



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 1/1/2015 to 10/21/2018

1. Committee I.D. Number
C-2010-057

2. Committee Name
Friends of Christine Stead

4. Candidate Last Name Stead First Name Christine M.I.
4a. Office Sought Including District # or Community Served (If applicable)
Ann Arbor Public School Board
4b. County of Residence Washtenaw

5. Committee's Mailing Address
2075 W. Stadium Blvd
PO Box 3286
Ann Arbor, MI 48106
Area Code and Phone 717-2493
(734) 730-5440

6. Treasurer's Name & Residential Address
Jim Stead
2433 Blueberry Lane
Ann Arbor, MI 48103

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.

Area Code & Phone (734) 730-5440

7. Treasurer's Business Address
2433 Blueberry Lane
Ann Arbor, MI 48103

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

Area Code and Phone (734) 730-5440

Area Code and Phone

FILED
WASHTENAW COUNTY, MI
2018 OCT 24 P 12:03
LAURENCE KESTERBAUM
COUNTY CLERK/REGISTRAR

9. TYPE OF STATEMENT
9a. ☒ Pre-Election OR 9b. ☐ Post-Election
Pre-Election or Post-Election Statement relates to:
☐ Primary
☒ General
☐ Convention
☐ Special
☐ School
☐ Caucus

Required ONLY if candidate is not on the ballot for the current year:

☐ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement () Coverage Year

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

Date of Election, Convention or Caucus
11/6/2018

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is hereby discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper Jim Stead Signature [Signature] Date 10/21/18

Candidate Christine Stead Signature [Signature] Date 10/21/18



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

C-2010-057

1. Committee I.D. Number

Friends of Christine Stead

2. Committee Name

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>3340.00</u>	(18.) \$ <u>3340.00</u>
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>3340.00</u>	
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>171.00</u>	(19.) \$ <u>171.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>3511.00</u>	(20.) \$ <u></u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>6079.35</u>	(21.) \$ <u>6079.35</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>3434.10</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>151.36</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>3585.46</u>	(23.) \$ <u>3585.46</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>1728.20</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>635.75</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>3511.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>4146.75</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>3585.46</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>561.29</u> *	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-057
2. Committee Name Friends of Christine Staal

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>8/2/18</u> Name & Address: <u>Jack Panitel</u> <u>501 Burson Pl</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>unemployed</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>400-</u>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/21/18</u> Name & Address: <u>David Stead</u> <u>2032 The Bluffs</u> <u>Toledo, OH 43615</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>\$ 150-</u>	<u>\$ 150-</u>
		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/24/18</u> Name & Address: <u>Stephanie Hale</u> <u>1316 Beechwood Dr</u> <u>Ann Arbor MI 48103</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>\$ 100-</u>	<u>\$ 100-</u>
		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/1/18</u> Name & Address: <u>Heather Burrows</u> <u>826 Spring St</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Doctor</u> Employer <u>UJ M</u> Business Address <u>4240 Plymouth Rd, 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>\$ 50-</u>	<u>\$ 50-</u>
		Click Here for Memo Itemization	

Page Subtotal

400-

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-057
2. Committee Name Friends of Christine Sisk

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>9/6/18</u>	
Name & Address: <u>Ken Fischer</u> <u>1768 Kestral Way</u> <u>2115 Melrose Ave</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100-</u>	\$ <u>100-</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>9/11/18</u>	
Name & Address: <u>Morgan Richner</u> <u>940 Pine Tree Dr</u> <u>Ann Arbor, MI 48103</u>		\$ <u>100-</u>	\$ <u>100-</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>9/10/18</u>	
Name & Address: <u>Simone Lightfoot</u> <u>1323 S Forest Ave</u> <u>2737 Arrowwood Dr</u> <u>Ann Arbor, MI 48104</u>		\$ <u>50-</u>	\$ <u>50-</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>9/17/18</u>	
Name & Address: <u>Lew Kidder</u> <u>1768 Kestral Way</u> <u>Ann Arbor, MI 48103</u>		\$ <u>500-</u>	\$ <u>500-</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	

Page Subtotal

750

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-057
2. Committee Name Friends of Christine Seal

