation retired Employer retired		

Fund Raiser

Fund Raiser

4. DATE OF RECEIPT

Employer retired

Page Subtotal \$700.00 \$33,140.00 Grand Total of all Schedules 1A (Complete on last page of Schedule)

09/16/2015

Enter this total on line 3a of Summary Page.

\$250.00

Occupation retired

Type of Contribution:

Name & Address

Newman, Jan Barney 1071 Young Place

Ann Arbor, MI 48105

Occupation retired

Type of Contribution:

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

Business Address 1071 Young Pl Ann Arbor, MI 48105-2587

Business Address 1071 Young Pl Ann Arbor, MI 48105-2587

PAC Receipt? YES

✓ Direct

✓ Direct

Loan from a person

Loan from a person

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS **SCHEDULE 1A** CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

SCHEDULE 1A CANDIDATE COMMITTEE		ect Sally Hart Pe	etersen to City
Enter contributor's name and address. If contribution is from an and middle initial. Check box to indicate if contribution is from a Independent Committee (PAC) Report all contributions regardless.	individual, enter last name, first nam Political Committee or an	ne, 6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
			<u></u>
3. PAC Receipt? TYES 4. Name & Address	DATE OF RECEIPT 05/22/3	2015	
Panitch, Jack 501 Burson Pl Ann Arbor, MI 48104-2601		\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:			
Occupation En	ployer		
Business Address		_ <del></del>	
Type of Contribution:	Fund Raiser		·
3. PAC Receipt? ☐YES 4	DATE OF RECEIPT 09/20/	2015	
Name & Address			
Parkes, Janet			
2115 Nature Cove Ct Apt 210		\$100.00	\$100.00
Ann Arbor, MI 48104-5406			
5. If over \$100.00 cumulative, please provide:			
Occupation En	nployer		
Business Address			
Type of Contribution: Direct Loan from a perso	n 🗸 Fund Raiser		west west with
3. PAC Receipt? ☐YES 4	. DATE OF RECEIPT 10/12/	2015	
Name & Address	· · · · · · · · · · · · · · · · · · ·		
Parrish, Susan			
1945 Cambridge Rd Ann Arbor, MI 48104		\$25.00	\$25.00
Aim Albor, Mr 4010.			
5. If over \$100.00 cumulative, please provide:			
	nployer		
Business Address			
Type of Contribution: Direct Loan from a person	n Fund Raiser		
3. PAC Receipt? ☐YES	DATE OF RECEIPT 04/14/	/2015	
Name & Address		<u> </u>	
Peck, Lawrence			
410 Highland Rd Ann Arbor, MI 48104-1730		\$200.00	\$200.00
AMI ALDOL, MI 40101 1700		<u> </u>	
5. If over \$100.00 cumulative, please provide:			
	mployer General Motors		
Business Address Renaissance Center Dearborn,	MI 48243		
Type of Contribution: Direct Loan from a person	on Fund Raiser		

Enter this total on line 3a of Summary Page.

\$425.00

\$33,140.00

Page Subtotal

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

#### **BUREAU OF ELECTIONS**

C-2012-027

1 t = 131 t = 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1	i. Committee I.D. Number		
SCHEDULE 1A		y Hart Pe	etersen to City
CANDIDATE COMMITTEE  Enter contributor's name and address. If contribution is from an individual, and middle initial. Check box to indicate if contribution is from a Political C Independent Committee (PAC) Report all contributions regardless of amounts.	enter last name, first name, ommittee or an	mount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
A DATE OF	RECEIPT 09/15/2015		
3. PAC Receipt? YES 4. DATE OF Name & Address	09/13/2013		
Peck, Lawrence			:
410 Highland Rd Ann Arbor, MI 48104-1730		\$100.00	\$300.00
5. If over \$100.00 cumulative, please provide:			
	eneral Motors		
Business Address Renaissance Center Dearborn, MI 4824	3		
	Fund Raiser		<del> </del>
3. PAC Receipt? YES 4. DATE OF	RECEIPT 10/11/2015		
Name & Address			
Peck, Lawrence			
410 Highland Rd Ann Arbor, MI 48104-1730		\$100.00	\$400.00
Alli Albot, Ar forer 1700			
5. If over \$100.00 cumulative, please provide:			
Occupation Marketing	General Motors		
Business Address Renaissance Center Dearborn, MI 4824	13		
Type of Contribution: 🔽 Direct Loan from a person	Fund Raiser		
3. PAC Receipt? YES 4. DATE OF	RECEIPT 10/14/2015		
Name & Address			
Perlman, Sheila			
1300 Wolverhampton In		\$100.00	\$100.00
Ann Arbor, MI 48105-2578			
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
	Fund Raiser		<del></del>
3. PAC Receipt? YES 4. DATE OF	RECEIPT 05/23/2015		
Name & Address			
Petersen, Kaye			
3207 Chamberlain Cir Ann Arbor, MI 48103-8866	\$	1,000.00	\$1,000.00
AIRI ALDOL, MI 40103 0000		· · · · · · · · · · · · · · · · · · ·	
5. If over \$100.00 cumulative, please provide:			
	Retired	. <u> </u>	
	48103-8866		
Type of Contribution: 🗸 Direct Loan from a person	Fund Raiser		

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

Page Subtotal

Enter this total on line 3a of Summary Page.

