



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 07/20/19 to 10/20/19

<p>1. Committee I.D. Number C-2019-007</p> <p>2. Committee Name Committe to Elect Arianne Slay</p>	<p>4. Candidate Last Name SLAY First Name ARIANNE M.I. _____</p> <p>4a. Office Sought Including District # or Community Served (If applicable) PROSECUTING ATTORNEY</p> <p>4b. County of Residence Washtenaw</p>
<p>5. Committee's Mailing Address P.O. BOX 97243 YPSILANTI, MI 48197</p> <p>Area Code and Phone <u>(734) 717-0293</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 YASMINE TUCKER 237 DEPUY AVE #3 JACKSON, MI 49203</p> <p>Area Code & Phone <u>(954) 860-1755</u></p>
<p>7. Treasurer's Business Address P.O. BOX 97243 YPSILANTI, MI 48197</p> <p>Area Code and Phone <u>(954) 860-1755</u></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>

FILED
 WASHTEAW COUNTY, MI
 2019 OCT 24 A 12:21
 LAWRENCE KESTENBUM
 COUNTY CLERK/REGISTRAR

<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 type="checkbox"/> July Quarterly <input checked="" 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 lates 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>
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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 Yasmine Tucker Signature [Signature] Date 10/23/19

Candidate Arianne Slay Signature [Signature] Date 10/23/19



1. Committee I.D. Number c-2019-007

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Arianne Slay

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>30,185.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$30,185.00</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$30,185.00</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$472.02</u>	(21.) \$ <u>\$501.66</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$11,250.19</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$11,250.19</u>	(23.) \$ <u>\$11,292.59</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$2,157.60</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$30,185.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$3,242.60</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$11,250.19</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$21,092.41</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-007
2. Committee Name Committee to Elect Arianne Slay

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>07/26/19</u> Name & Address: Cynthia Fisher Rower 502 Terrance Blvd., Redondo Beach, CA 90277	\$ <u>7,100.00</u>	\$ <u>7,100.00</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Physician</u> Employer <u>Health Care Partners</u> Business Address <u>502 Terrance Blvd., Redondo Beach, CA 90277</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/26/19</u> Name & Address: Eric Gutenberg 233 Crest Street Ann Arbor, MI 48103	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Attorney</u> Employer <u>Washtenaw County Gov't</u> Business Address <u>200 N. Main St., Ann Arbor, MI 48107</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/19</u> Name & Address: Wiliam Amadeo 4158 Persimmon Dr. Ypsilanti, MI 48197	\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Attorney</u> Employer <u>Grabel & Associates</u> Business Address <u>2500 Packard St., Suite 106, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/19</u> Name & Address: Matthew McManus 2500 Packard St. Ann Arbor, MI 48104	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization 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 **\$7,850.00**

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-2019-007
2. Committee Name Committee to Elect Arianne Slay

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>07/29/19</u> Name & Address: Arianne Slay 6092 Aspen Way Ypsilanti, MI 48197		\$ <u>10.00</u>	\$ <u>284.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron, Ann Arbor, MI 48107</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Betsy Blake 6530 Heron Ct. Ann Arbor, MI 48103		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron, Ann Arbor, MI 48107</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Ronald M Rowe 9 Dorado PL Palos Verdes Peninsu, CA 90274		\$ <u>7000.00</u>	\$ <u>7000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Karen Field 9492 Spring Hollow Ct Dexter, MI 48130		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$7,360.00**

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 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>08/05/19</u> Name & Address: Brenda Quiet 1917 Harley Dr. Ann Arbor, MI 48103 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	\$ <u>50.00</u>	\$ <u>50.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Amy Reiser 6260 Sterling Trl Dexter, MI 48130 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	\$ <u>50.00</u>	\$ <u>50.00</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Kari Dorr 6726 Robinson Ln. Saline, MI 48176 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	\$ <u>50.00</u>	\$ <u>50.00</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: LeAnn Belkonen 17800 W Old US Highway 12 Chelsea, MI 48118 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	\$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization

Page Subtotal **\$250.00**

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 2019-007

2. Committee Name Committee to Elect Arianne Slay

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>08/05/19</u> Name & Address: Richard Kimball 1540 Waltham Dr Ann Arbor, MI 48103		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Jessica Field 9492 Spring Hollow Ct Dexter, MI 48130		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: C. Andrew Childers 877 Columbia Road Berkley, MI 48072		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Patricia Reiser 1562 Abigail Way Ann Arbor, MI 48103		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$325.00**

