



**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: 07/19/20 to 08/24/20

<p>1. Committee I.D. Number <b>C-2019-007</b></p> <p>2. Committee Name <b>Committee to Elect Arianne Slay</b></p>	<p>4. Candidate Last Name <b>SLAY</b> First Name <b>ARIANNE</b> M.I.</p> <p>4a. Office Sought Including District # or Community Served (If applicable) <b>PROSECUTING ATTORNEY</b></p> <p>4b. County of Residence <u>Washtenaw</u></p>
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<p>5. Committee's Mailing Address <b>1287 King George Blvd. Ann Arbor, MI 48108</b></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 &amp; Residential Address <b>YASMINE TUCKER 237 DEPUY AVE #3 JACKSON, MI 49203</b></p> <p>Area Code &amp; Phone <u>(954) 860-1755</u></p>
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<p>7. Treasurer's Business Address <b>237 Deput Ave Apt 3 Jackson, MI 49203</b></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>
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<p><b>9. TYPE OF STATEMENT</b></p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" 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 <u>08/04/20</u></p>	<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input 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><b>9e. Dissolution of Candidate Committee</b></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>
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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.

<p>Current Treasurer or Designated Record keeper <u>Yasmine Tucker</u> Type or Print Name</p>	<p><u>[Signature]</u> Signature</p>	<p>Date <u>8/24/2020</u></p>
<p>Candidate <u>Arianne Slay</u> Type or Print Name</p>	<p><u>[Signature]</u> Signature</p>	<p>Date <u>8/24/2020</u></p>

FILED  
 WASHTEENAW COUNTY, MI  
 2020 AUG 24 P 2:51  
 LAWRENCE KESTER  
 COUNTY CLERK/REGISTER



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
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>8,657.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>8,657.00</u>	(18.) \$ <u>\$150,134.19</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$151.71</u>	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>\$8,808.71</u>	(20.) \$ <u>\$150,285.90</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$2,383.32</u>	(21.) \$ <u>\$13,792.82</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$42,262.29</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$42,262.29</u>	(23.) \$ <u>\$149,471.98</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$636.26</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$34,142.50</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$8,808.71</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$42,951.21</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$42,262.29</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>\$688.92</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>07/20/20</u> Name & Address: <b>Louis F. Marr</b> 2950 N. Parker Rd. Dexter, MI 48130	\$ <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		
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/20/20</u> Name & Address: <b>John Martin</b> 2572 Walnut Rd Ann Arbor, MI 48103	\$ <u>200.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/20/20</u> Name & Address: <b>Daniel Hamalainen</b> 1135 Lincoln Ave Ann Arbor, MI 48104	\$ <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		
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/20/20</u> Name & Address: <b>James Wilks</b> 3593 Northbrooke Dr. Superior Twp, MI 48198	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Journalist</u> Employer <u>Self-Employed</u> Business Address <u>3593 Northbrooke Dr., Superior Twp, MI 48198</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal \$600.00

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

Enter this total on  
line 3a of Summary  
Page.



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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>07/20/20</u> Name & Address: <b>Laura Hill</b> 1000 Sugarloaf Lake Road Chelsea, MI 48118		\$ <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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/20/20</u> Name & Address: <b>Janet Haynes</b> 1410 S ZEEB RD 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 checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/20/20</u> Name & Address: <b>William Amadeo</b> 4158 Persimmon Dr. Ypsilanti, MI 48197		\$ <u>200.00</u>	\$ <u>2337.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>McManus and Amadeo/Grabel and Associates</u> Business Address <u>2500 Packard Street, 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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/20/20</u> Name & Address: <b>Sean Eiler</b> 48922 Woodson Way Canton, MI 48187		\$ <u>500.00</u>	\$ <u>734.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Technical Recruiter</u> Employer <u>Impact Technology Recruiting</u> Business Address <u>18325 N Allied Way #210, Phoenix, AZ 85084</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$775.00**  
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>07/20/20</u>	
Name & Address: <b>Andrew McGuinness</b> 4935 W Liberty Rd Ann Arbor, MI 48103		\$ <u>250.00</u>	\$ <u>850.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self-Employed</u>		<a href="#">Click Here for Memo Itemization</a>	
Business Address <u>P O Box 7711, 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 #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/20/20</u>	
Name & Address: <b>David Swartz</b> 3764 Michael Rd S ANN ARBOR, MI 48103		\$ <u>100.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Judge</u> Employer <u>Washtenaw County</u>		<a href="#">Click Here for Memo Itemization</a>	
Business Address <u>220 N. Main St., 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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/20/20</u>	
Name & Address: <b>Glenn Timpe</b> 2547 Hawks Rd Ann Arbor, MI 48108		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
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>07/20/20</u>	
Name & Address: <b>Judy Sauer</b> 1516, Jewett Ave Ann Arbor, MI 48104		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal \$875.00

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

Enter this total on  
line 3a of Summary  
Page.



