

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

1. Committee I.D. Number C-2012-027		3. This Statement covers From: 01/01/2015 To: 10/18/2015 Mo Day Year Mo Day Year	
2. Committee Name Elect Sally Hart Petersen to City Council		4. Candidate Last Name First Name M.I. Petersen Sally 4a. Office Sought including District # or Community Served (If applicable) Other - Ann Arbor City 4b. County of Residence Washtenaw	
5. Committee's Mailing Address 2976 Hickory Lane Ann Arbor, MI 48013 Area Code and Phone _____ If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		6. Treasurer's Name & Residential Address Brian Weisman 3900 Penberton Ann Arbor, MI 48105 Area Code & Phone (734) 945-1452	
7. Treasurer's Business Address 3900 Penberton Ann Arbor, MI 48105 Area Code and Phone _____		8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) Area Code & Phone _____	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> Special <input type="checkbox"/> Convention <input checked="" type="checkbox"/> General <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention, or Caucus 11/03/2015		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement _____ Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete item 9a, 9b, 9c or 9e to indicate which Statement is being amended)	
9e. <input type="checkbox"/> Dissolution of Candidate Committee By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective Date of Dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.			
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete. Current Treasurer or Designated Record Keeper Brian Weisman Type or Print Name Candidate Sally Petersen Type or Print Name Signature Date 10/22/2015 Signature Date 10/22/2015			

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

2. Committee Name Elect Sally Hart Petersen to City Council

SUMMARY PAGE
CANDIDATE COMMITTEE

RECEIPTS		Column I This Period	Column II Cumulative for this Election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.)	\$33,140.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.)	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.)	\$33,140.00	(18.) \$33,140.00
4. Other Receipts (Schedule 1A-1, Column 6)	(4.)	\$0.00	(19.) \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4)	(5.)	\$33,140.00	(20.) \$33,140.00
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.)	\$0.00	(21.) \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.)	\$0.00	(22.) \$0.00
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.)	\$27,411.21	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.)	\$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.)	\$145.17	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.)	\$27,556.38	(23.) \$27,556.38
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.)	\$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)	\$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.)	\$0.00	(24.) \$0.00
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.)	\$5,000.00	
b. Owed to the Committee (Schedule 1E)	(12b.)	\$0.00	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.)	\$1,523.12	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) +	\$33,140.00	
15. SUBTOTAL Add lines 13 and 14	(15.) =	\$34,663.12	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) -	\$27,556.38	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.)	\$7,106.74 *	

*If your ending balance is negative, please recheck your math.

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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 10/16/2015
Name & Address
Allemang, Michael
3465 Vintage Valley Road
Ann Arbor, MI 48105
\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/07/2015
Name & Address
Allen, Peter
2224 Applewood Ct
Ann Arbor, MI 48103-2304
\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 05/23/2015
Name & Address
Anderson, Lizann
191 Orchard Hills Ct
Ann Arbor, MI 48104-1826
\$200.00 \$200.00
5. If over \$100.00 cumulative, please provide:
Occupation Self Employed Employer Self Employed
Business Address 3660 Plaza Dr Ste 4 Ann Arbor, MI 48108-1685
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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, please provide:
Occupation Radiologist Employer Self Employed
Business Address 5301 E Huron River Dr Ann Arbor, MI 48105
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$600.00

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

Enter this total on line 3a of Summary Page.

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 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/22/2015

Name & Address
Austin, John
817 Berkshire Rd
Ann Arbor, MI 48104-2630

\$75.00 \$75.00

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 04/19/2015

Name & Address
Bacon, Grace
3911 Waldenwood Dr
Ann Arbor, MI 48105-3008

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 10/06/2015

Name & Address
Blessing, Thomas
1124 Brooks Street
Ann Arbor, MI 48103

\$150.00 \$150.00

5. If over \$100.00 cumulative, please provide:
Occupation Attorney 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 03/29/2015

Name & Address
Bobrin, Janis
3465 Vintage Valley Rd
Ann Arbor, MI 48105-2544

\$500.00 \$500.00

5. If over \$100.00 cumulative, please provide:
Occupation Retired Employer None
Business Address 3465 Vintage Valley Rd Ann Arbor, MI 48105-2544
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$825.00
Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

Enter this total on
line 3a of Summary
Page.

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 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/18/2015

Name & Address
Brancheau, Monica
54795 Grenelefe Cir E
South Lyon, MI 48178-9482

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 05/26/2015

Name & Address
Buatti, Carol
2988 Hickory Ln
Ann Arbor, MI 48104-2865

\$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 Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/21/2015

Name & Address
Caswell, Elizabeth
5002 Quincy Court
Saline, MI 48176

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/16/2015

Name & Address
Cocoros, Deb
1725 glenwood rd
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

Page Subtotal	\$350.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	\$33,140.00

Enter this total on
line 3a of Summary
Page.