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 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>08/05/19</u> Name & Address: Katherine Wyatt 3840 Maple Drive Ypsilanti, MI 48197 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	\$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Lore Rodgers 7044 Whitmore Lake Rd. Whitmore Lake, MI 48189-9552 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>MI Domestic & Sexual Violence Prevention & Treatment Board</u> Business Address <u>P.O. Box 30037., Lansing, MI 48909-7537</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>250.00</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/19</u> Name & Address: Betsy Stevens 1206 Lexington Pkwy Ypsilanti, MI 48198 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/13/19</u> Name & Address: William Clock 6266 Maplehurst Dr Ypsilanti, MI 48197 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	\$ <u>50.00</u>	\$ <u>50.00</u> Click Here for Memo Itemization

Page Subtotal \$500.00

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

1. Committee I.D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>08/28/19</u> Name & Address: William C. Amadeo 4158 Persimmon Dr. Ypsilanti, MI 48197		\$ <u>125.00</u>	\$ <u>275.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Grabel & Associates</u> Business Address <u>2500 Packard St., Suite 106, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/28/19</u> Name & Address: Matthew McManus 2500 Packard St. Ann Arbor, MI 48104		\$ <u>250.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Ann Arbor Legal PLLC</u> Business Address <u>2500 Packard St., Suite 106, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/29/19</u> Name & Address: David Fritsch 1295 King George Blvd. Ann Arbor, MI 48108		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/31/19</u> Name & Address: Patricia C. Montague 2734 Maitland Drive Ann Arbor, MI 48105		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$575.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-007

2. Committee Name Committee to Elect Arianne Slay

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)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/05/19</u> Name & Address: Margie Pillsbury 11017 Ray Gaines, MI 48436</p> <p>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</p>	\$ <u>100.00</u>	\$ <u>100.00</u>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/09/19</u> Name & Address: Lisa Murray 1545 Westfield Avenue Ann Arbor, MI</p> <p>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</p>	\$ <u>100.00</u>	\$ <u>100.00</u>
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/19</u> Name & Address: Kaitlin Deslatte 5859 Big Pine Dr. Ypsilanti, MI 48197</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>U-M</u> Business Address <u>1239 Kipke Dr., Ann Arbor, MI 48109</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	\$ <u>125.00</u>	\$ <u>125.00</u>
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/16/19</u> Name & Address: Christina Postema 1017 Woodbridge Blvd Ann Arbor, MI 48103</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>Ann Arbor Public Schools</u> Business Address <u>2670 Sequoia Pkwy., Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	\$ <u>250.00</u>	\$ <u>250.00</u>

Page Subtotal **\$575.00**

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>09/16/19</u> Name & Address: Andrea Armstrong 18301 Mahrle Rd. Manchester, MI 48158		\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Operations Coordinator</u> Employer <u>SafeHouse Center</u> Business Address <u>4100 Clark Rd., Ann Arbor, MI 48105</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/19</u> Name & Address: Brian Garmo 130 Waddington Bloomfield Hills, MI 48301		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/19</u> Name & Address: Matthew Van Steenkiste 1021 Batavia Royal Oak, MI 48067		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/19</u> Name & Address: Brian L. Mackie 2401 Meadowridge Ct. Ann Arbor, MI 48105		\$ <u>3000.00</u>	\$ <u>3000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Washtenaw County Gov't</u> Business Address <u>200 N. Main St., Ann Arbor, MI 4817</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$3,325.00**

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 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>09/18/19</u> Name & Address: Barbara Niess-May 12949 Millbrooke Way South Lyon, MI 48178 5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>SafeHouse</u> Business Address <u>4100 Clark Rd., Ann Arbor, MI 48105</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u>
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/19</u> Name & Address: Travis Howell 284 Grand River Dr. Adrian, MI 49221 5. If over \$100.00 cumulative, please provide: Occupation <u>Security Business Owner</u> Employer <u>Self-Employed</u> Business Address <u>2002 Hogback Rd., Ste 6, Ann Arbor, MI 48105</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>250.00</u>
Click Here for Memo Itemization		
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/21/19</u> Name & Address: Clarence Slay 844 Auburndale Ave Ypsilanti, MI 48198 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	\$ <u>50.00</u>	\$ <u>50.00</u>
Click Here for Memo Itemization		
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/21/19</u> Name & Address: Simone D. Lightfoot 2733 Arrowwood Trail Ann Arbor, MI 48105 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	\$ <u>100.00</u>	\$ <u>100.00</u>
Click Here for Memo Itemization		

