



**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.

1. Committee I.D. Number <b>C-2002-028</b>		3. This Statement covers From: <u>07-23-18</u> to <u>08-27-18</u>	
2. Committee Name <b>Conan Smith for County Commission</b>		4. Candidate Last Name <b>Smith</b> First Name <b>Conan</b> M.I. <b>M</b> 4a. Office Sought Including District # or Community Served (If applicable) <b>Washtenaw County Commissioner, District #9</b>	
5. Committee's Mailing Address <b>234 8th Street Ann Arbor, MI 48103</b>  Area Code and Phone _____ <small>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.</small>		6. Treasurer's Name & Residential Address <b>Rebekah Warren 1307 Newport Road Ann Arbor, MI 48103</b>  Area Code & Phone _____	
7. Treasurer's Business Address <b>234 8th Street Ann Arbor, MI 48103</b>  Area Code and Phone _____		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)  Area Code and Phone _____	

FILED  
 WASHTENAW COUNTY, MI  
 2018 SEP - 6 A 8: 56  
 LAWRENCE KESTENBAUM  
 COUNTY CLERK/REGISTRAR

<b>9. TYPE OF STATEMENT</b> 9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election  Pre-Election or Post-Election Statement relates to: <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  Date of Election, Convention or Caucus <u>08/07/18</u>		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement ( _____ ) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		<b>9e. Dissolution of Candidate Committee</b> <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt.  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.	
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10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper <b>Rebekah Warren</b> Type or Print Name	 Signature	Date <u>08-27-18</u>
Candidate <b>Conan Smith</b> Type or Print Name	 Signature	Date <u>4 Sep 18</u>



1. Committee I.D. Number C2002-028

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Conan Smith for County Commission

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>4865</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>4865</u>	(18.) \$ <u>18444 04</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>4865</u>	(20.) \$ <u>18444 04</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ _____	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>22354.71</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>22354.71</u>	(23.) \$ <u>26553 40</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
10. Disbursements		
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>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>3910.67</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>13579.04</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>4865 00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>18444 04</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>22354 71</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>-3910 67</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2002-028  
2. Committee Name Conan Smith for County Commission

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

3. Contribution # 1 PAC Receipt?  YES 4. Date of Receipt 8/6/18  
Name & Address:  
Cross, Karen  
1803 High Pointe Ln  
Ann Arbor, MI 48108  
6. Amount \$ 50.00 \$ \_\_\_\_\_  
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_  
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 8/6/2018  
Name & Address:  
Offen, Ellen  
1911 Boulder Dr.  
Ann Arbor, MI 48104  
6. Amount \$ 200.00 \$ 550.00  
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_  
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization   
Occupation Retired Employer Retired  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 3 PAC Receipt?  YES 4. Date of Receipt 8/7/2018  
Name & Address:  
Wilbanks, Cynthia  
6025 Vista Dr.  
Ypsilanti, MI 48197  
6. Amount \$ 100.00 \$ \_\_\_\_\_  
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_  
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization   
Occupation University Administrator Employer University of Michigan  
Business Address 500 S. State Street, Ann Arbor, MI 48109  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 4 PAC Receipt?  YES 4. Date of Receipt 8/7/2018  
Name & Address:  
Schwartz, Ken  
2474 Hickman Rd.  
Ann Arbor, MI 48105  
6. Amount \$ 50.00 \$ \_\_\_\_\_  
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_  
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 400  
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-2002-028  
2. Committee Name Conan Smith for County Commission