\$1,300.00

#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS **SCHEDULE 1A** CANDIDATE COMMITTEE

Direct

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

Council Cumulative for Election 6. Amount Enter contributor's name and address. If contribution is from an individual, enter last name, first name, Cycle for Each and middle initial. Check box to indicate if contribution is from a Political Committee or an Contributor (Through Independent Committee (PAC) Report all contributions regardless of amount. date of receipt) 03/29/2015 3. 4. DATE OF RECEIPT PAC Receipt? TYES Name & Address Petersen, Sally 2976 Hickory Ln \$10,000.00 \$10,000.00 Ann Arbor, MI 48104-2865 5. if over \$100.00 cumulative, please provide: Employer None Occupation None MI 48104-2840 Business Address 2989 Hickory Ln Ann Arbor, Trund Raiser Type of Contribution: Loan from a person Direct 4. DATE OF RECEIPT 10/18/2015 3. PAC Receipt? TYES Name & Address Petersen, Sally 2976 Hickory Ln \$5,000.00 \$5,000.00 Ann Arbor, MI 48104-2865 5. If over \$100.00 cumulative, please provide: Employer None Occupation None Business Address 2989 Hickory Ln Ann Arbor, MI 48104-2840 Fund Raiser

5. If over \$100.00 cumulative, please provide: Employer Occupation Business Address ✓ Fund Raiser Loan from a person Type of Contribution: 4. DATE OF RECEIPT 3. PAC Receipt? TYES Name & Address Pollock, Rob and Jill 2038 Winsted \$250.00 \$250.00 Ann Arbor, MI 48103

4. DATE OF RECEIPT

09/20/2015

5. If over \$100.00 cumulative, please provide: Employer Pollock Investment Occupation Registered Investment Business Address 492 E Huron St Ann Arbor Ann Arbor, Ady 188484-5904

✓ Loan from a person

PAC Receipt? YES

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

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

Page Subtotal

\$15,350.00 \$33,140.00

\$100.00

\$100.00

Enter this total on line 3a of Summary Page.

Type of Contribution:

Name & Address Polcek, Norma 1019 Brae Burn Ln

Rockford, IL 61107-3808

3.

#### **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS **SCHEDULE 1A** CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council Cumulative for Election
Cycle for Each 6. Amount Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt)

Name & Address Prosser, Lisa 2019 Washtenaw Ave Ann Arbor, MI 48104-3656 \$250.00 \$250.00  5. If over \$100.00 cumulative, please provide:  Occupation Professor  Space Address PAC Receipt? YES 4. DATE OF RECEIPT 04/10/2015  Name & Address Rapundalo, Stephen 3106 Bluet Road Ann Arbor, MI 48015  5. If over \$100.00 cumulative, please provide:  Occupation  Employer  Employer  Direct   Loan from a person   Variable   Vari						<del></del>
Name & Address	3.	PAC Receipt? TYES	4. DATE OF RECEIPT	04/01/2015		
2019 Washtenaw Ave	Name & Address	·				
Employer   University of Michigan   Direct   Loan from a person   Fund Raiser   Solitor   Soli	2019 Washtenaw Ave	ı <b>-</b> 3656			\$250.00	\$250.00
Employer   University of Michigan   Direct   Loan from a person   Fund Raiser   Solitor   Soli	5. If over \$100.00 cumulative	e, please provide:				
Type of Contribution:   Direct   Loan from a person   Z Fund Raiser	Occupation Professor		· · · · · · · · · · · · · · · · · · ·	y of Michigan	<del></del>	
Type of Contribution: Direct Loan from a person VFund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 04/10/2015  Name & Address Radina, Travis 2750 Windwood Dr \$25.00 \$25.00  Apt 146 Ann Arbor, MI 48105-1494  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person VFund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015  Name & Address  Rapundalo, Stephen 3106 Bluett Road Ann Arbor, MI 48015  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015  Name & Address  Rapundalo, Stephen 3106 Bluett Road Ann Arbor, MI 48015  5. If over \$100.00 cumulative, please provide:  Occupation Port Loan from a person Fund Raiser  3. Name & Address  Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide:  Occupation Business Address	Business Address 500 S S	tate St Ann Arbor,	MI 48109-1382			
Name & Address Radina, Travis 2750 Windwood Dr						<u></u>
Name & Address Radina, Travis 2750 Windwood Dr Apt 146 Ann Arbor, MI 48105-1494  5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution:	3.	PAC Receipt? YES	4. DATE OF RECEIPT	04/10/2015	•	
275.0 Windwood Dr	Name & Address	, [].20	_			
S. If over \$100.00 cumulative, please provide:  Occupation  Business Address  Type of Contribution: Direct	2750 Windwood Dr Apt 146	5-1494			\$25.00	\$25.00
Description Employer  Business Address  Type of Contribution: Direct   Loan from a person   ✓ Fund Raiser  3. PAC Receipt?   YES   4. DATE OF RECEIPT   09/20/2015  Name & Address  Rapundalo, Stephen   3106 Bluett Road   \$50.00   \$50.00  5. If over \$100.00 cumulative, please provide:  Occupation   Employer   Fund Raiser  Type of Contribution:   ✓ Direct   Loan from a person   Fund Raiser  Name & Address  Robertson, Jennifer   1310 Glendaloch Circle   Ann Arbor, MI   48104   \$50.00   \$50.00  5. If over \$100.00 cumulative, please provide:   \$50.00   \$50.00   \$50.00  5. If over \$100.00 cumulative, please provide:   \$50.00   \$50.00   \$50.00  5. If over \$100.00 cumulative, please provide:   \$50.00   \$50.00   \$50.00  5. If over \$100.00 cumulative, please provide:   \$50.00						
Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/20/2015  Name & Address Rapundalo, Stephen 3106 Bluett Road Ann Arbor, MI 48015  5. If over \$100.00 cumulative, please provide:  Occupation Employer  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address  Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide:  Cocupation Employer  Semployer  4. DATE OF RECEIPT 09/19/2015  Analysis Semployer  Semployer  Semployer  Business Address  Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address			Employer			
Type of Contribution:         □ Direct         □ Loan from a person         ☑ Fund Raiser           3.         PAC Receipt?         YES         4. DATE OF RECEIPT         09/20/2015           Name & Address         Rapundalo, Stephen 3106 Bluett Road Ann Arbor, MI 48015         \$50.00         \$50.00           5. If over \$100.00 cumulative, please provide:         Employer         S50.00         \$50.00           Occupation         Employer         Employer         S50.00         S50.00           Business Address         Type of Contribution:         ☑ Direct         ☐ Loan from a person         ☐ Fund Raiser           3.         PAC Receipt?         YES         4. DATE OF RECEIPT         09/19/2015           Name & Address         Robertson, Jennifer         310 Glendaloch Circle Ann Arbor, MI 48104         \$50.00         \$50.00           5. If over \$100.00 cumulative, please provide:         Occupation         Employer           Business Address         Employer						
3. PAC Receipt?		Direct Loan from a	person 🔽 Fund Raiser		<del></del>	·
Name & Address Rapundalo, Stephen 3106 Bluett Road Ann Arbor, MI 48015  5. If over \$100.00 cumulative, please provide: Occupation  Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation  Employer  Business Address	3.	PAC Receipt? TYES	4. DATE OF RECEIPT	09/20/2015	···	
3106 Bluett Road Ann Arbor, MI 48015  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation Business Address	Name & Address	- <u>-</u>	•			
Ann Arbor, MI 48015  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation  Employer  Business Address	Rapundalo, Stephen	ı				
5. If over \$100.00 cumulative, please provide:  Occupation  Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation  Employer  Business Address	3106 Bluett Road	.5			\$50.00	\$50.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104 \$50.00  5. If over \$100.00 cumulative, please provide: Occupation Business Address	Mill MEDOLY 112 2002					
Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104 \$50.00  5. If over \$100.00 cumulative, please provide: Occupation Business Address	5. If over \$100.00 cumulative	ve, please provide:				
Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104 \$50.00 \$50.00  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	Į.		Employer		<del>-</del>	
3. PAC Receipt? YES 4. DATE OF RECEIPT 09/19/2015  Name & Address Robertson, Jennifer 1310 Glendaloch Circle Ann Arbor, MI 48104 \$50.00 \$50.00  5. If over \$100.00 cumulative, please provide: Occupation Business Address	Business Address				•	
Name & Address  Robertson, Jennifer  1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation  Business Address	Type of Contribution:	Direct Loan from a		<del></del>		<del>-</del>
Robertson, Jennifer  1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation Business Address	3.	PAC Receipt? YES	4. DATE OF RECEIPT	09/19/2015		
1310 Glendaloch Circle Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation Business Address  Fig. 4 Deicer	Name & Address	· •				
Occupation Employer  Business Address	1310 Glendaloch Ci	ircle			\$50.00	\$50.00
Occupation Employer  Business Address	5. If over \$100.00 cumulati	ive, please provide:				
Business Address			Employer			
Type of Contribution:	·				=	
		Direct Loan from a	a person Fund Raise	er		