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 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Name & Address Cohen, Harry 3140 W Dobson Pl Ann Arbor, MI 48105-2580	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>05/23/2015</u>	\$1,000.00	\$1,000.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Black Pearl</u> Business Address <u>302 S Main St Ann Arbor, MI 48104-2108</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				

3. Name & Address Cohen, Jeff 2406 Vinewood Blvd Ann Arbor, MI 48104-2768	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/22/2015</u>	\$350.00	\$350.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Advisor</u> Employer <u>Northwestern Mutual</u> Business Address <u>777 E Eisenhower Pkwy Ste 220 Ann Arbor, MI 48108-3273</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Name & Address Cooper, Howard 2405 Londonderry Rd Ann Arbor, MI 48104-4015	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>09/20/2015</u>	\$250.00	\$250.00
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address <u>2405 Londonderry Rd Ann Arbor, MI 48104-4015</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Name & Address Cooper, Richard 1808 Linwood Ave Ann Arbor, MI 48103-3663	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/01/2015</u>	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

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

Enter this total on
line 3a of Summary
Page.

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 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/14/2015

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
Business Address 3003 S State St Ann Arbor, MI 48109-1276
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/18/2015

Name & Address
Corey, James
6007 gabrielle ave
ann arbor, MI 48103

\$100.00 \$200.00

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 ☐ Loan from a person ☐ Fund Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/28/2015

Name & Address
Darling, Martha
3340 E Dobson Pl
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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/19/2015

Name & Address
Dart, Abby
1331 Sheehan Ave
1
Ann Arbor, MI 48104-3837

\$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 Raiser

Page Subtotal \$1,250.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

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

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 04/19/2015

Name & Address

Davidson, Judith
730 Heather Way
Ann Arbor, MI 48104-2732

\$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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 05/23/2015

Name & Address

Deatrick, Don
4879 Lone Oak Ct
Ann Arbor, MI 48108-8574

\$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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 04/22/2015

Name & Address

DeRose, Elizabeth
989 Aberdeen Dr
Ann Arbor, MI 48104-2807

\$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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 09/13/2015

Name & Address

Dittmar, Amy
1004 Spruce Dr
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

Page Subtotal

\$400.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

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 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/17/2015

Name & Address
Dixon, Mark
1354 Wolverhampton Ln
Ann Arbor, MI 48105-2584

\$100.00 \$100.00

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

Occupation Engineer Employer Ford Motor
Business Address 1 American Rd Dearborn, MI 48126-2701
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/20/2015

Name & Address
Dixon, Mark
1354 Wolverhampton Ln
Ann Arbor, MI 48105-2584

\$150.00 \$250.00

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

Occupation Engineer Employer Ford Motor
Business Address 1 American Rd Dearborn, MI 48126-2701
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

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

Name & Address
Dunfion, William
500 Amherst Cir
Saline, MI 48176-1366

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/12/2015

Name & Address
Easter, Janine
2204 Brockman
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

Page Subtotal \$450.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number _____

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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>10/11/2015</u>
Name & Address Friedman, Richard 811 Berkshire Rd. Ann Arbor, MI 48104			
		\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>05/23/2015</u>
Name & Address Geer, Michael 950 High School Way Apt 3214 Mountain View, CA 94041-1968			
		\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>10/12/2015</u>
Name & Address GERE, Brewster 2106 Vinewood Blvd Ann Arbor, MI 48104			
		\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>08/28/2015</u>
Name & Address Gielow, Curtis 3412 W Clubview Ct Mequon, WI 53092-5101			
		\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal \$350.00

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

Enter this total on
line 3a of Summary
Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2012-027

1. Committee I.D. Number _____

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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 08/17/2015

Name & Address

Giordani, Anne
1429 Kearney Rd
Ann Arbor, MI 48104-4061

\$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 Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/18/2015

Name & Address

Glusac, Kristina
885 Greenhills Dr
Ann Arbor, MI 48105-2719

\$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 Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 03/31/2015

Name & Address

Gronemeyer, Robert and Jessica
700 Miller Ave
Ann Arbor, MI 48103-3336

\$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 Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/01/2015

Name & Address

Gunn, Leah
2115 Nature Cove Ct
Apt 207
Ann Arbor, MI 48104-4986

\$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

Page Subtotal

\$250.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

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

3. PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>10/12/2015</u>
Name & Address Hagerup, Will 700 E Briarwood Pl Milwaukee, WI 53217	
	\$50.00 \$50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	

3. PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/21/2015</u>
Name & Address Hastie, Larry 3000 Glazier Way Apt 160 Ann Arbor, MI 48105-2591	
	\$250.00 \$250.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Investment Advisor</u> Employer <u>Retirement Income Solutions</u> Business Address <u>455 E Eisenhower Pkwy Ste 300 Ann Arbor, MI 48108-3324</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	

3. PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>03/27/2015</u>
Name & Address Hauptman, Jeff 611 Stratford Dr Ann Arbor, MI 48104-2745	
	\$500.00 \$500.00
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Oxford Property Management</u> Business Address <u>210 S 5th Ave Ann Arbor Ann Arbor, MI 48104-2216</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	

3. PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>09/20/2015</u>
Name & Address Herzig, David 3540 Windemere Dr Ann Arbor, MI 48105-2842	
	\$200.00 \$200.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>3540 Windemere Dr Ann Arbor, MI 48105-2842</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	

Page Subtotal	\$1,000.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	\$33,140.00

Enter this total on
line 3a of Summary
Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number _____

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

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

3. 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? ☐ YES 4. DATE OF RECEIPT 08/31/2015
Name & Address
Hoffer, Carol
22 Haverhill Ct
Ann Arbor, MI 48105-1407
\$25.00 \$25.00

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

Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 08/19/2015
Name & Address
Huget, Lesa
500 Barton Shore Drive
Ann Arbor, MI 48105
\$250.00 \$250.00

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

Occupation Retired Employer Retired
Business Address 500 Barton Shore Dr Ann Arbor, MI 48105-1020
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$575.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

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

3. Name & Address Ireland, Patty 356 Ausable Pl Ann Arbor, MI 48104-1810	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/20/2015</u>	\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Name & Address Jones, Carrie 7386 Laprairie Ln Ann Arbor, MI 48103-8885	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>07/30/2015</u>	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				

3. Name & Address Kerry, Karen 3031 Cedarbrook Rd Ann Arbor, MI 48105-3406	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/19/2015</u>	\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Dentist</u> Employer <u>Karen Kerry DDS, PLC</u> Business Address <u>3250 Plymouth Rd Ste 104 Ann Arbor, MI 48105-2555</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Name & Address Ketelaar, Dan 225 S. Ashley St. Ann Arbor, MI 48104	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>07/23/2015</u>	\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Urban Group Development</u> Business Address <u>225 S Ashley St Ann Arbor, MI 48104-1369</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				

Page Subtotal	\$550.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	\$33,140.00

Enter this total on
line 3a of Summary
Page.

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 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	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
Kochman, David
480 First Street
Brooklyn, NY 11215

\$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 Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 07/20/2015

Name & Address
Kotarski, John
1230 Saunders Crescent
Ann Arbor, MI 48103

\$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 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

\$200.00 \$200.00

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

Occupation retired Employer retired
Business Address 2940 Provincial Dr Ann Arbor, MI 48104-4116
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$550.00

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

Enter this total on line 3a of Summary Page.

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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/13/2015

Name & Address
Langa, Lucy and Ken
2542 Hawthorne Rd
Ann Arbor, MI 48109

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/06/2015

Name & Address
Larson, Myra
3575 E Huron River Dr
Ann Arbor, MI 48104-4237

\$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

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

Name & Address
Lax, Jerry
1015 Berkshire Rd
Ann Arbor, MI 48104-2753

\$100.00 \$100.00

5. If over \$100.00 cumulative, please provide:
Occupation Attorney Employer Bodman
Business Address 201 S Division St # 400 Ann Arbor, MI 48104-2201
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/20/2015

Name & Address
Lax, Jerry
1015 Berkshire Rd
Ann Arbor, MI 48104-2753

\$100.00 \$200.00

5. If over \$100.00 cumulative, please provide:
Occupation Attorney Employer Bodman
Business Address 201 S Division St # 400 Ann Arbor, MI 48104-2201
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

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

Enter this total on
line 3a of Summary
Page.

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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 10/13/2015

Name & Address
Le Baron, Edward
2743 Antietam Ct
Ann Arbor, MI 48105-3434

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 05/23/2015

Name & Address
Liem, Veronique
2751 Byington Blvd
Ann Arbor, MI 48105-9683

\$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 Raiser

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 08/19/2015

Name & Address
Lockwood, William
564 Galen Circle
Ann Arbor, MI 48103

\$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 Raiser

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

Name & Address
Lowenstein, Joan
502 Burson Pl
Ann Arbor, MI 48104

\$100.00 \$100.00

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

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

Enter this total on
line 3a of Summary
Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

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

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

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

Name & Address

Luckenbach, Carl
517 Oswego
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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 04/14/2015

Name & Address

Lugauer, Bernard and Roswitha
26 Haverhill Ct
Ann Arbor, MI 48105-1407

\$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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 09/20/2015

Name & Address

Malani, Preeti
705 Arlington Blvd
Ann Arbor, MI 48104-2727

\$200.00

\$200.00

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

Occupation MD

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

Page Subtotal

\$500.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

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

Cumulative 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: ☒ Direct ☐ Loan from a person ☐ 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