Page Subtotal \$525.00

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 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>09/21/19</u> Name & Address: Regina Michelle 1889 Ashley Dr. Ypsilanti, MI 48198	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/21/19</u> Name & Address: David E. Rutledge 8585 Durham Ct. Ypsilanti, MI 48198	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Faculty</u> Employer <u>Central Michigan University</u> Business Address <u>1200 S Franklin St, Mt Pleasant, MI 48859</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/21/19</u> Name & Address: Stacie Shaw 6503 Woodvine Dr. Chelsea, MI 48118	\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Washtenaw County Gov't</u> Business Address <u>200 N. Main St., Ann Arbor, MI 48107</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 # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/19</u> Name & Address: Ernest S. Milligan 1737 Monterey Court Ann Arbor, MI 48108	\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Investigator</u> Employer <u>Washtenaw County</u> Business Address <u>200 N. Main St., Ann Arbor, MI 48107</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	

Page Subtotal **\$600.00**

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-007

2. Committee Name Committee to Elect Arianne Slay

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>09/24/19</u> Name & Address: Marlene Radzik 9604 Tree Top Ct. Pinckney, MI 48169	\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/19</u> Name & Address: Michael Radzik 9604 Tree Top Ct. Pinckney, MI 48169	\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Government</u> Employer <u>Ypsilanti Township</u> Business Address <u>7200 S. Huron River Dr., Ypsilanti, MI 48197</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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: Andrea Elliott 350 Briarcrest Dr. Unit 164 Ann Arbor, MI 48104	\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Police Officer</u> Employer <u>EMU Police Department</u> Business Address <u>1200 Oakwood St., Ypsilanti, MI 48197</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 # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/19</u> Name & Address: Brant Funkhouser 2160 Overlook Ct Ann Arbor, MI 48103	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	Click Here for Memo Itemization	

Page Subtotal \$425.00

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>09/25/19</u> Name & Address: Kari Dorr 6826 Robinson Ln Saline, MI 48176 5. If over \$100.00 cumulative, please provide: Occupation <u>Business Manager</u> Employer <u>Washtenaw County</u> Business Address <u>PO Box 8645 Ann Arbor, MI 48107</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>300.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/25/19</u> Name & Address: Renee Bondy 23003 Leslie St. Taylor, MI 48180 5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement Officer</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron St., 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	\$ <u>625.00</u>	\$ <u>625.00</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/27/19</u> Name & Address: Steve Armstrong 18301 Mahrle Rd. Manchester, MI 48158 5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Vapor Wake K9</u> Business Address <u>1803 Mahrle Rd., Manchester, MI 48158</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/27/19</u> Name & Address: Renee Bush 317 Hack St. Milan, MI 48160 5. If over \$100.00 cumulative, please provide: Occupation <u>Police Officer</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron St., 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	\$ <u>625.00</u>	\$ <u>625.00</u> Click Here for Memo Itemization

Page Subtotal **\$1,625.00**

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

1. Committee I.D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>09/27/19</u> Name & Address: Bonnie Theil 8103 Kearney Rd. Whitmore Lake, MI 48189 5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron St., Ann Arbor, MI 48105</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u>
Click Here for Memo Itemization		
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/28/19</u> Name & Address: Mary Fales 1635 Fredericks Dr. Monroe, MI 48162 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>250.00</u>
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/29/19</u> Name & Address: Lisa Jackson 4688 Pearl St. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>Schoolcraft College</u> Business Address <u>18600 Haggerty Rd., Livonia, MI 48152</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u>
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/19</u> Name & Address: Steven J. Hiller 1175 Morehead Court Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Chief Assistant</u> Employer <u>Washtenaw County</u> Business Address <u>200 N. Main St., Ann Arbor, MI 48017</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u>
Click Here for Memo Itemization		