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>9/18/18</u> Name & Address: <u>Jimi Seal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u>		<u>790 -</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>Kyocera Unmired</u> Business Address <u>State Road, Saline, MI 48176</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<u>\$ 500 -</u>	<u>\$ 500 -</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/18</u> Name & Address: <u>Sarah Sharp</u> <u>720 Brooks</u> <u>Ann Arbor, MI 48103</u>		<u>\$ 100 -</u>	<u>\$ 100 -</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 checked="" type="checkbox"/> Fund Raiser			
		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/24/18</u> Name & Address: <u>Frank Pelosi</u> <u>2046 Chaucer Dr</u> <u>Ann Arbor, MI 48103</u>		<u>\$ 150 -</u>	<u>\$ 150 -</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Doctor</u> Employer <u>UofM</u> Business Address <u>1500 E. Medical Ctr, Ann Arbor, MI 48109</u> Type of Contribution: <input checked="" 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>9/18/18</u> Name & Address: <u>Charlie Adams</u> <u>5171 Arbor Valley Lane</u> <u>Ann Ar, MI 48105</u>		<u>\$ 40 -</u>	<u>\$ 40 -</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 checked="" type="checkbox"/> Fund Raiser			
		Click Here for Memo Itemization	

Page Subtotal

790 -

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-057
2. Committee Name Friends of Christine Stoad

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>10/3/18</u>	
Name & Address: <u>Stephanie Hale</u> <u>1314 Beechwood Dr</u> <u>Ann Arbor MI 48103</u>		\$ <u>100</u> -	\$ <u>200</u> -
5. If over \$100.00 cumulative, please provide: Occupation <u>VP Marketing</u> Employer <u>Chelsea Rhone</u> Business Address <u>130 S. 1st</u> <u>Ann Arbor, MI 48104</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/3/18</u>	
Name & Address: <u>Deb Mericotte</u> <u>2660 Yost Blvd</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100</u> -	\$ <u>100</u> -
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/3/18</u>	
Name & Address: <u>John Austin</u> <u>817 Berkshire Rd</u> <u>Ann Arbor MI 48104</u>		\$ <u>100</u> -	\$ <u>100</u> -
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/3/18</u>	
Name & Address: <u>Ed Rothman</u> <u>415 Barton North Dr.</u> <u>Ann Arbor, MI 48105</u>		\$ <u>150</u> -	\$ <u>150</u> -
5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>U of Michigan</u> Business Address <u>311 West Hall, 1085 S University, 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		Click Here for Memo Itemization	

Page Subtotal

450 -

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-057
2. Committee Name Friends of Christine Seel

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>10/3/18</u>	
Name & Address: <u>Alan + Angela Harris</u> <u>2553 Thornapple Dr</u> <u>Ann Arbor MI 48103</u>		\$ <u>100-</u>	\$ <u>100-</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/3/18</u>	
Name & Address: <u>Wendy Palms</u> <u>718 Lawrence Apt 1</u> <u>Ann Arbor MI 48104</u>		\$ <u>200-</u>	\$ <u>200-</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>Admin. Str.</u> Employer <u>UP Michigan Medical</u>			
Business Address <u>MCubed, 400 N. Ingalls, 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>10/3/18</u>	
Name & Address: <u>Daria Massimilla</u> <u>1785 Timken Trail</u> <u>Ann Arbor MI 48103</u>		\$ <u>75-</u>	\$ <u>75-</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/3/18</u>	
Name & Address: <u>Jamie Dungebach</u> <u>30643 Grispen</u> <u>New Hudson, MI 48165</u>		\$ <u>100-</u>	\$ <u>100-</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

475-

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2010-057

2. Committee Name

Friends of Christine Steel

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	
Name & Address: Dawn Wetzel 345 Glenwood I Ann Arbor, MI 48103		10/3/18	
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		\$ 100-	\$ 100-
		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Del + Jon Kap / Heidorn 2899 Whispering Woods Dr Ann Arbor, MI 48103		10/3/18	
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		\$ 100-	\$ 100-
		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Alicia Simon 1899 Hushy Dr Ann Arbor MI 48103		10/3/18	
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		\$ 100-	\$ 100-
		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Tom Kussencis 2742 Colony Rd Ann Arbor MI 48104		10/19/2018	
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		\$ 100-	\$ 100-
		Click Here for Memo Itemization	

Page Subtotal

400-

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

4445-3265

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2010-057

2. Committee Name

Friends of Christine Seal

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.