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 08/20/2015

Name & Address

Martin, Jenifer
3300 E Dobson Pl
Ann Arbor, MI 48105-2583

\$500.00

\$500.00

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 04/22/2015

Name & Address

Matthews, Mary
7 Southwick Ct
Ann Arbor, MI 48105-1409

\$150.00

\$150.00

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

Occupation retired

Employer retired

Business Address 7 Southwick Ct Ann Arbor, MI 48105-1409

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

Page Subtotal

\$850.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

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

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>04/22/2015</u>
Name & Address			
Matthews, Middy			
2825 Windwood Dr			
Apt 32			
Ann Arbor, MI 48105-1488			
		\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide:			
Occupation		Employer	
Business Address			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>04/19/2015</u>
Name & Address			
Maturo, Raymond			
2023 Seneca Ave			
Ann Arbor, MI 48104-2614			
		\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:			
Occupation		Employer	
Business Address			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>10/15/2015</u>
Name & Address			
McCarthy, Claire			
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: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>05/23/2015</u>
Name & Address			
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. Joseph Mercy Hospital	
Business Address 5333 McAuley Dr Ste R-2108 Ypsilanti, MI 48197-1014			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal	\$450.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	\$33,140.00

Enter this total on
line 3a of Summary
Page.

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 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/18/2015</u>
Name & Address Meyer, Patricia 1716 Shadford Rd Ann Arbor, MI 48104-4544	
	\$100.00 \$100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	

3. PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/22/2015</u>
Name & Address Miller, Jane 760 Watershed Dr Ann Arbor, MI 48105-2570	
	\$75.00 \$75.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	

3. PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>09/20/2015</u>
Name & Address Miller, Kevin 1041 Arlington Blvd Ann Arbor, MI 48104-2815	
	\$25.00 \$25.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	

3. PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>05/26/2015</u>
Name & Address Miller, Phillip & Ayumi 1615 Brooklyn Ave Ann Arbor, MI 48104-4420	
	\$100.00 \$100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	

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

Enter this total on
line 3a of Summary
Page.

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

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>04/22/2015</u>
Name & Address Millman, Darren 1505 Sheridan Dr Ann Arbor, MI 48104-4051			
		\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>05/23/2015</u>
Name & Address Milshtyen, Alex 315 2nd St Apt 516 Ann Arbor, MI 48103-4991			
		\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide: Occupation Realtor Employer Coldwell Banker Business Address 1898 W Stadium Blvd Ann Arbor, MI 48103-4504 Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>08/19/2015</u>
Name & Address Morgan, Daniel 2967 Devonshire Road Ann Arbor, MI 48104			
		\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>08/28/2015</u>
Name & Address Nelson, Stewart 2975 Hickory Ln Ann Arbor, MI 48104-2840			
		\$200.00	\$200.00
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: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal \$500.00
Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

Enter this total on line 3a of Summary Page.

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

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>04/20/2015</u>
Name & Address Newman, Haskell 1071 Young Place Ann Arbor, MI 48105			
		\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address <u>1071 Young Pl Ann Arbor, MI 48105-2587</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>09/16/2015</u>
Name & Address Newman, Haskell 1071 Young Place Ann Arbor, MI 48105			
		\$250.00	\$350.00
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address <u>1071 Young Pl Ann Arbor, MI 48105-2587</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>04/05/2015</u>
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 <u>retired</u> Employer <u>retired</u> Business Address <u>1071 Young Pl Ann Arbor, MI 48105-2587</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>09/16/2015</u>
Name & Address Newman, Jan Barney 1071 Young Place Ann Arbor, MI 48105			
		\$250.00	\$350.00
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address <u>1071 Young Pl Ann Arbor, MI 48105-2587</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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

Enter this total on
line 3a of Summary
Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

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

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 05/22/2015

Name & Address

Panitch, Jack
501 Burson Pl
Ann Arbor, MI 48104-2601

\$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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 09/20/2015

Name & Address

Parkes, Janet
2115 Nature Cove Ct
Apt 210
Ann Arbor, MI 48104-5406

\$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

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

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 04/14/2015

Name & Address

Peck, Lawrence
410 Highland Rd
Ann Arbor, MI 48104-1730

\$200.00

\$200.00

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

Occupation Marketing _____ Employer General Motors _____

Business Address Renaissance Center Dearborn, MI 48243

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

Page Subtotal

\$425.00

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

\$33,140.00

Enter this total on
line 3a of Summary
Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number _____

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

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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/15/2015

Name & Address

Peck, Lawrence
410 Highland Rd
Ann Arbor, MI 48104-1730

\$100.00

\$300.00

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

Occupation Marketing Employer General Motors

Business Address Renaissance Center Dearborn, MI 48243

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

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

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

Occupation Marketing Employer General Motors

Business Address Renaissance Center Dearborn, MI 48243

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 Ln
Ann Arbor, MI 48105-2578