Page Subtotal **\$625.00**

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

1. Committee I.D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>09/30/19</u>	
Name & Address: Rod Issa 341 E. Huron St., Ann Arbor, MI 48104		\$ <u>375.00</u>	\$ <u>375.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Midwest Creative Investments</u>		Click Here for Memo Itemization	
Business Address <u>341 E. Huron St., 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			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/30/19</u>	
Name & Address: Maureen Burke 11471 Terry St., Plymouth, MI 48170		\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Police Officer</u> Employer <u>U of M</u>		Click Here for Memo Itemization	
Business Address <u>1239 Kipke Dr., Ann Arbor, MI 48109</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/01/19</u>	
Name & Address: Margie Pillsbury 11017 Ray Gaines, MI 48436		\$ <u>125.00</u>	\$ <u>225.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Police</u> Employer <u>U of M</u>		Click Here for Memo Itemization	
Business Address <u>1239 Kipke Dr., Ann Arbor, MI 48109</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/19</u>	
Name & Address: Amy Reiser 6260 Sterling Trl Dexter, MI 48130		\$ <u>125.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Washtenaw County</u>		Click Here for Memo Itemization	
Business Address <u>200 N. Main ST., Ste 300, Ann Arbor, MI 48107</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$750.00

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

1. Committee I.D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>10/02/19</u> Name & Address: Paula Williams 6292 Sequoia Dr. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Police Officer</u> Employer <u>University of Michigan</u> Business Address <u>1239 Kipke Dr., Ann Arbor, MI 48109</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u>
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/19</u> Name & Address: Paula Williams 6292 Sequoia Dr. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Police Officer</u> Employer <u>University of Michigan</u> Business Address <u>1239 Kipke Dr., Ann Arbor, MI 48109</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>200.00</u>
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/19</u> Name & Address: Abigail Elias 2248 S 7th St. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>City of Ann Arbor</u> Business Address <u>PO Box 8647, Ann Arbor, MI 48107</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u>
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: Aimee Metzger 7815 Tipperary Trl Fenton, MI 48430 5. If over \$100.00 cumulative, please provide: Occupation <u>Police Lieutenant</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron St., Ann Arbor, MI 48104</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u>
Click Here for Memo Itemization		

Page Subtotal **\$450.00**

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>10/03/19</u> Name & Address: Jennifer Sartori 6450 Meadow Creek Dr. Dexter, MI 48130 5. If over \$100.00 cumulative, please provide: Occupation <u>Police Officer</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron St., 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	\$ <u>125.00</u>	\$ <u>125.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/19</u> Name & Address: Michael Vincent 302 N Huron St. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self-Employed</u> Business Address <u>302 N. Huron St., Ypsilanti, MI 48197</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/19</u> Name & Address: Louanna Slay 1112 Hasper Dr. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/19</u> Name & Address: Cheryl Slay Taylor 4184 Inglewood Drive Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Supervisor</u> Employer <u>WISD</u> Business Address <u>1819 S. Wagner Rd., Ann Arbor, MI 48103</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u> Click Here for Memo Itemization

Page Subtotal \$500.00

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

1. Committee I.D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>10/03/19</u> Name & Address: Kristen D. Larcom 1535 Riverwood Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Assistant City Attorney</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron St., Ann Arbor, MI 48107</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/19</u> Name & Address: Anthony Kendrick 8409 S. Huron River Dr. Ypsilanti, MI 48197 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	\$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/19</u> Name & Address: Daniel Karrick 1015 Glenhill Dr. Northville, MI 48167 5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy Chief</u> Employer <u>Eastern Michigan University</u> Business Address <u>1200 Oakwood, Ypsilanti, MI 48197</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>125.00</u>	\$ <u>125.00</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/19</u> Name & Address: Patricia Reiser 1562 Abigail Way Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self-Employed</u> Business Address <u>122 S. Main St., #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	\$ <u>250.00</u>	\$ <u>350.00</u> Click Here for Memo Itemization

Page Subtotal \$675.00

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 2019-007
2. Committee Name Committee to Elect Arianne Slay

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 10/03/19
Name & Address:
Brian L. Mackie
2401 Meadowridge Ct.
Ann Arbor, MI 48105

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

\$ 250.00 \$ 3250.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation Attorney Employer Washtenaw County
Business Address 200 N. Main St., Ann Arbor, MI 4817
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 10/03/19
Name & Address:
Michael A. Cox
49 Circuit Road
Dedham, MA 02026