Page Subtotal

\$375.00

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

\$33,140.00

### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

C-2012-027

CAN Enter contributor's nan	SCHEDULE 1A DIDATE COMMITTEE  ne and address. If contribution is from the contribution is from t	2. Committee m an individual, enter last n om a Political Committee or ardiess of amount.	ame, first	Counci		etersen to City  Cumulative for Election  Cycle for Each  Contributor (Through date of receipt)
3. Name & Address	PAC Receipt? TYES	4. DATE OF RECEIPT	03/3	31/2015		
Roos, Phil 493 Orchard Hi Ann Arbor, MI	lls Drive 48104			-	\$250.00	\$250.00
	tativo nigase provide:					

3. PAC Receipt: TEO		1
Name & Address		
Roos, Phil 493 Orchard Hills Drive Ann Arbor, MI 48104	\$250.00	\$250.00
5. If over \$100.00 cumulative, please provide:  Occupation Management Consulting Employer Great Lakes GrowthWorks,  Business Address 220 S Main St Ann Arbor, MI 48104-2146  Fund Raiser		
Type of Contribution:   Direct   Edai Horn a porces.		
3. PAC Receipt? YES 4. DATE OF RECEIPT 09/15/2015 Name & Address		
Roos, Phil 493 Orchard Hills Drive Ann Arbor, MI 48104	\$100.00	\$350.00
5. If over \$100.00 cumulative, please provide: Occupation Management Consulting Employer Great Lakes GrowthWorks, Business Address 220 S Main St Ann Arbor, MI 48104-246 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Controller. 10/17/2015		
3. PAC Receipt? TYES		
Name & Address  Roos, Phil 493 Orchard Hills Drive Ann Arbor, MI 48104	\$200.00	\$550.00
5. If over \$100.00 cumulative, please provide:  Occupation Management Consulting Employer Great Lakes GrowthWorks,  Business Address 220 S Main St Ann Arbor, MI 48104-2146  Type of Contribution:  Direct		
175 A DATE OF RECEIPT 03/25/2015	-	
Name & Address		
Rosenberg, Jeri 2100 Scottwood Ave Ann Arbor, MI 48104-4511	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:  Occupation artist  Business Address 2100 Scottwood Ave Ann Arbor, MI 48104-4511  Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser		

Page Subtotal

\$650.00 \$33,140.00

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

#### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

1. Committee I.D. Nui	mper					
2. Committee Name	Elect	Sally	Hart	Petersen	to	City
	a	: ٦		Cumulativ		

CANDIDATE COMMITTEE

Council
6. Amount
Cycle for Election
Cycle for Each
Contributor's name and address. If contribution is from an individual, enter last name, first name,
and middle initial. Check box to indicate if contribution is from a Political Committee or an
Independent Committee (PAC) Report all contributions regardless of amount.