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 10/9/18

Name & Address:

Norman Herbert
3681 Wagner Ridge Ct
Ann Arbor, MI 48103

\$ 75-

\$ 75-

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address

\$ _____ \$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____ \$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address

\$ _____ \$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

75-

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

3340

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-057

2. Committee Name Friends of Christine Sleat

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: <u>M Live Media Group</u> <u>3102 Walke Ridge Dr NW</u> <u>Grand Rapids, MI 49544</u>	Date of Receipt <u>3/5/15</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ <u>171 -</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 <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____

Page Subtotal

171 -

Grand Total of All Schedules 1A-1
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171 -

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line 4 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2010-057
2. Committee Name Friends of Christi Staal

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)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christin Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Website Domain - URL</u> 5. Date Of Receipt: <u>7/24/18</u> 6. Vendor Name & Address: <u>Godaddy.com</u></p>	\$ <u>12.17</u>	\$ <u>12.17</u>
<input type="checkbox"/> Fund Raiser Contribution			
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christin Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>PO Box</u> 5. Date Of Receipt: <u>7/30/18</u> 6. Vendor Name & Address: <u>Ann Arbor</u> <u>2075 W. Stadium Blvd</u> <u>Ann Arbor, MI</u></p>	\$ <u>35.00</u>	\$ <u>47.17</u>
<input type="checkbox"/> Fund Raiser Contribution			
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christin Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Website App</u> 5. Date Of Receipt: <u>8/11/18</u> 6. Vendor Name & Address: <u>Adobe Spark</u> <u>345 Park Ave</u> <u>San Jose, CA 95100</u></p>	\$ <u>9.99</u>	\$ <u>57.16</u>
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal

57.14

Grand Total of all Schedules 1-IK
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2010-057

2. Committee Name Friends of Chris Staal

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)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Chris Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u></p> <p>Employer Name & Business Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Yard Signs</u></p> <p>5. Date Of Receipt: <u>8/22/18</u></p> <p>6. Vendor Name & Address: <u>Sawicki + Sons</u> <u>1521 W. Lafayette Blvd</u> <u>Detroit, MI 48216</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>1057.35</u>	\$ <u>1114.51</u>
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u></p> <p>Employer Name & Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Yard Signs</u></p> <p>5. Date Of Receipt: <u>8/30/18</u></p> <p>6. Vendor Name & Address: <u>Sawicki + Sons</u> <u>1521 W. Lafayette Blvd</u> <u>Detroit, MI 48216</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>1057.35</u>	\$ <u>2171.86</u>
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u></p> <p>Employer Name & Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Flyers</u></p> <p>5. Date Of Receipt: <u>9/4/18</u></p> <p>6. Vendor Name & Address: <u>City Printing Company, Inc.</u> <u>411 W. Cross St.</u> <u>PO Box 980333</u> <u>Ypsilanti, MI 48198-0333</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>101.74</u>	\$ <u>2273.62</u>
Page Subtotal		<u>2273.62</u>	

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

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on line 6 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2010-057

2. Committee Name Friends of Christie Staal

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)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Business Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Flyers</u></p> <p>5. Date Of Receipt: <u>9/7/18</u></p> <p>6. Vendor Name & Address: <u>City Printing Company, Inc.</u> <u>411 W. Cross St.</u> <u>PO Box 980333</u> <u>Ypsilanti, MI 48198-0333</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>107.76</u>	\$ <u>2375.38</u>
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Flyers</u></p> <p>5. Date Of Receipt: <u>9/12/18</u></p> <p>6. Vendor Name & Address: <u>City Printing Company, Inc.</u> <u>411 W. Cross St.</u> <u>PO Box 980333</u> <u>Ypsilanti, MI 48198-0333</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>132.50</u>	\$ <u>2507.88</u>
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Flyers</u></p> <p>5. Date Of Receipt: <u>9/20/18</u></p> <p>6. Vendor Name & Address: <u>City Printing Company, Inc.</u> <u>411 W. Cross St.</u> <u>PO Box 980333</u> <u>Ypsilanti, MI 48198-0333</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>183.38</u>	\$ <u>2691.26</u>
Page Subtotal		<u>417.64</u>	

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

C-2010-057

CANDIDATE COMMITTEE

2. Committee Name

Friends of Christine Staal

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)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Business Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Plyers</u></p> <p>5. Date Of Receipt: <u>10/2/18</u></p> <p>6. Vendor Name & Address: <u>City Printing Company, Inc.</u> <u>411 W. Cross St</u> <u>PO Box 980333</u> <u>Ypsilanti, MI 48198</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>132.50</u>	\$ <u>2823.76</u>
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Buttons</u></p> <p>5. Date Of Receipt: <u>10/9/18</u></p> <p>6. Vendor Name & Address: <u>Kitty Kahn</u> <u>515 Krause St.</u> <u>Ann Arbor, MI 48103</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>50 -</u>	\$ <u>50 -</u>
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Address: <u>Headlamp Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Observer Advertisement</u></p> <p>5. Date Of Receipt: <u>9/17/2018</u></p> <p>6. Vendor Name & Address: <u>Ann Arbor Observer</u> <u>2390 Winewood</u> <u>Ann Arbor, MI 48103</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>967.40</u>	\$ <u>3791.16</u>