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

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation Police Chief Employer City of Ann Arbor
Business Address 301 E. Huron St., Ann Arbor, MI 48107
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/03/19
Name & Address:
David Oblak
1115 Glen Leven Rd.
Ann Arbor, MI 48103

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

\$ 1000.00 \$ 1000.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation Probation Agent Employer City of Ann Arbor
Business Address 301 E. Huron St., Ann Arbor, MI 48107
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/03/19
Name & Address:
Ryan R. Wyatt
3840 Maple Dr.
Ypsilanti, MI 48197

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

\$ 1000.00 \$ 1000.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation Consultant Employer ME
Business Address 3840 Maple Dr., Ypsilanti, MI 48197
Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$2,375.00
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 2019-007
2. Committee Name Committee to Elect Arianne Slay

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>10/18/19</u> Name & Address: Daniel Geherin 5142 Colonial Ct Ann Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Geherin Law Group, PLLC</u> Business Address <u>760 W. Eisenhower Pkwy, Ste 305, Ann Arbor, MI 48103</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u> Click Here for Memo Itemization
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/19/19</u> Name & Address: Andrea Elliott 350 Briarcrest Dr. Unit 164 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>Police Officer</u> Employer <u>EMU Police Department</u> Business Address <u>1200 Oakwood St., Ypsilanti, MI 48197</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>150.00</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/19/19</u> Name & Address: Stephen Postema 1017 Woodbridge Blvd. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron St., Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>250.00</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/21/19</u> Name & Address: Ernest S. Milligan 1737 Monterey Court Ann Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Occupation <u>Investigator</u> Employer <u>Washtenaw County</u> Business Address <u>200 N. Main St., Ann Arbor, MI 48107</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>225.00</u> Click Here for Memo Itemization

Page Subtotal	\$875.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$30,185.00

Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number 2019-007

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Arianne Slay

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Arianne Slay 6092 Aspen Way Ypsilanti, MI 48197 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Business Address: City of Ann Arbor 301 E. Huron Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Flyers</u> 5. Date Of Receipt: <u>07/30/19</u> 6. Vendor Name & Address: The UPS Store 4007 Carpenter Rd. Ypsilanti, MI 48197 Click Here for Memo Itemization	\$ <u>129.48</u>	\$ <u>274.80</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Arianne Slay 6092 Aspen Way Ypsilanti, MI 48197 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Address: City of Ann Arbor 301 E. Huron Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Food</u> 5. Date Of Receipt: <u>08/05/19</u> 6. Vendor Name & Address: Gordon Food Service Store 3800 Carpenter Rd. Ypsilanti, MI 48197 Click Here for Memo Itemization	\$ <u>134.00</u>	\$ <u>408.80</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Yasmine Tucker 237 Depuy Ave Apt 3 Jackson, MI 49203 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Rubberstamp</u> 5. Date Of Receipt: <u>08/06/19</u> 6. Vendor Name & Address: Discount Rubber Stamps P.O. Box 445 Butler, WI 53007 Click Here for Memo Itemization	\$ <u>14.84</u>	\$ <u>14.84</u>

Page Subtotal

\$ 278.32

\$ 698.44

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

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ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number 2019-007
2. Committee Name Committee to Elect Arianne Slay

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Yasmine Tucker 237 Depuy Ave., Apt 3 Jackson, MI 49203 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Name Badges</u> 5. Date Of Receipt: <u>08/07/19</u> 6. Vendor Name & Address: NameBadges International 4601 Sheridan Street, Suite 300 Hollywood, FL 33021 Click Here for Memo Itemization	\$ <u>61.94</u> \$ <u>76.78</u>	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Arianne Slay 6092 Aspen Way Ypsilanti, MI 48197 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Address: City of Ann Arbor 301 E. Huron Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Flyers</u> 5. Date Of Receipt: <u>08/31/19</u> 6. Vendor Name & Address: The UPS Store 4007 Carpenter Rd. Ypsilanti, MI 48197 Click Here for Memo Itemization	\$ <u>45.96</u> \$ <u>454.76</u>	
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Sarah Rowe 1287 King George Blvd Ann Arbor, MI 48108 If over \$100.00 cumulative, please provide: Occupation: <u>Retired</u> Employer Name & Address: <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Cake</u> 5. Date Of Receipt: <u>10/03/19</u> 6. Vendor Name & Address: Dom Bakery 1305 Washtenaw Rd. Ypsilanti, MI 48197 Click Here for Memo Itemization	\$ <u>85.80</u> \$ <u>85.80</u>	