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CANDIDATE COMMITTEE**

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3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/21/20</u> Name & Address: Nancy McKay 2426 Mulberry Ct. Ann Arbor, MI 48104		\$ <u>25.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/21/20</u> Name & Address: John Dahl 5196 Doral Ct Ann Arbor, MI 48108		\$ <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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/21/20</u> Name & Address: Amanda Slaybaugh 512 N 7th St. Apt 1 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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/22/20</u> Name & Address: Gregory Dodd 2261 Pittsfield Blvd. Ann Arbor, MI 48104		\$ <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		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$175.00

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**

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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>07/23/20</u> Name & Address: Yolanda Whiten 630 Barber Ann Arbor, MI 48103		\$ <u>100.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Community Leader</u> Employer <u>Ann Arbor Community Center</u> Business Address <u>625 N. Main Street, 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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/24/20</u> Name & Address: Brant Funkhouser 2160 Overlook Ct Ann Arbor, MI 48103		\$ <u>50.00</u>	\$ <u>550.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/26/20</u> Name & Address: Abigail Elias 2248 S 7th St Ann Arbor, MI 48103		\$ <u>50.00</u>	\$ <u>225.00</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 St., 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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/27/20</u> Name & Address: Anne Lerini 17633 Annapolis St Dearborn Heights, MI 48125		\$ <u>100.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Washtenaw County</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		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$300.00  
Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



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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>07/27/20</u> Name & Address: <b>Nicholas Michael</b> 2515 Miller Ave 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>25.00</u>	\$ <u>50.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/27/20</u> Name & Address: <b>Ashley Londy</b> 2515 Miller Ave 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>75.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/27/20</u> Name & Address: <b>Jeff Hauptman</b> 611 Stratford Drive Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>Asset Manager</u> Employer <u>MI</u> Business Address <u>777 East Eisenhower, Suite 850, 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>500.00</u>	\$ <u>500.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/27/20</u> Name & Address: <b>Greg Rose</b> 6680 Crane Road Yosilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</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>500.00</u>	\$ <u>500.00</u>
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal \$1,075.00

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

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line 3a of Summary  
Page.





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3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/20</u> Name & Address: <b>Janis Bobrin</b> 3465 Vintage Valley Ann Arbor, MI 48105  5. If over \$100.00 cumulative, please provide: Occupation <u>Water Resources Commissioner</u> Employer <u>Washtenaw County</u> Business Address <u>P. O. 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>750.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/20</u> Name & Address: <b>Brenda Stumbo</b> 9622 Endicott Lane 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>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/20</u> Name & Address: <b>Soni Mithani</b> 1030 Ferdon Road Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Miller Canfield</u> Business Address <u>101 N. Main Street, 7th Fl, 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	\$ <u>500.00</u>	\$ <u>1500.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/20</u> Name & Address: <b>David Barfield</b> 5460 Geddes Rd Ann Arbor, MI 48105  5. If over \$100.00 cumulative, please provide: Occupation <u>Executive</u> Employer <u>BarPellam, Inc.</u> Business Address <u>27777 Franklin Rd., Southfield, MI 48034</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>300.00</u>	\$ <u>300.00</u>
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal **\$1,150.00**

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-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>07/28/20</u> Name & Address: <b>Ron Perry</b> 2300 Melrose Ann Arbor, MI 48104		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Business Executive</u> Employer <u>Micro-Tech Endoscopy</u> Business Address <u>2855 Boardwalk Dr., 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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/29/20</u> Name & Address: <b>Rachel Glick</b> 1663 Snowberry Ridge Road Ann Arbor, MI 48103		\$ <u>250.00</u>	\$ <u>1250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>University of Michigan</u> Business Address <u>1500 E. Medical Center Drive, 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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/29/20</u> Name & Address: <b>Samuel Bernstein</b> 4158 Washtenaw Ave Canton, MI 48187		\$ <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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/29/20</u> Name & Address: <b>Erica Melnykowycz</b> 1100 W Liberty St 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 checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$625.00