Page Subtotal

1149.90

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number C-2010-057

CANDIDATE COMMITTEE

2. Committee Name Friends of Christine Staal

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)
<p>Contribution #1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u> If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Business Address: <u>Headlong Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Observer Advertisement</u> 5. Date Of Receipt: <u>10/16/2018</u> 6. Vendor Name & Address: <u>Am Arbor Observer</u> <u>2390 Wine Wood</u> <u>Ann Arbor, MI 48103</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>1428.20</u>	\$ <u>5219.36</u>
<p>Contribution #2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Christine Staal</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Address: <u>Headlong Advisors</u> <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>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</p> <p>Description: <u>Website App</u> 5. Date Of Receipt: <u>10/16/18</u> 6. Vendor Name & Address: <u>Adobe Spark</u> <u>345 Park Ave</u> <u>San Jose, CA 95100</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>9.99</u>	\$ <u>5229.35</u>
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Dessous Jay Mullick</u> <u>710 Green Rd</u> <u>Ann Arbor, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer Name & Address: <u>Dessous</u> <u>312 S Main St</u> <u>Ann Arbor, MI 48104</u></p> <p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input 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</p> <p>Description: <u>Fund Raising Event</u> 5. Date Of Receipt: <u>10/3/18</u> 6. Vendor Name & Address: <u>Dessous</u> <u>312 S Main St</u> <u>Ann Arbor MI 48104</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>800 -</u>	\$ <u>800 -</u>

Page Subtotal

1428.20

Grand Total of all Schedules 1-IK
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5229.35

6079.35

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2010-057
2. Committee Name Friends of Christine Staal

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Christine Staal</u> Address <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Repayment</u> <u>1/2 Yard Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/27/18</u> Date	\$ <u>1057.35</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Christine Staal</u> Address <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Repayment</u> <u>1/2 Yard Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/28/18</u> Date	\$ <u>1057.35</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Christine Staal</u> Address <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Repayment</u> <u>Flyers 9/4/18</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/18</u> Date	\$ <u>1076</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Christine Staal</u> Address <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Repayment</u> <u>Flyers 9/12/18</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/18</u> Date	\$ <u>1076</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Christine Staal</u> Address <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Repayment</u> <u>Flyers 9/12/18</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/18</u> Date	\$ <u>132.50</u> Click Here for Memo Itemization Type

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2450.82

Grand Total of all Schedules 1B
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Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

C-2010-057

2. Committee Name

Friends of Christi Stuel

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Christi Stuel</u> Address <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Repayment</u> <u>Flxrs 9/20/18</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/18</u> Date	\$ <u>18336</u>
Expenditure #2 Name <u>Christi Stuel</u> Address <u>2433 Blueberry Lane</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Repayment</u> <u>Flxrs 10/20/18</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/18</u> Date	\$ <u>13250</u>
Expenditure #3 Name <u>Christi Stuel</u> Address <u>2433 Blueberry Lane</u> <u>Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Repayment</u> <u>Observer Ad 9/10/18</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/18</u> Date	\$ <u>66740</u>
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	\$ _____
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	\$ _____

Subtotal this page

98328

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

3434.10

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2010-057

2. Committee Name

Friends of Christine Skel

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: <u>Christine Skel</u> <u>2453 Blueberry Lane</u> <u>Ann Arbor MI 48103</u>	4. Type: <u>Cash on Ad</u> 5. <u>Date Debt Was Incurred:</u> <u>9/17/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 967.40</u>	<u>10/20/18 \$ 667.40</u> \$ \$ \$ \$	<u>\$ 667.40</u>	<u>\$ 300-</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: <u>Christine Skel</u> <u>2453 Blueberry Lane</u> <u>Ann Arbor MI 48103</u>	4. Type: <u>Cash on Ad</u> 5. <u>Date Debt Was Incurred:</u> <u>10/16/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1428.20</u>	\$ \$ \$ \$ \$	<u>\$ 0</u>	<u>\$ 1428.20</u> <input type="checkbox"/> FORGIVEN
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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
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If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

1728.20

(Complete on last page of Schedule showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

1728.20

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

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-057
2. Committee Name Friends of Christine Steno

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/3/18</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>44</u>	5. Type of Fund Raising Activity <u>Hors d'overs</u>	6. Address and Name (If any) of the place where the activity was held. <u>Dessous</u> <u>312 S. Main St</u> <input type="checkbox"/> <u>Ann Arbor, MI 48104</u> Private Residence
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7. Total Contributions 1515⁰⁰
8. Other Receipts 0
9. Gross Receipts (Add lines 7 and 8) 1515⁰⁰
10. Total Cost of Event 800⁰⁰
(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.