



**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: 1/1/2018 to 7/20/2018

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

2. Committee Name

4. Candidate Last Name **LaBarre** First Name **Andrew** M.I. **R**

4a. Office Sought Including District # or Community Served (If applicable)  
**Washtenaw County Board of Commissioners District 7**

4b. County of Residence **Washtenaw**

5. Committee's Mailing Address  
**2411 Meadowridge Ct.  
Ann Arbor, MI 48105**

Area Code and Phone 734 945-1298  
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.

6. Treasurer's Name & Residential Address  
**Ellen Offen  
1911 Bolder Dr.  
Ann Arbor, MI 48104**

Area Code & Phone 734 417-7293

7. Treasurer's Business Address  
**None**

Area Code and Phone \_\_\_\_\_

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)  
**None**

Area Code and Phone \_\_\_\_\_

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

Date of Election, Convention or Caucus  
8/7/2018

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.)

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 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.

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 Ellen Offen Signature *Ellen Offen* Date 7/26/18  
Type or Print Name Signature Date

Candidate Andrew LaBarre Signature *Andrew LaBarre* Date 7/26/18  
Type or Print Name Signature Date



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

2. Committee Name Andy LaBarre for Washtenaw

**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>3960.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ _____	(18.) \$ _____
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>3960.00</u>	(20.) \$ <u>3960.00</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.) \$ _____	
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>3114.21</u>	(23.) \$ <u>4675.84</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.) \$ _____	
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>871.13</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>3960</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>4831.13</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>3114.21</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1716.92</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

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 2/13/18

Name & Address:  
Andy LaBarre  
2411 Meadowridge Ct.  
Ann Arbor, MI 48105

6. Amount: \$ 10.00 7. Cumulative: \$ 10.00

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 2/24/2018

Name & Address:  
Jim Toy  
1723 Dexter Ave., Apt. 2  
Ann Arbor, MI 48104

6. Amount: \$ 50.00 7. Cumulative: \$ 50.00

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 2/21/2018

Name & Address:  
Ray Detter  
120 N Division St  
Ann Arbor, MI 48104

6. Amount: \$ 50.00 7. Cumulative: \$ 50.00

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 2/23/2018

Name & Address:  
Zinnia Kallabat  
4743 S Knoll Rd.  
West Bloomfield, MI 48323

6. Amount: \$ 75.00 7. Cumulative: \$ 75.00

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 185.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

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>2/26/2018</u>
Name & Address:  Michael Robbins 2125 14th St., NW Apt. 312W Washington, DC 20009-4863		500.00 \$ _____	500.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Founder and COO</u> Employer <u>The Moak Group</u>		<a href="#">Click Here for Memo Itemization</a>	
Business Address <u>401 9th St. NW Suite 740 Washington, DC 20004</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>3/5/2018</u>
Name & Address:  Stuart & Janet Dowty & Goldwasser 3546 Hillside Dr. Ypsilanti, MI 48197		100.00 \$ _____	100.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>3/5/2018</u>
Name & Address:  Bob King 300 S. Revena Blvd. Ann Arbor, MI 48103		50.00 \$ _____	50.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>3/5/2018</u>
Name & Address:  Ian Robinson 3435 Brentwood Ct. Ann Arbor, MI 48108		50.00 \$ _____	50.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 700.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

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 3/5/2018  
Name & Address:

Prudence Rosenthal  
2105 Devonshire Rd.  
Ann Arbor, MI 48105

\$ 50.00

\$ 50.00

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 3/5/2018  
Name & Address:

Barbara Cecil  
736 Buchanan St.  
Canton, MI 48188

\$ 50.00

\$ 50.00

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 # 3 PAC Receipt?  YES 4. Date of Receipt 3/8/2018  
Name & Address:

Susan Miller  
2016 Shadford Rd.  
Ann Arbor, MI 48104

\$ 50.00

\$ 50.00

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 # 4 PAC Receipt?  YES 4. Date of Receipt 3/12/2018  
Name & Address:

Margaret Bennett  
3050 Lake Haven  
Ann Arbor, MI 48105

\$ 10.00

\$ 10.00

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

\$ 160.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

C-2011-040

1. Committee I.D. Number

Andy LaBarre for Washtenaw

2. Committee Name

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? <input type="checkbox"/> YES	4. Date of Receipt	3/12/2018
Name & Address: Ellen Offen 1911 Boulder Dr. Ann Arbor, MI 48104		250.00 \$	250.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3/12/2018
Name & Address: Brenda McKinney 8418 Thames Ct. Ypsilanti, MI 48198		50.00 \$	50.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3/12/2018
Name & Address: Mary Kinley 843 Asa Gray Ann Arbor, MI 48105		150.00 \$	150.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3/12/2018
Name & Address: James Chesney 1520 Baldwin Ave. Ann Arbor, MI 48104		50.00 \$	50.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

