



**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.

<p>1. Committee I.D. Number C-2015-019</p> <p>2. Committee Name Jason Morgan for County Commissioner</p>		<p>3. This Statement covers From: <u>11/27/18</u> to <u>07/20/19</u></p> <p>4. Candidate Last Name Morgan First Name Jason M.I. _____</p> <p>4a. Office Sought Including District # or Community Served (If applicable) Washtenaw County Commissioner District 8</p> <p>4b. County of Residence WASHTENAW</p>	
<p>5. Committee's Mailing Address 2860 Gladstone Ann Arbor, MI 48104</p> <p>Area Code and Phone <u>(989) 751-6287</u> 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.</p>		<p>6. Treasurer's Name & Residential Address Leah Gunn 2115 Nature Cove Ct. No. 207 Ann Arbor, MI 48104</p> <p>Area Code & Phone <u>(734) 845-8346</u></p>	
<p>7. Treasurer's Business Address</p> <p>Area Code and Phone _____</p>		<p>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)</p> <p>Area Code and Phone _____</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus _____</p>		<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input checked="" type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	
		<p>9e. Dissolution of Candidate Committee</p> <p><input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>	
<p>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.</p>			
<p>Current Treasurer or Designated Record keeper Leah Gunn Type or Print Name</p>		<p><i>Leah Gunn</i> Signature</p> <p>Date <u>7/21/19</u></p>	
<p>Candidate Jason Morgan Type or Print Name</p>		<p><i>J Morgan</i> Signature</p> <p>Date <u>7/25/19</u></p>	

FILED
 WASHTENAW COUNTY, MI
 2019 JUL 25 P 4:45
 LAWRENCE KESTERBAUM
 COUNTY CLERK/REGISTRAR



1. Committee I.D. Number C-2015-019

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Jason Morgan for County Commissioner

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1,310.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$1,310.00</u>	(18.) \$ <u>\$1,310.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$1,310.00</u>	(20.) \$ <u>\$1,310.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,155.98</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u></u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$298.61</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$1,454.59</u>	(23.) \$ <u>\$1,454.59</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u></u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u></u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u></u>	(24.) \$ <u></u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u></u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u></u>	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$4,956.32</u>
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$1,310.00</u>
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$6,266.32</u>
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$1,454.59</u>
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$4,811.73</u> *



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2015-019
2. Committee Name Jason Morgan for County Commissioner

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

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/27/19
Name & Address:
Joan Lowenstein
502 Burson
Ann Arbor MI 48104

6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation Attorney Employer Jaffe Raitt
Business Address 535 W. William, Ann Arbor MI 48103
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/03/19
Name & Address:
Richard Chang
1950 Manchester
Ann Arbor MI 48104

\$ 30.00 \$ 30.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/08/19
Name & Address:
Patrick Zabawa
11715 Kenton
Whitmore Lake MI 48189

\$ 30.00 \$ 30.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/10/19
Name & Address:
Tyler Schwab
8130 Aberdeen
Wauwatosa WI 53213

\$ 30.00 \$ 30.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
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)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2015-019

2. Committee Name Jason Morgan for County Commissioner

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Contribution # 1 Name & Address: Robert Gordon 2328 Fernwood Ann Arbor MI 48104	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/10/19</u>	\$ <u>60.00</u>	\$ <u>60.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Contribution #2 Name & Address: Deb Polich 2585 Hollywood Dr. Ann Arbor MI 48103	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/10/19</u>	\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Contribution # 3 Name & Address: Kellie Lounds 1111 S. State #6 Ann Arbor MI 48104	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/10/19</u>	\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Contribution # 4 Name & Address: Joshua LeVasseur 413 E. Kingsley #1 Ann Arbor MI 48104	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/14/19</u>	\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

Page Subtotal **\$150.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2015-019
2. Committee Name Jason Morgan for County Commissioner

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/14/19</u>	
Name & Address: Steve Culver PO Box 7117 Ann Arbor MI 48107		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/19</u>	
Name & Address: Ashleigh Spatt 4519 Hunt Club Dr., #1A Ypsilanti MI 48197		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/16/19</u>	
Name & Address: Susan Shink 600 W. Joy Ann Arbor MI 48105		\$ <u>60.00</u>	\$ <u>60.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/16/19</u>	
Name & Address: Shannon Beeman 103 E. Duncan Manchester MI 48158		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$150.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2015-019

2. Committee Name Jason Morgan for County Commissioner

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/16/19</u>		
Name & Address: Anna Frushour 5298 Crown Ct. Ann Arbor MI 4818				
			\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide:				
Occupation <u>Attorney</u>		Employer <u>Frushour Law</u>		
Business Address <u>122 S. Main #260, Ann Arbor MI 48104</u>				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

[Click Here for Memo Itemization](#)

3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/16/19</u>		
Name & Address: Suzanne Perkins 545 Archwood Ann Arbor MI 48103				
			\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide:				
Occupation _____		Employer _____		
Business Address _____				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

[Click Here for Memo Itemization](#)

3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/16/19</u>		
Name & Address: Travis Radina 2060 Champagne Ann Arbor MI 48108				
			\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide:				
Occupation _____		Employer _____		
Business Address _____				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

[Click Here for Memo Itemization](#)

3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/16/19</u>		
Name & Address: Carrie Rheingans 2557 Miller Ann Arbor MI 48103				
			\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide:				
Occupation _____		Employer _____		
Business Address _____				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