Cumcil
6. Amount
Cycle for Each
Contributor (Through
date of receipt)

3. P/	AC Receipt? YES	4. DATE OF REC	EIPT 04/22/201	15	
Name & Address					
Rosenberg, Jeri					
2100 Scottwood Ave	C 1 1			\$100.00	\$200.00
Ann Arbor, MI 48104-4.	211				
5. If over \$100.00 cumulative, p	iease provide:		_		
Occupation artist		Employer self			
Business Address 2100 Scott	twood Ave Ann Ark	or, MI 48104	-4511	<del></del>	
Type of Contribution: Direct			l Raiser		
3. P	AC Receipt? YES	4. DATE OF RE	CEIPT 09/20/20	15	
Name & Address			<u> </u>		
Ruud, Heidi					
3404 E Dobson Pl	1502			\$100.00	\$100.00
Ann Arbor, MI 48105-2	.505				
5. If over \$100.00 cumulative, p	lease provide:				
Occupation	•	Employer			
Business Address					
Type of Contribution: Dire	ct Loan from a p	erson / Fun	d Raiser		
		4. DATE OF RE		)15	
3. Final Report of the Property of the Propert	PAC Receipt? YES	4. DATE OF RE	,	<u> </u>	
Saint, Veronica & Sa	niav	•			
2203 Lafayette Rd	, jug			****	\$100.00
Ann Arbor, MI 48104-	1735			\$100.00	7100.00
5. If over \$100.00 cumulative,	please provide:	Employer			
Occupation		Employer			
Business Address			nd Raiser	<del></del>	
Type of Contribution:	ect  Loan from a		<del></del>	<del></del>	
3.	PAC Receipt? YES	4. DATE OF R	ECEIPT 04/13/2	015	
Name & Address					
Schooner, Susan					
2531 Jackson Ave				\$500.00	\$500.00
# 188 Ann Arbor, MI 48103-	-3818				,
5. If over \$100.00 cumulative,					
Occupation Retired			tired		
Business Address 2531 Jac	kson Ave # 188 A	nn Arbor, MI	48103-3818		
	rect Loan from a		nd Raiser		
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					

Page Subtotal \$800.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

#### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City

		2. Comr		. Sally hard r	
CANDI	DATE COMMITTEE	an individual optor la	Counc	6. Amount	Cumulative for Election Cycle for Each
	nd address. If contribution is fro lox to indicate if contribution is f PAC) Report all contributions rec		ee or an		Contributor (Through date of receipt)
			DT 00/00/00/00	:	
3.	PAC Receipt? YES	4. DATE OF RECEI	PT 09/20/2015	<u> </u>	
Name & Address					
Scott, Doug 1525 Harding Rd Ann Arbor, MI 481	104-4537			\$100.00	\$100.00
5. If over \$100.00 cumula	itive, please provide:				
Occupation		Employer			
Business Address			Lion		
Type of Contribution:	Direct Loan from a p				
3.	PAC Receipt? YES	4. DATE OF RECE	IPT 09/20/201	5	
Name & Address	· <u></u> ·				
Sheng, Cynthia					
3079 Exmoor Rd Ann Arbor, MI 48	104-4122			\$100.00	\$100.00
MIII MIDOL, HE 40	•				
5. If over \$100.00 cumul	ative, please provide:				
Occupation		Employer			
Business Address					
Type of Contribution:	Direct Loan from a	person Fund F			<del>, , , , , , , , , , , , , , , , , , , </del>
3.	PAC Receipt? YES	4. DATE OF RECE	EIPT 04/04/201	15	
Name & Address					,
Shepherd, Amy					
725 Arlington B	lvd 2104-2727			\$100.00	\$100.00
Ann Arbor, MI 48	0104-7171				
5. If over \$100.00 cumu	lative, please provide:				
Occupation	•	Employer			
Business Address					
Type of Contribution:	☑ Direct ☐ Loan from a	a person Fund	Raiser	<del></del>	
3.	PAC Receipt? YES	4. DATE OF REC	EIPT 03/28/20	15	
Name & Address	LW∩ vaceihr: ☐ I Eg	,		<del></del>	
Smith, Collyer					
1693 Cypress Po	inte Ct			\$100.0	0 \$100.00
Ann Arbor, MI 4	8108				
E If over \$400.00 over	ulative, please provide:				
Occupation None		Employer None			
Occupation None	3 Cypress Pointe Ct	Ann Arbor, MI 48	3108-8505		
Type of Contribution:	✓ Direct  Loan from	a person Fund	l Raiser		
Liype of Continuition:	A Duece Trout nour			<del></del>	