500.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
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CANDIDATE COMMITTEE**

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

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

3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 3/12/2018  
Name & Address:  
Mary Hall-Thiam  
2755 Arrowwood Tr.  
Ann Arbor, MI 48105

50.00 50.00  
\$ \$

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 3/12/2018  
Name & Address:  
Phillip Roos  
493 Orchard Hills Dr.  
Ann Arbor, MI 48104

200.00 200.00  
\$ \$

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

[Click Here for Memo Itemization](#)

Occupation CEO Employer Great Lakes Growthworks

Business Address 220 S Main St Ste 300-301 Ann Arbor, MI 48104

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 3/12/2018  
Name & Address:  
Robert and Marcella Zorn  
3198 Bolgos Cr. Ann Arbor, MI 48105

50.00 50.00  
\$ \$

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 3/12/2018  
Name & Address:  
Les Alexander  
25794 Castlefreigh Dr.  
Farmington Hills, MI 48336

100.00 100.00  
\$ \$

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 400.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3/12/2018</u>	
Name & Address: <u>Leigh Greden</u> <u>2860 Gladstone Ave.</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		<a href="#">Click Here for Memo Itemization</a>	
Type of Contribution: <input checked="" 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>3/12/2018</u>	
Name & Address: <u>Peri Stone-Palmquist</u> <u>1008 W. Cross St.</u> <u>Ypsilanti, MI 48197</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		<a href="#">Click Here for Memo Itemization</a>	
Type of Contribution: <input checked="" 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>3/12/2018</u>	
Name & Address: <u>Ann Tomlanovich</u> <u>2307 Vinewood Blvd.</u> <u>Ann Arbor, MI 48104</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		<a href="#">Click Here for Memo Itemization</a>	
Type of Contribution: <input checked="" 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>3/12/2018</u>	
Name & Address: <u>Jerry and Elise Herman</u> <u>3330 Yellowstone Dr.</u> <u>Ann Arbor, MI 48105</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		<a href="#">Click Here for Memo Itemization</a>	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

250.00

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

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line 3a of Summary  
Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

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3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>3/12/2018</u> Name & Address: Mary Kerr 2331 Valley Dr. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Destination Ann Arbor</u> Business Address <u>315 W Huron St #340, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		250.00 \$ _____	250.00 \$ _____
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>3/12/2018</u> Name & Address: Peter Eckstein 2551 Londonderry Rd. Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		50.00 \$ _____	50.00 \$ _____
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>3/12/2018</u> Name & Address: Jeannine Palms 2656 Easy St. Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		100.00 \$ _____	100.00 \$ _____
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>3/12/2018</u> Name & Address: James Dries 3840 Michael Rd. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		100.00 \$ _____	100.00 \$ _____

Page Subtotal 500.00  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

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 3/12/2018  
Name & Address:  
Janis Bobrin and Mike Allemang  
3465 Vintage Valley Rd. Ann Arbor, MI 48105

\$ 250.00

\$ 250.00

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

Occupation Retired 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 3/12/2018  
Name & Address:  
Kyle Mazurek  
2526 W Liberty St. Ann Arbor, MI 48103

\$ 100.00

\$ 100.00

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 #3 PAC Receipt?  YES 4. Date of Receipt 3/12/2018  
Name & Address:  
Stella Wixom  
4940 Gullan Dr. Ann Arbor, MI 48103

\$ 50.00

\$ 50.00

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 #4 PAC Receipt?  YES 4. Date of Receipt \_\_\_\_\_  
Name & Address:  
Steven Gulick  
437 Sumark Way Ann Arbor, MI 48103

\$ 50.00

\$ 50.00

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

450.00

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

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line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

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? <input type="checkbox"/> YES 4. Date of Receipt: <u>3/13/2018</u> Name & Address: Jack Cederquist 2145 Ardenné Dr Ann Arbor, MI 48105 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		\$ 50.00	\$ 50.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>3/14/2018</u> Name & Address: Alma Wheeler Smith 5540 Five Mile Rd. South Lyon, MI 48178 5. If over \$100.00 cumulative, please provide: Retired Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ 150.00	\$ 150.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>3/17/2018</u> Name & Address: Linda LaBarre 4048 Bolder Pond Dr. Ann Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Retired Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ 150.00	\$ 150.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>3/17/2018</u> Name & Address: Margaret Bennett 3050 Lake Haven Ann Arbor, MI 48105 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		\$ 40.00	\$ 50.00

Page Subtotal 390.00  
Grand Total of All Schedules 1A.  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