\$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

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

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

Occupation Retired Employer Retired

Business Address 3207 Chamberlain Cir Ann Arbor, MI 48103-8866

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

Page Subtotal

\$1,300.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

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

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 03/29/2015

Name & Address

Petersen, Sally
2976 Hickory Ln
Ann Arbor, MI 48104-2865

\$10,000.00

\$10,000.00

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

Occupation None

Employer None

Business Address 2989 Hickory Ln Ann Arbor, MI 48104-2840

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 10/18/2015

Name & Address

Petersen, Sally
2976 Hickory Ln
Ann Arbor, MI 48104-2865

\$5,000.00

\$5,000.00

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

Occupation None

Employer None

Business Address 2989 Hickory Ln Ann Arbor, MI 48104-2840

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 09/20/2015

Name & Address

Polcek, Norma
1019 Brae Burn Ln
Rockford, IL 61107-3808

\$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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 10/12/2015

Name & Address

Pollock, Rob and Jill
2038 Winsted
Ann Arbor, MI 48103

\$250.00

\$250.00

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

Occupation Registered Investment

Employer Pollock Investment

Business Address 412 E Huron St Ann Arbor, MI 48104-5904

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

Page Subtotal

\$15,350.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
\$250.00	\$250.00
\$25.00	\$25.00
\$50.00	\$50.00
\$50.00	\$50.00

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/01/2015

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 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 04/10/2015

Name & Address

Radina, Travis
2750 Windwood Dr
Apt 146
Ann Arbor, MI 48105-1494

\$25.00 \$25.00

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

Occupation Employer

Business Address

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

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:

Occupation Employer

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 \$50.00

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

Occupation Employer

Business Address

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

Page Subtotal

\$375.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number

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

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 03/31/2015

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 48104-2116

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

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 48104-2116

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 10/17/2015

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 48104-2116

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

3. PAC Receipt? ☐ YES

4. 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 Employer self

Business Address 2100 Scottwood Ave Ann Arbor, MI 48104-4511

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

Page Subtotal

\$650.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

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 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Name & Address Rosenberg, Jeri 2100 Scottwood Ave Ann Arbor, MI 48104-4511	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/22/2015</u>	\$100.00	\$200.00
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5. If over \$100.00 cumulative, please provide:

Occupation artist Employer self
Business Address 2100 Scottwood Ave Ann Arbor, MI 48104-4511
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Name & Address Ruud, Heidi 3404 E Dobson Pl Ann Arbor, MI 48105-2583	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>09/20/2015</u>	\$100.00	\$100.00
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5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Name & Address Saint, Veronica & Sanjay 2203 Lafayette Rd Ann Arbor, MI 48104-1735	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>03/28/2015</u>	\$100.00	\$100.00
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5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Name & Address Schooner, Susan 2531 Jackson Ave # 188 Ann Arbor, MI 48103-3818	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>04/13/2015</u>	\$500.00	\$500.00
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5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer Retired
Business Address 2531 Jackson Ave # 188 Ann Arbor, MI 48103-3818
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$800.00
Grand Total of all Schedules 1A (Complete on last page of Schedule) \$33,140.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number _____

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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/20/2015

Name & Address
Scott, Doug
1525 Harding Rd
Ann Arbor, MI 48104-4537

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 09/20/2015

Name & Address
Sheng, Cynthia
3079 Exmoor Rd
Ann Arbor, MI 48104-4122

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 04/04/2015

Name & Address
Shepherd, Amy
725 Arlington Blvd
Ann Arbor, MI 48104-2727

\$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

3. PAC Receipt? ☐ YES 4. DATE OF RECEIPT 03/28/2015

Name & Address
Smith, Collyer
1693 Cypress Pointe Ct
Ann Arbor, MI 48108

\$100.00 \$100.00

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

Occupation None Employer None

Business Address 1693 Cypress Pointe Ct Ann Arbor, MI 48108-8505

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

Page Subtotal \$400.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number _____

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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
\$100.00	\$200.00
\$100.00	\$100.00
\$50.00	\$50.00
\$50.00	\$100.00

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 09/14/2015

Name & Address

Smith, Collyer
1693 Cypress Pointe Ct
Ann Arbor, MI 48108

\$100.00 \$200.00

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

Occupation None

Employer None

Business Address 1693 Cypress Pointe Ct Ann Arbor, MI 48108-8505

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 04/19/2015

Name & Address

Smith, Radley & Sandra
3188 Rumsey Drive
Ann Arbor, MI 48105-3436

\$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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 04/22/2015