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>8/5/2018</u>	
Name & Address: <u>Binkow, Joan</u> <u>414 N Main St APT 6</u> <u>Ann Arbor, MI, 48104</u>		\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>		Click Here for Memo Itemization <input type="checkbox"/>	
Business Address _____			
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>8/6/2018</u>	
Name & Address: <u>Milton-Pung, Melissa</u> <u>817 Kewanee St.</u> <u>Ypsilanti, MI, 48197</u>		\$ <u>25.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="checkbox"/>	
Business Address _____			
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>8/6/2018</u>	
Name & Address: <u>Pollack, Lana</u> <u>345 Sumac Ln</u> <u>Ann Arbor, MI, 48105</u>		\$ <u>150.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Commissioner</u> Employer <u>International Joint Commission</u>		Click Here for Memo Itemization <input type="checkbox"/>	
Business Address <u>1717 H Street NW Suite 801, Washington, DC 20006</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/6/2018</u>	
Name & Address: <u>Townsend, James</u> <u>25495 York Road</u> <u>Royal Oak, MI 48067</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Associate Attorney</u> Employer <u>Rutzel Long</u>		Click Here for Memo Itemization <input type="checkbox"/>	
Business Address <u>150 West Jefferson Ave Suite 100, Detroit, MI 48226</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 425  
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-2002-028  
2. Committee Name Conan Smith for County Commission

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>8/3/2018</u>	
Name & Address: <u>Schilling, Elizabeth</u> <u>9W Windsor Ave</u> <u>Alexandria VA 22301-1513</u>		\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>Smart Growth America</u>		Click Here for Memo Itemization <input type="checkbox"/>	
Business Address <u>1150 15th St, Ste. 450, Washington, DC 20005</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>8/3/2018</u>	
Name & Address: <u>Kerr, Mary</u> <u>2331 Valley Dr</u> <u>Ypsilanti MI 48197-4359</u>		\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Destination Ann Arbor</u>		Click Here for Memo Itemization <input type="checkbox"/>	
Business Address <u>315 W. Huron St #310, Ann Arbor, MI 48103</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/3/2018</u>	
Name & Address: <u>Leanski, Michael</u> <u>4977 Saint Annes</u> <u>Ann Arbor MI 48103-9080</u>		\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>CFO</u> Employer <u>284 Partners, LLC</u>		Click Here for Memo Itemization <input type="checkbox"/>	
Business Address <u>215 E. Washington 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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/4/2018</u>	
Name & Address: <u>Greff, Matthew</u> <u>411 Walnut St. #14229</u> <u>Green Cove Spring FL 32043-3443</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Greff Brewing Services LLC</u>		Click Here for Memo Itemization <input type="checkbox"/>	
Business Address <u>1305 Grant St., Ypsilanti 48197</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 800

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

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3. Contribution # 1 PAC Receipt?  YES 4. Date of Receipt 7/29/18

Name & Address: Paula Petipren Wiggins  
5527 Merkel Rd  
Dexter, MI 48130-9652

6. Amount \$ 100- \$ \_\_\_\_\_

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

5. If over \$100.00 cumulative, please provide: Occupation Unemployed Employer \_\_\_\_\_ Click Here for Memo Itemization

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 2 PAC Receipt?  YES 4. Date of Receipt 7/30/18

Name & Address: Zac Foster  
41634 Bedford Dr  
Canton, MI 48187-3704

6. Amount \$ 200.00 \$ \_\_\_\_\_

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

5. If over \$100.00 cumulative, please provide: Occupation Silanti Housing Commissioner Employer Executive Click Here for Memo Itemization

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 3 PAC Receipt?  YES 4. Date of Receipt 8/3/18

Name & Address: Amy Butler  
5027 Durfee Rd  
Eaton Rapids, MI 48827-8902

6. Amount \$ 100.00 \$ \_\_\_\_\_

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

5. If over \$100.00 cumulative, please provide: Occupation Administrative Employer MSU Click Here for Memo Itemization

Business Address 220 Troubridge Rd., East Lansing, MI 48824

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 4 PAC Receipt?  YES 4. Date of Receipt 8/3/2018

Name & Address: Benjamin Stupka  
1022 W Webster Rd  
Royal Oak, MI 48073-3331

6. Amount \$ 200 \$ \_\_\_\_\_

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

5. If over \$100.00 cumulative, please provide: Occupation Urban Planner Employer WSP Click Here for Memo Itemization

Business Address 500 Griswold St, Ste. 2100, Detroit, MI 48226

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal 300  
Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
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3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 8/2/2018

Name & Address:  
Osborne, Elizabeth  
1364 Meridian Pl NW  
Washington D.C. 20010

