

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

| Report must be legible, typed or printed in ink an the treasurer (or designated record keeper) and or | d signed by candidate. | 3. This Statement covers From | m: October 28 to December 4, 2018 |
|--|--|---|--|
| 1. Committee I.D. Number C-2018-058 2. Committee Name Committee to Elect Suzanne Perkins, Ph | | 4. Candidate Last Name First Name M.I. Perkins Suzanne 4a. Office Sought Including District # or Community Served (If applicable) | |
| | | 4b. County of Residence | 8C × 100 |
| 5. Committee's Mailing Address | | 6. Treasurer's Name & Residential Address | |
| Area Code and Phone 734-330-5250 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. | | Priti Shah, 2202 Stone Valley Drive, Ann Arbor, MI 48103 Area Code & Phone 734-717-2679 | |
| 7. Treasurer's Business Address | | | r's Name and Address (If the committee has a |
| n/a | | Designated Record Keeper) n/a | |
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| Area Code and Phone | in the same | Area Code and Phone | Except Substitution of the Control o |
| 9. TYPE OF STATEMENT 9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to: Primary | Required ONLY if candidate is not on the ballot for the current year: | | 9e. Dissolution of Candidate Committee Solution Solution |
| ☑General ☑Convention | | | Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. |
| Special | | | Effective date of dissolution |
| School Caucus | 9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) | | Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page. |
| Date of Election, Convention or Caucus | - 10 | | Notes |
| November 6, 2018 | g Warvel hard file of required has copled life Schedales | | *et commerce to a does not bevera Reportion * the Company of Statement of the Reportion |
| I0. Verification: I\We certify that all reasonable dilige | ence was used i | in the preparation of this statement | ent and attached schedules (if any) and to the best of |
| current Treasurer or Designated Record keeper Type or Print Name | accurate and co | Signature | |
| Candidate Suzanne Perksin Type or Print Name | នេះប ទូកកែ ^ង : | Signature | C.f. 12/4/2018 |