Name & Address

Studer, Marlana
3204 W Dobson Pl
Ann Arbor, MI 48105-2580

\$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 Raiser

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 09/20/2015

Name & Address

Studer, Marlana
3204 W Dobson Pl
Ann Arbor, MI 48105-2580

\$50.00 \$100.00

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

Occupation _____

Employer _____

Business Address _____

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

Page Subtotal

\$300.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

C-2012-027

1. Committee I.D. Number _____

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

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

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 04/22/2015

Name & Address

Talburtt, Peg
2917 Philadelphia Dr
Ann Arbor, MI 48103-6813

\$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 Raiser

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 09/20/2015

Name & Address

Teall, Margie
1208 Brooklyn Ave
Ann Arbor, MI 48104-4311

\$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 Raiser

3. PAC Receipt? ☐ YES

4. DATE OF RECEIPT 09/15/2015

Name & Address

Thurston, Dave
1750 Meadowside Drive
Ann Arbor, MI 48104

\$40.00

\$40.00

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 06/02/2015

Name & Address

Turcotte, Claire
1 Regent Dr
Ann Arbor, MI 48104-1738

\$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 Raiser

Page Subtotal

\$190.00

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

\$33,140.00

Enter this total on line 3a of Summary Page.

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

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>05/26/2015</u>
Name & Address Weisman, Brian 3900 Penberton Dr Ann Arbor, MI 48105-3021			
		\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Columbia Asset Management</u> Business Address <u>213 W Liberty St Ste 110 Ann Arbor, MI 48104-1398</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>04/22/2015</u>
Name & Address Wood, Pam 1375 Burgundy Rd Ann Arbor, MI 48105-2524			
		\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>1375 Burgundy Rd Ann Arbor, MI 48105-2524</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

3.	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT	<u>09/20/2015</u>
Name & Address Zemke, Adam 120 1/2 E Washington St Ann Arbor, MI 48104-1905			
		\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal	\$500.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	\$33,140.00

Enter this total on line 3a of Summary Page.

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
Name Adobe Systems Address 345 Park Ave San Jose, CA 95110-2704 <input type="checkbox"/> Fund Raiser	Purpose: <u>Graphic Design</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/2015</u> Date	<u>\$28.26</u>
Name Adobe Systems Address 345 Park Ave San Jose, CA 95110-2704 <input type="checkbox"/> Fund Raiser	Purpose: <u>graphic design</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/2015</u> Date	<u>\$52.99</u>
Name Ann Arbor Democratic Party Address PO Box 7497 Ann Arbor, MI 48107-7497 <input type="checkbox"/> Fund Raiser	Purpose: <u>Meeting Sponsorship</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/23/2015</u> Date	<u>\$75.00</u>
Name Ann Arbor Huron High School Address 2727 Fuller Rd Ann Arbor, MI 48105-2449 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/22/2015</u> Date	<u>\$100.00</u>

Subtotal this page

\$256.25

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

\$27,411.21

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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 Address 2390 Winewood Ave Ann Arbor, MI 48103-3841 <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad Space</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/24/2015</u> Date	<u>\$1,273.40</u>
Name Ann Arbor Observer Address 2390 Winewood Ave Ann Arbor, MI 48103-3841 <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad Space</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/2015</u> Date	<u>\$1,273.40</u>
Name Ann Arbor Observer Address 2390 Winewood Ave Ann Arbor, MI 48103-3841 <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad Space</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/2015</u> Date	<u>\$1,323.40</u>
Name Change Media Group Address 1000 S Washington Ave # 101 Lansing, MI 48910-1661 <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/22/2015</u> Date	<u>\$950.00</u>

Subtotal this page \$4,820.20

Grand Total of All Schedules 1B
(Complete on last page of Schedule) \$27,411.21

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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
Name Frushour, Casey Address 1177 Addington Ln Ann Arbor, MI 48108-8946 <input type="checkbox"/> Fund Raiser	Purpose: <u>Graphic Design</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/16/2015</u> Date	<u>\$325.00</u>
Name Green Road Post Office Address 3000 Green Rd Ann Arbor, MI 48105-1511 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/20/2015</u> Date	<u>\$26.46</u>
Name Green Road Post Office Address 3000 Green Rd Ann Arbor, MI 48105-1511 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2015</u> Date	<u>\$14.70</u>
Name Green Road Post Office Address 3000 Green Rd Ann Arbor, MI 48105-1511 <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/24/2015</u> Date	<u>\$29.40</u>

Subtotal this page

\$395.56

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

\$27,411.21

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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 Green Road Post Office Address 3000 Green Rd Ann Arbor, MI 48105-1511 <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/29/2015</u> Date	<u>\$105.00</u>
Name Green Road Post Office Address 3000 Green Rd Ann Arbor, MI 48105-1511 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/29/2015</u> Date	<u>\$105.00</u>
Name Inland Press Address 2001 W Lafayette Blvd Detroit, MI 48216-1852 <input type="checkbox"/> Fund Raiser	Purpose: <u>Letterhead</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/22/2015</u> Date	<u>\$721.56</u>
Name Inland Press Address 2001 W Lafayette Blvd Detroit, MI 48216-1852 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/04/2015</u> Date	<u>\$1,014.42</u>