6. Amount \$ 50.00 \$ \_\_\_\_\_

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

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

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 8/2/2018

Name & Address:  
Johnson, Henry  
102 Tulip Tree  
Ann Arbor MI 48103

6. Amount \$ 100.00 \$ \_\_\_\_\_

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

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

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Click Here for Memo Itemization

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 8/2/2018

Name & Address:  
Schwartz, Ken  
2474 Hickman Rd  
Ann Arbor, MI 48105

6. Amount \$ 50.00 \$ 100.00

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

5. If over \$100.00 cumulative, please provide:  
Occupation Gov't Employee Employer Superior Township

Business Address 3040 N. Prospect Rd, Superior Township, MI 48198

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Click Here for Memo Itemization

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 8/2/2018

Name & Address:  
Zweifler, Ruth  
1706 S. University Ave.  
Ann Arbor, MI 48104

6. Amount \$ 50.00 \$ \_\_\_\_\_

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

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

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Click Here for Memo Itemization

Page Subtotal 250

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-2002-028  
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/31/18</u>	
Name & Address: <u>NORMAN COX</u> <u>1520 LINWOOD</u> <u>ANN ARBOR MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
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>7/31/18</u>	
Name & Address: <u>SARAH JOHNSON</u> <u>28835 STREMWOOD</u> <u>SOUTHFIELD MI 48034</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHYSICIAN</u> Employer <u>STIVE Joints HEALTH</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>26771 West 12 Mile Rd #106, Southfield, MI 48034</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>8/1/18</u>	
Name & Address: <u>MICHAEL LIVEDALE</u> <u>8710 HURON BLUFFS</u> <u>WHITE LAKE, MI 48386</u>		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUS. DEV. MANAGER</u> Employer <u>PERFORMANCE SERVICES</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>28175 Haggerty Rd, Novi, MI 48377</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/1/18</u>	
Name & Address: <u>PAUL SCHUTT</u> <u>201 S. <del>ST</del> FIRST ST</u> <u>ANN ARBOR MI 48103</u>		\$ <u>500</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE</u> Employer <u>ISSUE MEDS GROUP</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>4470 2nd Ave, Detroit, MI 48201</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 1750  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
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1. Committee I.D. Number C-2002-028  
2. Committee Name Conan Smith for County Commission

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>7/31/2018</u>	
Name & Address: <u>Gainsley, Adam</u> <u>409 N. Adams St</u> <u>Ypsilanti, MI 48197</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
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>7/31/2018</u>	
Name & Address: <u>Caron, Alan</u> <u>5 Weston Point Rd.</u> <u>Freeport, ME 04032</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Caron Communications</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>5 Weston Point Road, Freeport, ME 04032</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>7/31/2018</u>	
Name & Address: <u>White, Emma</u> <u>2965 Verle Ave</u> <u>Ann Arbor, MI 48108</u>		\$ <u>100.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Market Research</u> Employer <u>Emma White Research, LLC</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>2965 Verle Ave, 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			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/31/2018</u>	
Name & Address: <u>Pierce, Jeanette</u> <u>1703 Orleans St.</u> <u>Detroit, MI 48207</u>		\$ <u>25.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 275

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 2002-028  
2. Committee Name Conan Smith for County Commission

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>7/30/2018</u>	
Name & Address: <u>Pruss, Stanley</u> <u>12445 N. Island View Dr</u> <u>Northport MI 49670-8605</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
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>7/30/2018</u>	
Name & Address: <u>Gallagher, Terrance</u> <u>1204 W Madison St.</u> <u>Ann Arbor MI 48103-4730</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
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>7/30/2018</u>	
Name & Address: <u>Guilbeaux, Waymon</u> <u>22849 Timberline Dr</u> <u>Southfield MI 48033-6563</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Self employed</u> Employer <u>Consultant</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
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>7/30/2018</u>	
Name & Address: <u>Foster, Zac</u> <u>41634 Bedford Dr</u> <u>Canton MI 48187-3704</u>		\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Ypsilanti Housing</u> Employer <u>Executive</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>601 Armstrong Dr, Ypsilanti, MI 48197</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

400

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-2002-028  
2. Committee Name Conan Smith for County Commission