Page Subtotal \$400.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

## BUREAU OF ELECTIONS

## ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

C-2012-027

SCHEDULE 1A	2. Committee Name	Elect Sall	Ly Hart Pe	tersen to City
CANDIDATE COMMITTEE	ial enter last name, first	Council	Amount	Cycle for Each
Enter contributor's name and address. It contribution is from a Political and middle initial. Check box to indicate if contribution is from a Political and middle initial. Check box to indicate if contributions regardless of an independent Committee (PAC) Report all contributions regardless of an	l Committee or an nount.			Contributor (Through date of receipt)
		4.4003 F		
PAC Receipt? YES 4. DATE C	OF RECEIPT09/1	4/2015		
Name & Address				
Smith, Collyer				2000 00
1693 Cypress Pointe Ct Ann Arbor, MI 48108			\$100.00	\$200.00
5. If over \$100.00 cumulative, please provide:				
Employer	None			
Occupation None  Business Address 1693 Cypress Pointe Ct Ann Arbor,	MI 48108-8505			
Type of Contribution: Direct Loan from a person		<del></del>	<del>,,,</del>	<del></del>
	OF RECEIPT 04/	19/2015		
Name & Address				
Smith, Radley & Sandra				
3188 Rumsey Drive			\$100.00	\$100.00
Ann Arbor, MI 48105-3436				· · · · · · · · · · · · · · · · · · ·
5. If over \$100.00 cumulative, please provide:				
⊢mniovei				
Occupation				
Business Address  Type of Contribution: Direct Loan from a person	✓ Fund Raiser			
Type of Controduction [ ] 5 / 5 / 5 / 5 / 5 / 5 / 5 / 5 / 5 / 5	OF RECEIPT 04	/22/2015		
73. PAC Receipt? YES 4. DATE Name & Address			-	
1				
Studer, Marlena 3204 W Dobson Pl			\$50.00	\$50.00
Ann Arbor, MI 48105-2580				
5. If over \$100.00 cumulative, please provide:	er			
Occupation				
Business Address  Type of Contribution: Direct Loan from a person	Fund Raiser		<del></del>	
Type of Contribution		9/20/2015		
, , L	E OF RECEIPT 09	7/20/2010	_	
Name & Address				
Studer, Marlena			AEA A	n \$100.0
3204 W Dobson Pl Ann Arbor, MI 48105-2580			\$50.0	
5. If over \$100.00 cumulative, please provide:				
Occupation Employ	/er			
Business Address	13e 19-t		_	
Type of Contribution: Direct Loan from a person	✓ Fund Raiser			

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

Page Subtotal

\$300.00 \$33,140.00

#### **BUREAU OF ELECTIONS**

### ITEMIZED CONTRIBUTIONS SCHEDULE 1A

C-2012-027 1. Committee I.D. Number

SCHEDULE 1A	2. Committee Name	Elect Sally Har	t Petersen to City
CANDIDATE COMMITTEE		Council	- Cumulative for Election
Enter contributor's name and address. If contribution is from an individu and middle initial. Check box to indicate if contribution is from a Politica Independent Committee (PAC) Report all contributions regardless of an	. ••	name,	Cycle for Each Contributor (Through date of receipt)
Independent Communication			

3. P/	AC Receipt? TYES	4. DATE OF RECEIPT	04/22/2015		ļ
Name & Address	· 🗀	_			
Talburtt, Peg 2917 Philadelphia Dr Ann Arbor, MI 48103-6	813			\$50.00	\$50.00
5. If over \$100.00 cumulative, p	lease provide:	,			
Occupation		Employer			
Business Address					
Type of Contribution: Dire	ct Loan from a p	erson  Fund Raiser			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
— دی اللور اثار کور در اللور الل	PAC Receipt? YES	4. DATE OF RECEIPT	09/20/2015		
Name & Address	,,,e,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del>-</del>			
Teall, Margie 1208 Brooklyn Ave Ann Arbor, MI 48104-4	1311			\$50.00	\$50.00
5. If over \$100.00 cumulative, p	olease provide:				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Employer		· <del></del>	
Occupation Business Address					
Type of Contribution: Dire	ect Loan from a p	person 🗸 Fund Raiser			· · · · · · · · · · · · · · · · · · ·
		4. DATE OF RECEIPT	09/15/2015		
Name & Address	PAC Receipt? TYES	1. 0/11 2 0 11 1		_	
Thurston, Dave					
1750 Meadowside Driv Ann Arbor, MI 48104	е			\$40.00	\$40.00
5. If over \$100.00 cumulative,	nlease provide:				
1	hisana hisana.	Employer			
Occupation Business Address		<u> </u>		-	
Type of Contribution:	rect	person Fund Raise	er		
3.		4. DATE OF RECEIPT	06/02/2015		
Name & Address	PAC Receipt? YES	4. 0/112 01 / 124		_	
Turcotte, Claire					
1 Regent Dr Ann Arbor, MI 48104	-1738			\$50.00	\$50.00
5. If over \$100.00 cumulative	nlease provide:	•			
1	) biograp biograps	Employer			
Occupation Address				_	
Business Address  Type of Contribution:   D	irect Loan from a	a person Fund Rais	ег		
Type of Contribution: 🗸 D	Teer Treatment				

\$190.00 Page Subtotal Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

#### **BUREAU OF ELECTIONS**

# ITEMIZED CONTRIBUTIONS

1. Committee I.D. Number	C-2012-027
1. 00/////	

SCHEDULE 1A	
CANDIDATE COMMITTEE	

2. Committee Name Elect Sally Hart Petersen to City Council Cumulative for Election

6. Amount

Enter contributor's name and address. If contribution is from an individual, eand middle initial. Check box to indicate if contribution is from a Political Co-Independent Committee (PAC) Report all contributions regardless of amount		-6, Amount	Cycle for Each Contributor (Through date of receipt)
independent Contributes (1 AO) Report dis Solidore			
3. PAC Receipt? TYES 4. DATE OF R	ECEIPT 05/26/2015	) 	
Weisman, Brian 3900 Penberton Dr Ann Arbor, MI 48105-3021		\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide:			
Occupation President Employer Co	olumbia Asset Manage	ement	
Business Address 213 W Liberty St Ste 110 Ann Arbor, N	MI 48104-1398		
	und Raiser		
Type of Continuation. V Direct Court from a part of the		 5	
77.6 T.656.FT [126	VEOLII 1 04/22/201.		
Name & Address			
Wood, Pam			£000 00
1375 Burgundy Rd Ann Arbor, MI 48105-2524		\$200.00	\$200.00
THE ALLOW TO THE TANK	,		
5. If over \$100.00 cumulative, please provide:			
Occupation Retired Employer R	etired		
Business Address 1375 Burgundy Rd Ann Arbor, MI 48105	-2524		
Type of Contribution: Direct Loan from a person F	und Raiser	<del></del>	
Туро от останова	RECEIPT 09/20/201	.5	
3. PAC Receipt? TYES 4. DATE OF Name & Address			
1 777			
Zemke, Adam 120 1/2 E Washington St		A100 00	\$100.00
Ann Arbor, MI 48104-1905		\$100.00	7100.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			,
Type of Contribution: Direct Loan from a person	Fund Raiser		

