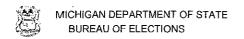
## CANDIDATE COMMITTEE COVER PAGE

## FOR OFFICIAL USE ONLY

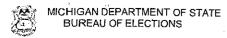
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 09/22/11 to 12/31/11	
1. Committee I.D. Number	4. Candidate Last Name First Name M.I.	
C-2011-040	LaBarre Andrew R	
2. Committee Name	4a. Office Sought Including District # or Community Served (if applicable)	
Andy LaBarre for Washtenaw	County Commissioner District 7	
	4b. County of Residence Washtenaw	
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address	
2411 Meadowridge Ct.	Ellen Offen 1911 Boulder Dr.	
Ann Arbor, MI 48105		
(734) 945-1298	Ann Arbor, MI 48104	
Area Code and Phone (734) 945-1298  If the address in this box is different from the committee		
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) 417-7239	
7. Treasurer's Business Address	Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)	
101 S. Huron St.		
	None	
Ypsilanti, MI 48197		
•		
Area Code and Phone (734) 485-8730	ST - 20	
9. TYPE OF STATEMENT	Area Code and Phone	
o- [-7]	t-Election 9c. Annual Statement (2011 Coverage Year)	
Pre-Election or Post-Election Statement relates to:	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)	
Primary Gene	9e. Dissolution of Candidate Committee	
Convention	ecol Effective Date of Dissolution	
Special	· .	
Cauc	By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if	
Date of Election, Convention or Caucus	the dissolution cannot be granted, that this be considered a request for	
87/2012	the Reporting Waiver.  Note: The disposition of residual funds must be reported on Schedule	
A committee that does not have a Reporting Waiver must ble all and	1B and the Summary Page.	
Schedules. Direct contributions, in-kind out fibrillous, loans, expen-	quired Campaign Statements. The Campaign Statements must include all applicable additionable and outstanding debts count against the \$1,000 Reporting Waiver threshold.	
amendment to the Statement of Organization should accompany this before the filing deadline of a required campaign statement, that	ed since the information was shown on the committee's Statement of Organization, an also Campaign Statement. If a request for a Reporting Waiver is not received on or lat campaign statement cannot be waived.	
10. Verification: I/We certify that all reasonable diligence was used in	n the preparation of this statement and attached schedules (if any) and to the best of mplete.	
	mprese. N/1.11 M/10	
Current Treasurer or Designated Record keeper Ellen Offen	Allen afell par 4/95/12	
Type or Print Name	Signature Date	
Candidate Andrew LaBarre	( Show takes illasting	
Type or Print Name	Signature Date 4/03/12	



## **SUMMARY PAGE** CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-040
2. Committee Name Andy LaBarre for Washtenaw

RECEIPTS	Column I	Column II
RECEIF13	This Period	Cumulative this election cycle
3. Contributions		•
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES	4	02 4
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	(21.)\$ 83,\$0
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	,
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements     a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.)\$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 5440.00	
(Enter zero if no previous reports have been filed.)	Q2 11D	T
14. Amount received during reporting period	(14.)+\$ 05.40	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ 5523.40	ļ
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$	
(Add lines 9 and 11)	C622 40	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>55225.7°</u> *	



Page \_\_\_\_\_ of \_\_\_\_

## ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number C-2011-040

<b>CANDIDATE</b>	COMMITTEE
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2. Committee Name Andy LaBarre for Washtenaw

CANDIDATE COM	AILLIEE TO COMMITTEE TO COMMITTE TO COMMITTEE TO COMMITTEE TO COMMITTEE TO COMMITTEE TO COMMITTE TO COMMITTEE TO COMMITTEE TO COMMITTEE TO COMMITTEE TO COMMITTE		
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). Reportall in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan		<u> </u>
Adam Zemke	Goods Donated or Loaned Services Donated	83.40	133.40
628 N. Fourth Ave.	Goods or Services Purchased by Candidate or Others <sup>Ψ</sup>		,
Ann Arbor, MI	Goods or Services Purchased by Candidate or Others- LOAN		
If over \$100.00 cumulative, please provide: Occupation:	Description Website set-up		
Employer Name & Business Address:	5. Date Of Receipt: 09/22/11		
SC3Inc.17515West9MileRd.	6. Vendor Name & Address:		
Southfield,MI48075	Blue Host Inc. 1958 South	ick Here for Memo Ite	mization
Fund Raiser Contribution	950 East Provo Utah 4606		
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$	
If over \$100.00 cumulative, please provide:	Description		
Occupation:	5. Date Of Receipt:		
Employer Name & Address:	6. Vendor Name & Address:		
Fund Raiser Contribution	Clic	ck Here for Memo Iter	mization
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	-	
Name & Address:	Goods Donated or Loaned Services Donated \$	\$	
	Goods or Services Purchased by Candidate or Others		
	Goods or Services Purchased by Candidate or Others-LOAN		
If over \$100.00 cumulative, please provide:	Description		
Occupation:	5. Date Of Receipt:		
Employer Name & Address:	6. Vendor Name & Address;		
		k Here for Memo Item	rization
Fund Raiser Contribution	,		
	Page Subtotal	\$83.40	
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	83.40	
		Enter this total on line 6 of Sumπai Page	ry