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>7/30/2018</u>	
Name & Address: <u>Vojnovic, Igor</u> <u>620 Rosewood Ave.</u> <u>East Lansing, MI 48823</u>		\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>MICHIGAN STATE UNIVERSITY</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>220 Townsend E. Lansing, MI 48824</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>7/30/2018</u>	
Name & Address: <u>Farber, Julia</u> <u>1270 Pine St. Apt. 27</u> <u>San Francisco, CA 94109</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Sustainability Manager</u> Employer <u>LeGrand</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>2700 Zanker Road, Suite 168, San Jose, CA 95134</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>7/30/2018</u>	
Name & Address: <u>Owsley, Kathleen</u> <u>3800 Tech Hill Dr.</u> <u>Farmington Hills, MI 48334</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
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 _____	
Name & Address: <u>GodSpeed, Robert</u> <u>823 Loyola Dr.</u> <u>Ann Arbor, MI 48103</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

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-2002-028  
2. Committee Name Conan Smith for County Commission

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>7/29/18</u>	
Name & Address: <u>MICHAEL GARFIELD</u> <u>210 HISCOCK</u> <u>ANN ARBOR MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
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>7/29/18</u>	
Name & Address: <u>PAULA PETTIPREN WIGGINS</u> <u>5527 MERKEL</u> <u>DEXTER MI 48130</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>N/A</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
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>7/30/18</u>	
Name & Address: <u>GEOFF YOUNG</u> <u>160 LAKEVIEW AVE</u> <u>GROSSE POINT FARMS MI 48286</u>		\$ <u>15</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
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>7/30/18</u>	
Name & Address: <u>HEIDI <del>ZABIK</del> ZABIK</u> <u>4924 E HASLET</u> <u>PERRY MI 48872</u>		\$ <u>100</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Legislative Aide</u> Employer <u>Michigan House of Representatives</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>124 N. Capital Ave, Lansing, MI 48933</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

265

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-2002-028  
2. Committee Name Conan Smith for County Commission

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>7/25/18</u> Name & Address: <u>Dave Monforton</u> <u>47 First St</u> <u>Milan, MI 48160</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>25.00</u> \$ _____	Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7/26/18</u> Name & Address: <u>Yousef Rabhi</u> <u>1255 Kensington Dr</u> <u>Ann Arbor, MI 48104-6209</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>State Representative</u> Employer <u>State of Michigan</u> Business Address <u>100 W. Capital Ave., Lansing, MI 48133</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u> \$ _____	Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7/27/18</u> Name & Address: <u>Steve Gray</u> <u>1939 Roosevelt</u> <u>Ypsilanti, MI 48197-3221</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 type="checkbox"/> Fund Raiser	\$ <u>75.00</u> \$ _____	Click Here for Memo Itemization <input type="button" value="v"/>
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	\$ _____      \$ _____	Click Here for Memo Itemization <input type="button" value="v"/>

Page Subtotal 200  
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-2002-028  
2. Committee Name Conan Smith for County Commission

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>8/6/18</u>	
Name & Address: <u>CHARLOTTE MALONEY</u> <u>18633 WILLIAMS CT</u> <u>LIVONIA MI 48152</u>		\$ <u>50</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
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>8/3/18</u>	
Name & Address: <u>CHRIS KOIB</u> <u>803 EDGEWOOD PI</u> <u>ANN ARBOR, MI 48103-4860</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Michigan Environmental Council</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>602 W Tonia St, Lansing, MI 48933</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>8/3/18</u>	
Name & Address: <u>CURTIS HERTZ</u> <u>PO BOX 16037</u> <u>LANSING, MI 48901-6037</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>State Senator</u> Employer <u>Michigan Senate</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>100 N Capitol Ave, Lansing, MI 48933</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/24/18</u>	
Name & Address: <u>EMILY THOMPSON</u> <u>667 W BETHUNE ST</u> <u>DETROIT, MI 48202</u>		\$ <u>75.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 325  
Grand Total of All Schedules 1A 4865  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.

