

## **FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE**

C-2019-007

1. Committee I.D. Number

<sup>2</sup> Committee Name Committee to Elect Arianne Slay

- USE A SEPARATE SHEET FOR EACH EVENT -						
3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)  100		5. Type of Fund Raising Activity  Dinner		6. Address and Name (If any) of the place where the activity was held.  Morris Lawrence Building Ätrium Washtenaw Community College 4800 E. Huron Dr. Ann Arbor, MI 48105  Private Residence	
10/03/19						
7. Total Contributions		\$8,125.00			85	W
8. Other Receipts					ZOIS WAT	ASH
<ul><li>9. Gross Receipts (Add lines 7 and 8)</li><li>10. Total Cost of Event (Total Cost includes In-Kind Contributions</li></ul>		\$8,125.00	×		WRENCE	FIL
		\$4,036.20 and All Expenditures Made For the Event)			KES]	AW COU
11. Check if event was a jo	int fund rais	er and complete th	ne following:		A 8: REGIS	ED COUNTY,
Co-Sponsor(s)		Contribution (%)	Split		Expenditure (%)	Spli€
		-				
	-	-			10.00	
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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.

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