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 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>07/29/20</u> Name & Address: <b>Toby Freund</b> 2412 Virginia St. Berkeley, CA 94709 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>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Melissa Brooks-Yip</b> 3230 Roon The Ben Ann Arbor, MI 48108 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>10.00</u>	\$ <u>30.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Yolanda Whiten</b> 630 Barber Ave Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Community Leader</u> Employer <u>Ann Arbor Community Center</u> Business Address <u>625 N Main, 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	\$ <u>200.00</u>	\$ <u>800.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Marcus Seiser</b> 4824 N Ashford Way 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>10.00</u>	\$ <u>20.00</u>
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal **\$320.00**

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>07/30/20</u> Name & Address: <b>Elizabeth Larin</b> 407 Awixa Ann Arbor, MI 48104  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>
		<a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Catherine Cammann</b> 2008 Crestland St Ann Arbor MI 48104  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>50.00</u>	\$ <u>1850.00</u>
		<a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Madeline Micou</b> 8036 Creek Bend 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>41.00</u>	\$ <u>91.00</u>
		<a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Ellen Bunting</b> 2474 Hickman Rd Ann Arbor, MI 48105  5. If over \$100.00 cumulative, please provide: Occupation <u>Director Business Dev</u> Employer <u>University of Michigan</u>  Business Address <u>777 Eisenhower, Ann Arbor, MI 48108</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>41.00</u>	\$ <u>141.00</u>
		<a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$232.00**  
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>07/30/20</u> Name & Address: <u>John Martin</u> <u>2572 Walnut Road</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</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>41.00</u>	\$ <u>191.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Stephen Postema</u> <u>1017 Woodbridge</u> <u>Ann Arbor, MI 48103</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 St., 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	\$ <u>441.00</u>	\$ <u>2941.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Lore Rogers</u> <u>7044 Whitmore Lake Rd</u> <u>Whitmore Lake, MI 48189</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>State of Michigan</u> Business Address <u>235 S Grand Ave., Ste 1108, Lansing, MI 48909</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>41.00</u>	\$ <u>622.70</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Katie Murphy</u> <u>2210 Wildwood Trail</u> <u>Saline, MI 48176</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	\$ <u>41.00</u>	\$ <u>41.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal \$564.00

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 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>07/30/20</u> Name & Address: <b>Kevin Bailey</b> 3760 Oak Drive Ypsilanti, MI 48197	\$ <u>100.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Source One Solutions</u> Business Address <u>3760 Oak Drive, Ypsilanti, MI 48197</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Shari Kaufman</b> 3000 Pontiac Trail, Commerce Twp, MI 48390	\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Judith Hardin-Bell</b> 274 Kirk Ave. Ypsilanti, MI 48197	\$ <u>41.00</u>	\$ <u>641.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Auto worker</u> Employer <u>Ford Motor Co</u> Business Address <u>37500 Van Born Rd., Wayne, MI 48184</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <b>Yolanda Whiten</b> 630 Barber Avenue Ann Arbor, MI 48103	\$ <u>41.00</u>	\$ <u>841.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Community Leader</u> Employer <u>Ann Arbor Community Center</u> Business Address <u>625 N Main, 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		
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal \$282.00  
 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 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>07/30/20</u>	
Name & Address: <b>ABIGAIL EILER</b> 48922 Woodson Way Canton, MI 48187		\$ <u>41.00</u>	\$ <u>1041.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Clinical Asst. Professor/Clinical Social Worker</u> Employer <u>Univ. of Michigan</u> Business Address <u>1000 S STATE STREET, 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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/30/20</u>	
Name & Address: <b>Pamela Bogart</b> 1392 Rosewood St Ann Arbor, MI 48104		\$ <u>10.00</u>	\$ <u>55.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/30/20</u>	
Name & Address: <b>Joan Lowenstein</b> 502 Burson Pl Ann Arbor, MI 48104		\$ <u>41.00</u>	\$ <u>341.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/30/20</u>	
Name & Address: <b>Lisa Saulles</b> 1630 Waltham Ann Arbor, MI 48103		\$ <u>20.00</u>	\$ <u>20.00</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		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$112.00  
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 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>07/30/20</u> Name & Address: <u>Pam Hoffer</u> <u>1217 Brooklyn</u> <u>Ann Arbor, MI 48104</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	\$ <u>41.00</u>	\$ <u>241.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Rena Basch</u> <u>4260 Shetland Dr</u> <u>Ann Arbor, MI 48105</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	\$ <u>41.00</u>	\$ <u>41.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>John Reiser</u> <u>1562 Abigail Way</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Washtenaw County</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	\$ <u>41.00</u>	\$ <u>176.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Nicole Appleberry</u> <u>3376 Beaumont Rd</u> <u>Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Clinical Professor/Attorney</u> Employer <u>Univ. of Mich. Law School</u> Business Address <u>701 S. State St., 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>41.00</u>	\$ <u>341.00</u>
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal **\$164.00**