**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2002-628  
2. Committee Name Conan Smith for County Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Savers Wholesale Printing</u> Address <u>31681 Dequindre Rd. Madison Hts, MI 48071</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/1/2018</u> Date	<u>\$1,125.78</u>
Expenditure #2 Name <u>Savers Wholesale Printing</u> Address <u>31681 Dequindre Rd. Madison Hts, MI 48071</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/30/2018</u> Date	<u>\$79.50</u>
Expenditure #3 Name <u>Pfost Design</u> Address <u>2964 Birch Hollow Dr #1A Ann Arbor, MI 48108</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Contract Services</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/30/2018</u> Date	<u>\$315.00</u>
Expenditure #4 Name <u>Jamie Latendress</u> Address <u>1520 Robindale Ave Dearborn, MI 48128</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Contract Services</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/28/2018</u> Date	<u>\$870.00</u>
Expenditure #5 Name <u>USPS</u> Address <u>2075 Stadium Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/1/2018</u> Date	<u>\$1,570.75</u>

Subtotal this page 396103  
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**

C-2002-028

1. Committee I. D. Number \_\_\_\_\_  
2. Committee Name Conan Smith for County Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy</u> <u>Grand Ledge, MI 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/3/2018</u> Date	<del>\$ 200.00</del> <u>1186.56</u>
Expenditure #2 Name <u>Direct Mail Advantage</u> Address <u>5707 School St</u> <u>Hastlett, MI 48840</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/3/2018</u> Date	<u>\$ 30.00</u>
Expenditure #3 Name <u>Kroger</u> Address <u>400 S Maple</u> <u>Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Volunteer Expenses</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/6/2018</u> Date	<del>\$ 200.00</del> <u>15.77</u>
Expenditure #4 Name <u>USPS</u> Address <u>2075 Stadium</u> <u>Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Bulk Mail Permit</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/11/2018</u> Date	<u>\$ 225.00</u>
Expenditure #5 Name <u>NGPVAN</u> Address <u>1101 1574 St</u> <u>WASHINGTON DC 20005</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Database Services</u> <u>Finance Tracking</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07-27-18</u> Date	<u>\$ 150.00</u>

Subtotal this page 1607.33  
 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-2002-028  
2. Committee Name Conan Smith for County Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Barry Bagel</u> Address <u>Dr. Aaron MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Vol Expenses</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/28/18</u> Date	<u>\$ 14.49</u>
Expenditure #2 Name <u>STAPLES</u> Address <u>2601 Jackson Ave Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/26/18</u> Date	<u>\$ 52.91</u>
Expenditure #3 Name <u>Kolossos Printing</u> Address <u>2055 W. Stadium Blvd Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/26/18</u> Date	<u>\$ 74.20</u>
Expenditure #4 Name <u>NGP VAN</u> Address <u>1101 15th St NW Suite 500 Washington DC 20005</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Database Service</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/26/18</u> Date	<u>\$ 150.00</u>
Expenditure #5 Name <u>Savers Wholesale Printing</u> Address <u>31681 Dequindre Rd Madison Heights MI 48071</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/25/18</u> Date	<u>\$ 1431.00</u>

Subtotal this page 1722.68

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 C2002-028  
2. Committee Name Conan Smith for County Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>ADAPTIVE STRATEGICS</u> Address <u>234 8TH ST</u> <u>ANN ARBOR MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CONTRACT SERVICES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/1</u> Date	<u>\$ 1500</u>
Expenditure #2 Name <u>ADAPTIVE STRATEGICS</u> Address <u>234 8TH ST</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CONTRACT SERVICES</u> <u>Payroll</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/3</u> Date	<u>\$ 7081.83</u>
Expenditure #3 Name <u>ADAPTIVE STRATEGICS</u> Address <u>234 8TH ST</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CONTRACT SERVICES</u> <u>Payroll</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/10</u> Date	<u>\$ 7081.84</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 13663.87

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 22354.71

Enter this total on line 8a of Summary Page



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

1. Committee I.D. Number C2002-028

2. Committee Name Conan Smith for County Commission

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 endorsers 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: Conan Smith 234 8th St Ann Arbor, MI 48103	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>08/08/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 3,910.67</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>3,910.67</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: _____ 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: \$ _____				

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) **\$3,910.67**

Grand Total of all Schedules 1E **\$3,910.67**  
(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.