Subtotal this page \$1,945.98

Grand Total of All Schedules 1B
(Complete on last page of Schedule) \$27,411.21

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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 Meijer Address 3145 Ann Arbor Saline Rd Ann Arbor, MI 48103-9711 <input type="checkbox"/> Fund Raiser	Purpose: <u>Chili Cook Off Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/16/2015</u> Date	<u>\$52.58</u>
Name Meijer Address 3145 Ann Arbor Saline Rd Ann Arbor, MI 48103-9711 <input type="checkbox"/> Fund Raiser	Purpose: <u>Food for Volunteers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/24/2015</u> Date	<u>\$27.25</u>
Name Meijer Address 3145 Ann Arbor Saline Rd Ann Arbor, MI 48103-9711 <input type="checkbox"/> Fund Raiser	Purpose: <u>Candy for parade</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/06/2015</u> Date	<u>\$186.01</u>
Name Messenger Printing Address 20136 Ecorse Rd Taylor, MI 48180-1957 <input type="checkbox"/> Fund Raiser	Purpose: <u>Direct Mail</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/2015</u> Date	<u>\$1,390.92</u>

Subtotal this page	\$1,656.76
Grand Total of All Schedules 1B (Complete on last page of Schedule)	\$27,411.21

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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
Name Messenger Printing Address 20136 Ecorse Rd Taylor, MI 48180-1957 <input type="checkbox"/> Fund Raiser	Purpose: <u>post cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/15/2015</u> Date	<u>\$263.94</u>
Name Netbrands Address 14550 Beechnut St Houston, TX 77083-5741 <input type="checkbox"/> Fund Raiser	Purpose: <u>Website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/2015</u> Date	<u>\$333.32</u>
Name NGP VAN Address 1101 15th St NW Ste 500 Washington, DC 20005-5006 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Database</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/02/2015</u> Date	<u>\$450.00</u>
Name NGP VAN Address 1101 15th St NW Ste 500 Washington, DC 20005-5006 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Database</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/12/2015</u> Date	<u>\$450.00</u>

Subtotal this page

\$1,497.26

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

\$27,411.21

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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
<p>Name NGP VAN</p> <p>Address 1101 15th St NW Ste 500 Washington, DC 20005-5006</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Campaign Database</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>08/01/2015</u> Date</p>	<p><u>\$450.00</u></p>
<p>Name O'Furey, Bradley</p> <p>Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Consulting Fee</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>03/02/2015</u> Date</p>	<p><u>\$1,000.00</u></p>
<p>Name O'Furey, Bradley</p> <p>Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Consulting</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>03/31/2015</u> Date</p>	<p><u>\$1,000.00</u></p>
<p>Name O'Furey, Bradley</p> <p>Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Consulting Fee</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>05/01/2015</u> Date</p>	<p><u>\$1,000.00</u></p>

Subtotal this page \$3,450.00
Grand Total of All Schedules 1B
(Complete on last page of Schedule) \$27,411.21

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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 O'Furey, Bradley Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778 <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/01/2015</u> Date	<u>\$1,000.00</u>
Name O'Furey, Bradley Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778 <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/01/2015</u> Date	<u>\$1,500.00</u>
Name O'Furey, Bradley Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778 <input type="checkbox"/> Fund Raiser	Purpose: <u>consulting Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/2015</u> Date	<u>\$1,500.00</u>
Name O'Furey, Bradley Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778 <input type="checkbox"/> Fund Raiser	Purpose: <u>consulting Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/02/2015</u> Date	<u>\$1,500.00</u>

Subtotal this page \$5,500.00
Grand Total of All Schedules 1B
(Complete on last page of Schedule) \$27,411.21
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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 O'Furey, Bradley Address 3816 Santa Fe Trl Ann Arbor, MI 48108-2778 <input type="checkbox"/> Fund Raiser	Purpose: <u>consulting Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2015</u> Date	<u>\$1,500.00</u>
Name OfficeMax Address 2777 Oak Valley Dr Ann Arbor, MI 48103-9244 <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/27/2015</u> Date	<u>\$62.51</u>
Name Paesano's Restaurant & Wine Bar Address 3411 Washtenaw Ave Ann Arbor, MI 48104-4205 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Catering</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/23/2015</u> Date	<u>\$851.90</u>
Name pair Networks Address 2403 Sidney St Pittsburgh, PA 15203-2167 <input type="checkbox"/> Fund Raiser	Purpose: <u>web hosting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/16/2015</u> Date	<u>\$109.85</u>