Page Subtotal

\$500.00 \$33,140.00

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

# MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

#### ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
3. Name and address of person of vendor to whom paid			
Name Adobe Systems	Purpose: Graphic Design	09/09/2015 Date	\$28.26
Address 345 Park Ave San Jose, CA 95110-2704	Check box if this expenditure is paymen	t of	
	debt or obligation reported on previous statement		
Fund Raiser			
Name Adobe Systems	Purpose: graphic design	09/25/2015 Date	\$52.99
Address 345 Park Ave San Jose, CA 95110-2704	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
Fund Raiser			
Name Ann Arbor Democratic Party	Purpose: Meeting Sponsorship	07/23/2015 Date	\$75.00
Address PO Box 7497 Ann Arbor, MI 48107-7497	Check box if this expenditure is payment debt or obligation reported on previous statement	nt of	
Fund Raiser			
Name Ann Arbor Huron High School	Purpose: Advertisement	07/22/2015 Date	\$100.0
Address 2727 Fuller Rd Ann Arbor, MI 48105-2449	Check box if this expenditure is payme debt or obligation reported on previous statement	ent of	
Fund Raiser			

Subtotal this page

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

\$256.25 \$27,411.21

#### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Name Ann Arbor Observer	Purpose: Ad Space	07/24/2015 Date	\$1,273.40
Address 2390 Winewood Ave Ann Arbor, MI 48103-3841	Check box if this expenditure is paymen debt or obligation reported on previous statement	ıt of	
Fund Raiser			
Name Ann Arbor Observer	Purpose: Ad Space	09/10/2015 Date	\$1,273.40
Address 2390 Winewood Ave Ann Arbor, MI 48103-3841	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
Fund Raiser			
Name Ann Arbor Observer	Purpose: Ad Space	10/10/2015 Date	\$1,323.40
Address 2390 Winewood Ave Ann Arbor, MI 48103-3841	Check box if this expenditure is payment debt or obligation reported on previous statement	nt of	
Fund Raiser			
Name Change Media Group	Durage Conculting Fac	09/22/2015 Date	\$950.0
Address 1000 S Washington Ave # 101 Lansing, MI 48910-1661	Check box if this expenditure is paymer debt or obligation reported on previous statement	 nt of	
Fund Raiser			

Subtotal this page

\$4,820.20 \$27,411.21

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

er this total on

#### ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

C-2012-027

1, Committee I.D. Number

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Name Frushour, Casey	Purpose: Graphic Design	05/16/2015 Date	\$325.00
Address 1177 Addington Ln Ann Arbor, MI 48108-8946	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
☐ Fund Raiser			
Name Green Road Post Office	B	04/20/2015 Date	\$26.46
Address 3000 Green Rd Ann Arbor, MI 48105-1511	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
Fund Raiser			
Name Green Road Post Office	Purpose: Stamps	05/26/2015 Date	\$14.70
Address 3000 Green Rd Ann Arbor, MI 48105-1511	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
Fund Raiser			
Name Green Road Post Office	Purpose: stamps	09/24/2015 Date	\$29.40
Address 3000 Green Rd Ann Arbor, MI 48105-1511	Check box if this expenditure is paymendebt or obligation reported on previous statement	 nt of	
Fund Raiser			

Subtotal this page

\$395.56 \$27,411.21

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

### ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

	(Danished Information)	5. Date	6. Amount
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)		
Name Green Road Post Office	Purpose: stamps	09/29/2015 Date	\$105.00
Address 3000 Green Rd Ann Arbor, MI 48105-1511	Check box if this expenditure is payment debt or obligation reported on previous statement	nt of	
Fund Raiser			
Name Green Road Post Office	Purpose: Stamps	09/29/2015 Date	\$105.00
Address 3000 Green Rd Ann Arbor, MI 48105-1511	Check box if this expenditure is payme ☐ debt or obligation reported on previous statement	ent of	
Fund Raiser			
Name Inland Press	Purpose: Letterhead	04/22/2015 Date	- \$721.5
Address 2001 W Lafayette Blvd Detroit, MI 48216-1852	Check box if this expenditure is paym debt or obligation reported on previou statement	ent of s	
Fund Raiser			
Name Inland Press	Purpose: Printing	08/04/2015 Date	\$1,014.4
Address 2001 W Lafayette Blvd Detroit, MI 48216-1852	Check box if this expenditure is payn debt or obligation reported on previous statement	nent of us	
Fund Raiser			

Subtotal this page

\$1,945.98 \$27,411.21

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

# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Name Meijer  Address 3145 Ann Arbor Saline Rd Ann Arbor, MI 48103-9711	Purpose: Chili Cook Off Supplies  Check box if this expenditure is paymen debt or obligation reported on previous statement	05/16/2015 Date	\$52.58
		*****	
Name Meijer Address 3145 Ann Arbor Saline Rd Ann Arbor, MI 48103-9711	Purpose: Food for Volunteers  Check box if this expenditure is paymen debt or obligation reported on previous statement	05/24/2015 Date	\$27.25
Fund Raiser	statement		
Name Meijer  Address 3145 Ann Arbor Saline Rd Ann Arbor, MI 48103-9711	Purpose: Candy for parade  Check box if this expenditure is paymen  debt or obligation reported on previous statement	07/06/2015 Date t of	\$186.01
Name		00/00/0015	
Name Messenger Printing  Address 20136 Ecorse Rd Taylor, MI 48180-1957	Purpose: Direct Mail  Check box if this expenditure is payment debt or obligation reported on previous statement	09/30/2015  Date t of	\$1,390.92
Fund Raiser			