[Click Here for Memo Itemization](#)

Page Subtotal **\$190.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2015-019

2. Committee Name Jason Morgan for County Commissioner

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/16/19

Name & Address:
Erane Washington
8409 S. Huron River Dr.
Ypsilanti MI 48197

\$ 30.00 \$ 30.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/16/19

Name & Address:
Carol Kuhnke
1720 Longshore
Ann Arbor MI 48103

\$ 60.00 \$ 60.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/16/19

Name & Address:
Eli Savit
201 W. Summit
Ann Arbor MI 48103

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Legal Counsel Employer City of Detroit

Business Address 2 Woodward Ave., Detroit MI 48226

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/16/19

Name & Address:
Maria Sheler-Edwards
51 Colony Ct.
Ypsilanti MI 48197

\$ 30.00 \$ 30.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal **\$220.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2015-019

2. Committee Name Jason Morgan for County Commissioner

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

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/16/19

Name & Address:
Bridget McCormack
1982 High Hollow
Ann Arbor MI 48103

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

\$ 150.00 \$ 150.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Chief Justice Employer Michigan Supreme Court

Business Address 925 W. Ottawa, Lansing MI 48915

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/16/19

Name & Address:
Rodrick Green
1889 Ashley
Ypsilanti MI 48198

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

\$ 75.00 \$ 75.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/16/19

Name & Address:
Christopher Easthope
1707 Dunmore
Ann Arbor MI 48103

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

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/17/19

Name & Address:
Leslie Sobel
1314 Beechwood
Ann Arbor MI 48103

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

\$ 30.00 \$ 30.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal **\$305.00**

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

Enter this total on
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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2015-019
2. Committee Name Jason Morgan for County Commissioner

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/17/19</u>	
Name & Address: Elizabeth Nash 2305 S. Circle Ann Arbor MI 48103		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/17/19</u>	
Name & Address: Jessica Alexander 3485 Greenleaf Ann Arbor MI 48105		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/17/19</u>	
Name & Address: Alison Todak 2118 N. Circle Ann Arbor MI 48103		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address: _____ _____ _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$105.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2015-019
2. Committee Name Jason Morgan for County Commissioner

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Sprint PCS Address 6200 Sprint Pkwy. Overland Park KS 66251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cell phone</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/02/19</u> Date	<u>\$ 93.71</u> Click Here for Memo Itemization Type
Expenditure #2 Name Sprint PCS Address 6200 Sprint Pkwy. Overland Park KS 66251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cell phone</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/20/19</u> Date	<u>\$ 93.25</u> Click Here for Memo Itemization Type
Expenditure #3 Name Say Yes To Mental Health Address 2411 Meadowridge Ann Arbor MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser event ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/07/19</u> Date	<u>\$ 100.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name GoDaddy.com Address 14455 North Hayden Road Scottsdale AZ 85260 <input type="checkbox"/> Fund Raiser	Purpose: <u>Web services</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/21/19</u> Date	<u>\$ 90.85</u> Click Here for Memo Itemization Type
Expenditure #5 Name Sprint PCS Address 6200 Sprint Pkwy. Overland Park KS 66251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cell phone</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/23/19</u> Date	<u>\$ 93.25</u> Click Here for Memo Itemization Type

Subtotal this page 471.06

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2015-019
2. Committee Name Jason Morgan for County Commissioner

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Sprint PCS Address 6200 Sprint Pkwy. Overland Park, KS 66251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cell service</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/23/19</u> Date	<u>\$ 93.25</u> Click Here for Memo Itemization Type
Expenditure #2 Name UM College Democrats Address 809 Catherine Ann Arbor MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/07/19</u> Date	<u>\$ 100.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name Sprint PCS Address 6200 Sprint Pkwy. Overland Park, KS 66251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cell service</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/23/19</u> Date	<u>\$ 93.25</u> Click Here for Memo Itemization Type
Expenditure #4 Name Sprint PCS Address 6200 Sprint Pkwy. Overland Park, KS 66251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cell service</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/23/19</u> Date	<u>\$ 93.25</u> Click Here for Memo Itemization Type
Expenditure #5 Name Sprint PCS Address 6200 Sprint Pkwy. Overland Park, KS 66251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cell service</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/23/19</u> Date	<u>\$ 93.25</u> Click Here for Memo Itemization Type

Subtotal this page **\$473.00**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2015-019
2. Committee Name Jason Morgan for County Commissioner

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Costco Address 711 Airport Blvd. Ann Arbor MI 48108 <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade candy</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/03/19</u> Date	\$ <u>111.92</u> Click Here for Memo Itemization Type
Expenditure #2 Name Jim Toy Community Center Address 319 Braun Ann Arbor MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Event sponsorship</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/12/19</u> Date	\$ <u>100.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type

Subtotal this page **\$211.92**

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

Enter this total
on line 8a of
Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2015-019
2. Committee Name Jason Morgan for County Commissioner

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>07/16/19</u>	4. Number of Individuals Attending or Participating (whichever is greater) 40	5. Type of Fund Raising Activity Reception	6. Address and Name (If any) of the place where the activity was held. AutBar 315 Braun Ct. Ann Arbor MI 48104 <input type="checkbox"/> Private Residence
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7. Total Contributions \$1,310.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$1,310.00

10. Total Cost of Event \$0.00
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.