Subtotal this page \$2,524.26

Grand Total of All Schedules 1B
(Complete on last page of Schedule) \$27,411.21

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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 Sage Payment Solutions Address 12120 Sunset Hills Rd Ste 500 Reston, VA 20190-5858 <input type="checkbox"/> Fund Raiser	Purpose: <u>online donation fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/02/2015</u> Date	<u>\$40.54</u>
Name Sage Payment Solutions Address 12120 Sunset Hills Rd Ste 500 Reston, VA 20190-5858 <input type="checkbox"/> Fund Raiser	Purpose: <u>online donation fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/04/2015</u> Date	<u>\$218.20</u>
Name Sage Payment Solutions Address 12120 Sunset Hills Rd Ste 500 Reston, VA 20190-5858 <input type="checkbox"/> Fund Raiser	Purpose: <u>online donation fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/01/2015</u> Date	<u>\$42.32</u>
Name Sage Payment Solutions Address 12120 Sunset Hills Rd Ste 500 Reston, VA 20190-5858 <input type="checkbox"/> Fund Raiser	Purpose: <u>Online donation fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/15/2015</u> Date	<u>\$13.19</u>

Subtotal this page \$314.25

Grand Total of All Schedules 1B
(Complete on last page of Schedule) \$27,411.21

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line 8a of Summary
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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 Sage Payment Solutions Address 12120 Sunset Hills Rd Ste 500 Reston, VA 20190-5858 <input type="checkbox"/> Fund Raiser	Purpose: <u>Online donation fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/15/2015</u> Date	<u>\$21.56</u>
Name Sage Payment Solutions Address 12120 Sunset Hills Rd Ste 500 Reston, VA 20190-5858 <input type="checkbox"/> Fund Raiser	Purpose: <u>Online donation fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/15/2015</u> Date	<u>\$79.39</u>
Name Satchell's BBQ Address 3035 Washtenaw Ave Ann Arbor, MI 48104-5119 <input type="checkbox"/> Fund Raiser	Purpose: <u>food for volunteers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/30/2015</u> Date	<u>\$90.75</u>
Name Sawicki & Son Address 1521 W Lafayette Blvd Detroit, MI 48216-1926 <input type="checkbox"/> Fund Raiser	Purpose: <u>yard signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/16/2015</u> Date	<u>\$1,260.34</u>

Subtotal this page \$1,452.04
Grand Total of All Schedules 1B
(Complete on last page of Schedule) \$27,411.21

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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
<p>Name Sawicki & Son</p> <p>Address 1521 W Lafayette Blvd Detroit, MI 48216-1926</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Yard Signs</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>09/16/2015</u> Date</p>	<p><u>\$1,508.00</u></p>
<p>Name Underground Printing</p> <p>Address 1114 S University Ave Ann Arbor, MI 48104-2522</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>TShirts</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>05/16/2015</u> Date</p>	<p><u>\$1,417.86</u></p>
<p>Name Web Arch, LLC</p> <p>Address 206 Meadowbrook Dr Syracuse, NY 13210-3341</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Website Design</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>07/28/2015</u> Date</p>	<p><u>\$616.25</u></p>
<p>Name Whole Foods</p> <p>Address 990 W Eisenhower Pkwy Ann Arbor, MI 48103-6448</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Chili Cook Off Supplies</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>05/16/2015</u> Date</p>	<p><u>\$56.54</u></p>

Subtotal this page

\$3,598.65

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

\$27,411.21

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line 8a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

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

2. Committee Name Elect Sally Hart Petersen to City Council

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.

(Check either a or b. Use only for the purpose checked.)

3. Name and mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
<p style="text-align: right;">Corp? <input type="checkbox"/> Yes</p> <p>Owed to or by: Petersen, Sally 2976 Hickory Ln Ann Arbor, MI 48104-2865</p>	<p>4. Type:</p> <p>5. Date Debt Was Incurred: <u>10/18/2015</u></p> <p>6. Original Amount of Debt: <u>\$5,000.00</u></p>		\$0.00	<p>\$5,000.00</p> <p><input type="checkbox"/> FORGIVEN</p>
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

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

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

C-2012-027

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____

2. Committee Name Elect Sally Hart Petersen to City Council

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 04/22/2015	4. Number of Individuals Attending or Participating (whichever is greater) 60	5. Type of Fund Raising Activity Kick Off fundraiser	6. Address and Name (if any) of the place where the activity was held 3411 Washtenaw Ave Ann Arbor, MI 48104 <input type="checkbox"/> Private Residence
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7. Total Contributions	\$4,550.00
8. Other Receipts	\$0.00
9. Gross Receipts (Add lines 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.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**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 -

3. Date Event Was Held 09/20/2015	4. Number of Individuals Attending or Participating (whichever is greater) 30	5. Type of Fund Raising Activity Fundraiser	6. Address and Name (if any) of the place where the activity was held 3340 E Dobson Place Ann Arbor, MI 48104 <input checked="" type="checkbox"/> Private Residence
--	--	--	---

7. Total Contributions	\$1,700.00
8. Other Receipts	\$0.00
9. Gross Receipts (Add lines 7 and 8)	\$1,700.00
10. Total Cost of Event	\$0.00

*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 (1-1K), 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.