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>07/30/20</u> Name & Address: <u>Soni Mithani</u> <u>1030 Ferdon Road</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Miller Canfield</u> Business Address <u>101 N. Main Street, 7th Fl, 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	\$ <u>41.00</u>	\$ <u>1541.00</u>
		<a href="#">Click Here for Memo Itemization</a>
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Mary Fales</u> <u>1635 Fredericks Dr</u> <u>Monroe, MI 48162</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	\$ <u>41.00</u>	\$ <u>394.45</u>
		<a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Danielle Hagaman-Clark</u> <u>5623 Mountain Rd</u> <u>Brighton, MI 48116</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>State of Michigan</u> Business Address <u>525 W Ottawa, Lansing, MI 48932</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>41.00</u>	\$ <u>391.00</u>
		<a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Susan Tyson</u> <u>5540 N Eagle Ct</u> <u>Ypsilanti, MI 48197</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</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>41.00</u>	\$ <u>141.00</u>
		<a href="#">Click Here for Memo Itemization</a>

Page Subtotal \$164.00

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 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>07/30/20</u> Name & Address: <u>Lisa Jackson</u> <u>4688 Pearl St</u> <u>Ypsilanti, MI 48197</u> 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 checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>41.00</u>	\$ <u>566.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Deborah Paul-McDonald</u> <u>2830 Ember Way</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</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>150.00</u>	\$ <u>300.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>ACE WOOLRIDGE</u> <u>3366 MAPLE DR.</u> <u>YPSILANTI, MI 48197</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</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>41.00</u>	\$ <u>391.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Christine LePottier</u> <u>3 Jefferson Ct.</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Analyst</u> Employer <u>Artemis Strategy Group</u> Business Address <u>1100 Vermont Ave NW, Washington, DC 20005</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>400.00</u>	\$ <u>500.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$632.00**

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>07/31/20</u> Name & Address: Pamela Gesund 2507 Packard St Ann Arbor MI 48104 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>10.00</u>	\$ <u>80.00</u>
<a href="#">Click Here for Memo Itemization</a>			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/31/20</u> Name & Address: Toi Dennis 427 S ADAMS ST 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>41.00</u>	\$ <u>41.00</u>
<a href="#">Click Here for Memo Itemization</a>			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/01/20</u> Name & Address: Blake Hatlem 845 W Willis Rd Saline, MI 48176 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Department of Justice</u> Business Address <u>211 W. Fort, Detroit, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>41.00</u>	\$ <u>391.00</u>
<a href="#">Click Here for Memo Itemization</a>			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/04/20</u> Name & Address: Kari Dorr 6726 Robison 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>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		\$ <u>20.00</u>	\$ <u>480.00</u>
<a href="#">Click Here for Memo Itemization</a>			

Page Subtotal \$112.00  
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>08/04/20</u> Name & Address: <b>Charles Slay</b> 1112 Hasper Dr. Ann Arbor, MI 48103		\$ <u>500.00</u>	\$ <u>550.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$500.00**  
Grand Total of All Schedules 1A **\$8,657.00**  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED OTHER RECEIPTS  
SCHEDULE 1A-1**

**CANDIDATE COMMITTEE**

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

2. Committee Name Committee to Elect Arianne Slay

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: WP Engine, Inc 504 Lavaca St., Suite 1000 Austin, TX 78701	Date of Receipt <u>08/19/20</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate      Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ <u>151.71</u>
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate      Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate      Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate      Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate      Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate      Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate      Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____

Page Subtotal	\$151.71
Grand Total of All Schedules 1A-1 (Complete on last page of Schedule)	\$151.71