Subtotal this page

\$1,656.76

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

\$27,411.21

### ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

2. Committee Name Elect Sally Hart Petersen to City Council

CANDIDATE COMMITTEE	Council		
- 14	4. Purpose (Required Information)	5. Date	6. Amount
<ol> <li>Name and address of person or vendor to whom paid</li> </ol>	4, 1 ai pood (144)		
Name Messenger Printing	Purpose: post cards	10/15/2015 Date	\$263.94
Address 20136 Ecorse Rd Taylor, MI 48180-1957	Check box if this expenditure is particle debt or obligation reported on prevented on prevented by the control of the control	yment of ious	
Fund Raiser		05/19/2015	
Name Netbrands	Purpose: Website		- \$333.32
Address 14550 Beechnut St Houston, TX 77083-5741	Check box if this expenditure is posterior of the control of the c	ayment of vious	
Fund Raiser			
Name NGP VAN	Purpose: Campaign Database	03/02/2015 Date	\$450.0
Address 1101 15th St NW Ste 500 Washington, DC 20005-5006	Check box if this expenditure is purely debt or obligation reported on prestatement	payment of evious	
Fund Raiser		05/12/201	5 — \$450.
NGP VAN	Purpose: Campaign Databas	e	
Address 1101 15th St NW Ste 500 Washington, DC 20005-5006	Check box if this expenditure is debt or obligation reported on p	payment of revious	
Fund Raiser			

Subtotal this page

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

\$1,497.26 \$27,411.21

# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Name NGP VAN  Address 1101 15th St NW Ste 500 Washington, DC 20005-5006	Purpose: Campaign Database  Check box if this expenditure is paymen debt or obligation reported on previous	08/01/2015 Date	\$450.00
∏Fund Raiser	statement		
Name O'Furey, Bradley  Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778	Purpose: Consulting Fee  Check box if this expenditure is paymen  debt or obligation reported on previous statement	03/02/2015 Date	\$1,000.00
Fund Raiser		/ /	
O'Furey, Bradley  Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778	Purpose: Consulting  Check box if this expenditure is paymer debt or obligation reported on previous statement	03/31/2015  Date  at of	\$1,000.00
☐Fund Raiser			
Name O'Furey, Bradley Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778	Purpose: Consulting Fee  Check box if this expenditure is paymer  debt or obligation reported on previous	05/01/2015  Date  at of	\$1,000.00
☐ Fund Raiser	statement		

Subtotal this page

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

\$3,450.00 \$27,411.21

# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Name O'Furey, Bradley	Purpose: Consulting Fee	06/01/2015 Date	\$1,000.00
Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
Fund Raiser			
Name O'Furey, Bradley	Purpose: Consulting Fee	07/01/2015 Date	\$1,500.00
Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778	Check box if this expenditure is paymendebt or obligation reported on previous statement	- nt of	
Fund Raiser			
Name O'Furey, Bradley	Purpose: consulting Fee	08/03/2015 Date	\$1,500.00
Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778	Check box if this expenditure is payme debt or obligation reported on previous statement	nt of	
Fund Raiser		· · · · · · · · · · · · · · · · · · ·	
Name O'Furey, Bradley	Purpose: consulting Fee	09/02/2015 Date	\$1,500.00
Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778	Check box if this expenditure is payme debt or obligation reported on previous statement	nt of	
Fund Raiser			

Subtotal this page

\$5,500.00

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

\$27,411.21

# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Name O'Furey, Bradley Address	Purpose: consulting Fee	10/01/2015 Date	\$1,500.00
3816 Santa Fe Tr1 Ann Arbor, MI 48108-2778	Check box if this expenditure is paymen debt or obligation reported on previous statement	t of	
Fund Raiser			
Name OfficeMax	Purpose: Office Supplies	04/27/2015 Date	\$62.51
Address 2777 Oak Valley Dr Ann Arbor, MI 48103-9244	Check box if this expenditure is paymen debt or obligation reported on previous statement	t of	
Fund Raiser			
Name Paesano's Restaurant & Wine Bar	Purpose: Catering	04/23/2015 Date	\$851.90
Address 3411 Washtenaw Ave Ann Arbor, MI 48104-4205	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
✓ Fund Raiser		<u> </u>	
Name pair Networks	Purpose: web hosting	05/16/2015 Date	\$109.85
Address 2403 Sidney St Pittsburgh, PA 15203-2167	Check box if this expenditure is paymed debt or obligation reported on previous statement	- nt of	
Fund Raiser			

Subtotal this page

\$2,524.26

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

\$27,411.21

# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
O. Hadilo dila dadiood of potential			
Name		04/02/2015	\$40.54
Sage Payment Solutions	Purpose: online donation fee	Date	710.01
Address		_	
12120 Sunset Hills Rd	15.00	nt of	
Ste 500 Reston, VA 20190-5858	Check box if this expenditure is paymendebt or obligation reported on previous statement	iil Oi	
Fund Raiser		<del> </del>	
Name		05/04/2015	
Sage Payment Solutions		Date	\$218.20
<b></b>	Purpose: online donation fee	_	
Address 12120 Sunset Hills Rd			
Ste 500	Check box if this expenditure is payme	ent of	
Reston, VA 20190-5858	debt or obligation reported on previous statement	i	
Fund Raiser			
News		06/01/2015	
Name   Sage Payment Solutions		Date	\$42.32
	Purpose: online donation fee	_	
Address 12120 Sunset Hills Rd			
Ste 500	Check box if this expenditure is payme	ent of	
Reston, VA 20190-5858	debt or obligation reported on previous	3	
	statement		
Fund Raiser			
Name	· ·	07/15/2015	- \$13.19
Sage Payment Solutions	Purpose: Online donation fee	Date	213.12
Address	dipose. Offittie donacton rec	_	
12120 Sunset Hills Rd			
Ste 500	Check box if this expenditure is payme	ent of	
Reston, VA 20190-5858	debt or obligation reported on previous statement	5	
Fund Raiser			