Page Subtotal \$193.70 \$617.34

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$472.02

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2019-007
2. Committee Name Committee to Elect Arianne Slay

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Alex Yerkey</u> Address <u>261 Victorian Lane</u> <u>Belleville, MI 48111</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consultation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/26/19</u> Date	<u>\$ 3500.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>NGP VAN, Inc.</u> Address <u>1445 New York Ave., NW, Suite 200</u> <u>Washington DC, DC 20005</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>DMO3</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/01/19</u> Date	<u>\$ 450.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>The UPS Store</u> Address <u>4007 Carpenter Rd.</u> <u>Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/19</u> Date	<u>\$ 25.44</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Alex Yerkey</u> Address <u>261 Victorian Lane</u> <u>Belleville, MI 48111</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consultation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/26/19</u> Date	<u>\$ 1000.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>The UPS Store</u> Address <u>4007 Carpenter Rd.</u> <u>Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Thank You Postcards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/19</u> Date	<u>\$ 144.16</u> Click Here for Memo Itemization Type

Subtotal this page **\$5,119.60**

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

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2019-007
2. Committee Name Committee to Elect Arianne Slay

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Washtenaw Community College</u> Address 4800 E. Huron Dr. Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: <u>Meeting</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/19</u> Date	<u>\$ 45.00</u>
Expenditure #2 Name <u>The UPS Store</u> Address 4007 Carpenter Rd. Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Literature/Flyers</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/19/19</u> Date	<u>\$ 52.47</u>
Expenditure #3 Name <u>Arianne Slay</u> Address 6092 Aspen Way Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Breakfast Reimbursement</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/20/19</u> Date	<u>\$ 268.00</u>
Expenditure #4 Name <u>Arianne Slay</u> Address 6092 Aspen Way Ypsilanti, MI 48197 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>10/3 Room Reimbursement</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/21/19</u> Date	<u>\$ 250.00</u>
Expenditure #5 Name <u>Alex Yerkey</u> Address 261 Victorian Lane Belleville, MI 48111 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing Reimbursement</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/21/19</u> Date	<u>\$ 24.12</u>

Subtotal this page **\$639.59**

Grand Total of all Schedules 1B
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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2019-007
2. Committee Name Committee to Elect Arianne Slay

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Office Depot Address 1515 Boardman Rd. Jackson, MI 49202 <input type="checkbox"/> Fund Raiser	Purpose: <u>Literature & Sign Holder</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/21/19</u> Date	<u>\$ 28.77</u>
Expenditure #2 Name Alex Yerkey Address 261 Victorian Lane Belleville, MI 48111 <input type="checkbox"/> Fund Raiser	Purpose: <u>Consultation</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/26/19</u> Date	<u>\$ 1,000.00</u>
Expenditure #3 Name Blue Parasol Address 285 W. Tabernacle St. Ste 201 Saint George, UT 84770 <input type="checkbox"/> Fund Raiser	Purpose: <u>Merchant Fees</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/02/19</u> Date	<u>\$ 276.75</u>
Expenditure #4 Name Roderick Edwards Address 28873 Lahser Southfield, MI 48034 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Music/DJ(WILE DINNER)</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/19</u> Date	<u>\$ 200.00</u>
Expenditure #5 Name Washtenaw Community College Address 4800 E. Huron Dr. Ann Arbor, MI 48105 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>WILE Dinner</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/19</u> Date	<u>\$ 3,500.40</u>

Subtotal this page **\$5,005.92**

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

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2019-007
2. Committee Name Committee to Elect Arianne Slay

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Arianne Slay</u> Address <u>6092 Aspen Way</u> <u>Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Step and Repeat Banner Reimbursement</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/19</u> Date	<u>\$ 249.00</u>
Expenditure #2 Name <u>Arianne Slay</u> Address <u>6092 Aspen Way</u> <u>Ypsilanti, MI 48197</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>WILE Awards Reimbursement</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/19</u> Date	<u>\$ 236.08</u>
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$485.08**
 Grand Total of all Schedules 1B
 (Complete on last page of Schedule) **\$11,250.19**

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on line 8a of
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