Enter this total on  
line 4 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 all 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: Eve Aronoff Fernandez 2756 N. Wagner Rd. Ann Arbor, MI 48103  If over \$100.00 cumulative, please provide: Occupation: <u>Owner/Chef</u> Employer Name & Business Address: Frita Batidos 117 W. Washington St. Ann Arbor, MI 48104  <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input checked="" type="checkbox"/> Services Donated <input 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/Catering Services</u> 5. Date Of Receipt: <u>07/29/20</u> 6. Vendor Name & Address: Frita Batidos 117 W. Washington St. Ann Arbor, MI 48104  <a href="#">Click Here for Memo Itemization</a>	\$ <u>2250.00</u> \$ <u>2500.00</u>	
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Caroline Sanders 1216 W Cross St. Ypsilanti, MI 48197  If over \$100.00 cumulative, please provide: Occupation: <u>Int, Dir, Community Relations</u> Employer Name & Address: Eastern Michigan University 203 Boone Boone Ypsilanti, MI 48197  <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>Billboard Ad</u> 5. Date Of Receipt: <u>07/29/20</u> 6. Vendor Name & Address: Adams Outdoor 880 James L. Hart Parkway Ann Arbor, MI 48197  <a href="#">Click Here for Memo Itemization</a>	\$ <u>133.32</u> \$ <u>233.32</u>	
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address:    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 type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:   <a href="#">Click Here for Memo Itemization</a>	\$ _____      \$ _____	

Page Subtotal **\$2,383.32**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) **\$2,383.32**

Enter this total  
on line 6 of Summary  
Page



**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 Facebook  Address 1 Hacker Way Menlo Park, CA 94025  <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/20/20</u> Date	<u>\$ 200.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name Facebook  Address 1 Hacker Way Menlo Park, CA 94025  <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/21/20</u> Date	<u>\$ 200.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name Facebook  Address 1 Hacker Way Menlo Park, CA 94025  <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/22/20</u> Date	<u>\$ 200.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name Facebook  Address 1 Hacker Way Menlo Park, CA 94025  <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/24/20</u> Date	<u>\$ 400.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name Facebook  Address 1 Hacker Way Menlo Park, CA 94025  <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/26/20</u> Date	<u>\$ 200.00</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$1,200.00**

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-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>Facebook</u> Address <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/27/20</u> Date	<u>\$ 400.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <u>Jeremy Glick</u> Address <u>1663 Snowberry Ridge Rd.</u> <u>Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Monthly Retainer</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/27/20</u> Date	<u>\$ 2500.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <u>Hess Printing</u> Address <u>201 Elm, Suite A</u> <u>Wyandotte, MI 48192</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/27/20</u> Date	<u>\$ 24,581.39</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <u>Facebook</u> Address <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/29/20</u> Date	<u>\$ 200.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <u>Facebook</u> Address <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/30/20</u> Date	<u>\$ 200.00</u> <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$27,881.39**

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-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 <b>USPS</b>  Address 2075 W Stadium Blvd Ann Arbor, MI 48103  <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage Stamps</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/30/20</u> Date	<u>\$ 55.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>NGP Van, Inc.</b>  Address 48 Grove Street, Suite 202 Somerville, MA 02144  <input type="checkbox"/> Fund Raiser	Purpose: <u>RoboCall</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/20</u> Date	<u>\$ 246.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>Facebook</b>  Address 1 Hacker Way Menlo Park, CA 94025  <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/20</u> Date	<u>\$ 200.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>Facebook</b>  Address 1 Hacker Way Menlo Park, CA 94025  <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/20</u> Date	<u>\$ 1,200.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <b>Google</b>  Address 1600 Amphitheatre Pkwy Mountain View, CA 94043  <input type="checkbox"/> Fund Raiser	Purpose: <u>Gsuite</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/20</u> Date	<u>\$ 12.00</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$1,713.00**  
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-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>Blue Parasol</u> Address 285 W. Tabernacle St. Ste 201 Saint George, UT 84770 <input type="checkbox"/> Fund Raiser	Purpose: <u>Merchant Fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/20</u> Date	<u>\$ 134.81</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <u>Facebook</u> Address 1 Hacker Way Menlo Park, CA 94025 <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/04/20</u> Date	<u>\$ 1414.40</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <u>Facebook</u> Address 1 Hacker Way Menlo Park, CA 94025 <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/05/20</u> Date	<u>\$ 245.30</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <u>Casey Frushour</u> Address 5298 Crown Court Ann Arbor, MI 48108 <input type="checkbox"/> Fund Raiser	Purpose: <u>Website Update</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/05/20</u> Date	<u>\$ 75.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <u>ACTBLUE</u> Address PO Box 441146 Somerville, MA 02144-0031 <input type="checkbox"/> Fund Raiser	Purpose: <u>Merchant Fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/05/20</u> Date	<u>\$ 350.86</u> <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$2,220.37**