Subtotal this page

\$314.25 \$27,411.21

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

### ITEMIZED EXPENDITURES **SCHEDULE 1B** CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
S. Name and address of potential Telephone			
Name Sage Payment Solutions	Purpose: Online donation fee	08/15/2015 Date	\$21.56
Address 12120 Sunset Hills Rd			Live ser
Ste 500 Reston, VA 20190-5858	Check box if this expenditure is paymen debt or obligation reported on previous statement	I Of	
Fund Raiser			
Name Sage Payment Solutions	Purpose: Online donation fee	09/15/2015 Date	\$79.39
Address 12120 Sunset Hills Rd Ste 500		.t of	İ
Reston, VA 20190-5858	Check box if this expenditure is paymen debt or obligation reported on previous statement	i, Oi	
Fund Raiser			
Name Satchel's BBQ	Purpose: food for volunteers	04/30/2015 Date	\$90.75
Address 3035 Washtenaw Ave Ann Arbor, MI 48104-5119	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
Fund Raiser		<u> </u>	
Name Sawicki & Son	Purpose: yard signs	05/16/2015 Date	\$1,260.34
Address 1521 W Lafayette Blvd Detroit, MI 48216-1926	Check box if this expenditure is payme	- nt of	
	debt or obligation reported on previous statement		
Fund Raiser			

Subtotal this page

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

\$1,452.04 \$27,411.21

# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

2. Committee Name Elect Sally Hart Petersen to City Council

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Name Sawicki & Son Address 1521 W Lafayette Blvd Detroit, MI 48216-1926	Purpose: Yard Signs  Check box if this expenditure is paymen debt or obligation reported on previous statement	09/16/2015 Date	\$1,508.00
Fund Raiser			v
Name Underground Printing  Address 1114 S University Ave Ann Arbor, MI 48104-2522	Purpose: TShirts  Check box if this expenditure is paymen debt or obligation reported on previous statement	05/16/2015 Date	\$1,417.86
Fund Raiser			
Name Web Arch, LLC  Address 206 Meadowbrook Dr Syracuse, NY 13210-3341	Purpose: Website Design  Check box if this expenditure is paymen debt or obligation reported on previous statement	07/28/2015 Date	\$616.25
Name Whole Foods  Address 990 W Eisenhower Pkwy Ann Arbor, MI 48103-6448	Purpose: Chili Cook Off Supplies  Check box if this expenditure is paymer debt or obligation reported on previous statement	05/16/2015  Date  - at of	\$56.54
Fund Raiser			

Subtotal this page

\$3,598.65

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

# DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE

1. Committee I.D. Nur	mber	C-20	)12-02	27		
2. Committee Name	Elect	Sally	Hart	Petersen	to	City

CANDIDATE COMMINITATE		Council			
This Schedule itemizes:	ommittee OR b. De	bts and obligations owed to or	forgiven by the	committee.	
a. 📝 Debts and obligations owed by or forgiven the c	:Offiliatee		•		
(Check	either a or b. Use only for the purp				
Name and mailing Address of person, vendor or financial institution to whom debt is owed.	Type of Obligation (Description)	7. Date and amount of each payment	8. Cumulative payment to	9. Outstanding Balance at close of this	
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	Indicate date debt was incurred     indicate original amount of debt	date on deb		period (Item 6 minus Item 8)	
Corp? Yes	4. Type:		\$0.00	\$5,000.00	
Owed to or by:					
Petersen, Sally	5. Date Debt Was Incurred:				
2976 Hickory Ln Ann Arbor, MI 48104-2865	10/18/2015		 	į	
Am Arbory Mr	6. Original Amount of Debt:			       FORGIVEN	
	\$5,000.00			PLOKGIAFIA	
If bank loan, name of endorser or guarantor:	•	Amount	Endorsed:		

Page Subtotal (Outstanding debt)

\$5,000.00

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)

\$5,000.00

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

### FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Nur	nber _					<u>,</u>
2. Committee Name	Elect	Sally	Hart	Petersen	to	City

2. Committee Name Elect Sally Hart Petersen to City Council

	- USE A SEPARA	ATE SHEET FOR EACH EVE	NT -
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	Address and Name (if any) of the place where the activity was held
	60	Kick Off fundraiser	3411 Washtenaw Ave Ann Arbor, MI 48104
04/22/2015			
			Private Residence
7. Total Contributions		\$4,550.00	
8. Other Receipts		\$0.00	
9. Gross Receipts (Add lin	nes 7 and 8)	\$4,550.00	
10. Total Cost of Event		\$851.90	*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-2012-027

2. Committee Name Elect Sally Hart Petersen to City Council

- USE A SEPARATE SHEET FOR EACH EVENT -6. Address and Name (if any) of the 5. Type of Fund Raising Activity 4. Number of Individuals Attending Date Event Was Held place where the activity was held or Participating (whichever is greater) 3340 E Dobson Place 30 Fundraiser Ann Arbor, MI 48104 09/20/2015 ✓ Private Residence \$1,700.00 7. Total Contributions \$0.00 8. Other Receipts 9. Gross Receipts (Add lines 7 and 8) \$1,700.00 \*Includes In-Kind Contributions and All Expenditures Made For the Event \$0.00 10. Total Cost of Event 11. Check if event was a joint fund raiser and complete the following: Expenditure Split Contribution Split Co-Sponsor(s) (%) (%)

- 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.