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-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 <b>NGPVAN, INC</b>  Address 1445 New York Ave. NW, Suite 200 Washington, DC 20005  <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>08/05/20</u> Date	<u>\$ 450.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>Sam Burnstein</b>  Address 2505 Geddes Rd. Ann Arbor, MI 48103  <input type="checkbox"/> Fund Raiser	Purpose: <u>Misc. Tasks</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/05/20</u> Date	<u>\$ 250.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>Glemps Printing &amp; Embroidery</b>  Address 1770 E. Michigan Ave. Ypsilanti, MI 48198  <input type="checkbox"/> Fund Raiser	Purpose: <u>T-Shirts</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/06/20</u> Date	<u>\$ 349.80</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>Hustle, Inc</b>  Address 595 Market St., Suite 920 San Francisco, CA 94105  <input type="checkbox"/> Fund Raiser	Purpose: <u>Text Messages</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/10/20</u> Date	<u>\$ 5480.64</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <b>ACTBLUE</b>  Address P.O. Box 441146 Somerville, MA 02144  <input type="checkbox"/> Fund Raiser	Purpose: <u>Merchant Fees</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/11/20</u> Date	<u>\$ 527.19</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page	<b>\$7,057.63</b>
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-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>Name.Com, Inc.</u>  Address <u>414 14th Street #200</u> <u>Denver, Colorado 80202</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Domain</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/18/20</u> Date	<u>\$ 89.90</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <u>Sean Slay</u>  Address <u>6092 Aspen Way</u> <u>Ypsilanti, MI 48197</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Repayment of Loan</u>  <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/18/20</u> Date	<u>\$ 2000.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <u>NGPVAN, INC</u>  Address <u>1445 New York Ave. NW, Suite 200</u> <u>Washington, DC 20005</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Cancellation Fee</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/22/20</u> Date	<u>\$ 100.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
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	\$ _____  <a href="#">Click Here for Memo Itemization Type</a>
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	\$ _____  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page	<b>\$2,189.90</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)	<b>\$42,262.29</b>

Enter this total on line 8a of Summary Page



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

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

2. Committee Name Committee to Elect Arianne Slay

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <u>07/29/20</u>	4. Number of Individuals Attending or Participating (whichever is greater)  13	5. Type of Fund Raising Activity  Dinner	6. Address and Name (If any) of the place where the activity was held.  2756 N. Wagner Rd Ann Arbor, MI 48103 <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions \$2,550.00

8. Other Receipts \_\_\_\_\_

9. Gross Receipts (Add lines 7 and 8) \_\_\_\_\_

10. Total Cost of Event \$2,250.00  
(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.



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

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

This Schedule itemizes:  
a  Debts and obligations owed by or forgiven the committee OR b  Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Arianne Slay 6092 Aspen Way Ypsilanti, MI 48197	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>04/19/20</u> 6. <u>Original Amount of Debt:</u> \$ <u>158.89</u>	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$	\$ <u>158.89</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2- Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>3/1/20-4/30/20</u> 6. <u>Original Amount of Debt:</u> \$ <u>144.00</u>	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$	\$ <u>144.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Arianne Slay 6092 Aspen Way Ypsilanti, MI 48197	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>06/03/20 &amp; 06/05/20</u> 6. <u>Original Amount of Debt:</u> \$ <u>184.97</u>	06/03/20 \$ <u>87.45</u> 06/05/20 \$ <u>97.52</u> \$ \$ \$	\$ \$ \$ \$ \$	\$ <u>184.97</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$487.86**  
Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-007

2. Committee Name Committee to Elect Arianne Slay

This Schedule itemizes:

a  Debts and obligations owed by or forgiven the committee OR b  Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Arianne Slay 6092 Aspen Way Ypsilanti, MI 48197	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>06/19/20</u> 6. <u>Original Amount of Debt:</u> \$ <u>148.40</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>148.40</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Sean Slay 6092 Aspen Way Ypsilanti, MI 48197	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>07/18/20</u> 6. <u>Original Amount of Debt:</u> \$ <u>2,000.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>2,000.00</u>	\$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$148.40**

Grand Total of all Schedules 1E **\$636.26**  
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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