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 Name & Address: Guy Conti 8372 Barrington Dr. Superior Township, MI 48198	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3/22/2018</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		100.00 \$ _____	100.00 \$ _____
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: Citizens Protecting Our MI Water P.O. Box 130985 Ann Arbor, MI 48113	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>4/10/2018</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		250.00 \$ _____	250.00 \$ _____
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3 Name & Address: Brian Marl 220 Russell St. Saline, MI 48176	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/23/2018</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		50.00 \$ _____	50.00 \$ _____
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4 Name & Address: Bob and Sandy White 1849 Saxon St. Ann Arbor, MI 48103	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/28/2018</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		25.00 \$ _____	25.00 \$ _____
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 425.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule) 3960.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number \_\_\_\_\_

2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name: <u>Go Daddy</u> Address: <u>1455 N. Hayden Rd. #219</u> <u>Scottsdale, AZ 85260</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>1/2/18</u> Date	<u>\$ 7.99</u>
Expenditure #2 Name: <u>Paya</u> Address: <u>12120 Sunset Hills Rd.</u> <u>Suite 500</u> <u>Reston, VA 20190</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Bank processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>1/2/18</u> Date	<u>\$ 2.50</u>
Expenditure #3 Name: <u>Washtenaw County Clerk</u> Address: <u>200 N. Main St.</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Late filing fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>1/22/18</u> Date	<u>\$ 50.00</u>
Expenditure #4 Name: <u>Washtenaw County Clerk</u> Address: <u>200 N. Main St.</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Filing fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>1/23/18</u> Date	<u>\$ 100.00</u>
Expenditure #5 Name: <u>Paya</u> Address: <u>12120 Sunset Hills Rd.</u> <u>Suite 500</u> <u>Reston, VA 20190</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>2/2/18</u> Date	<u>\$ 2.50</u>

Subtotal this page 162.99

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 \_\_\_\_\_

2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #16 Name <u>Go Daddy</u> Address <u>14455 N. Hayden Rd. #219</u> <u>Scottsdale, AZ 85260</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2/2/18</u> Date	<u>\$ 7.99</u>
Expenditure #17 Name <u>Brown Chapel AME</u> Address <u>1043 W. Michigan Ave.</u> <u>Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Brotherhood Banquet ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2/28/18</u> Date	<u>\$ 130.00</u>
Expenditure #18 Name <u>Go Daddy</u> Address <u>14455 N. Hayden Rd. #219</u> <u>Scottsdale, AZ 85260</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/2/18</u> Date	<u>\$ 7.99</u>
Expenditure #19 Name <u>Paya</u> Address <u>12120 Sunset Hills Rd.</u> <u>Suite 500</u> <u>Reston, VA 20190</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/2/18</u> Date	<u>\$ 41.44</u>
Expenditure #10 Name <u>University of Michigan College Democrats</u> Address <u>824 McKinley Ave.</u> <u>Apt. 12</u> <u>Ann Arbor, MI 48104</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Pancake Breakfast Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/25/18</u> Date	<u>\$ 50.00</u>

Subtotal this page 237.42

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

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on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number \_\_\_\_\_

2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #11 Name <u>Go Daddy</u> Address <u>14455 N. Hayden Rd. #219</u> <u>Scottsdale, AZ 85260</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Website</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>4/2/18</u> Date	<u>\$ 7.99</u>
Expenditure #12 Name <u>Paya</u> Address <u>12420 Sunset Hills Rd.</u> <u>Suite 500</u> <u>Reston, VA 20190</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>processing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>4/2/18</u> Date	<u>\$ 25.97</u>
Expenditure #13 Name <u>Jim Toy Community Center</u> Address <u>319 Braun Ct.</u> <u>Ann Arbor, MI 48104</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Jim Toy Birthday event sponsor</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>4/7/18</u> Date	<u>\$ 100.00</u>
Expenditure #14 Name <u>Ann Arbor Democratic Party</u> Address <u>3211 Rosefield Dr.</u> <u>Ann Arbor, MI 48108</u>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Chilli Cook-off event sponsorship</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>4/28/18</u> Date	<u>\$ 100.00</u>
Expenditure #15 Name <u>Go Daddy</u> Address <u>14455 N. Hayden Rd. #219</u> <u>Scottsdale, AZ 85260</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Website</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement.	<u>5/2/18</u> Date	<u>\$ 7.99</u>

Subtotal this page 241.95

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 \_\_\_\_\_

2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #16 Name <u>Paya</u> Address <u>12120 Sunset Hills Rd. Suite 500 Reston, VA 20190</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/2/18</u> Date	<u>\$ 2.88</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #17 Name <u>Yes to Our Mental Health and Public Safety</u> Address <u>PO Box 1301 Ann Arbor, MI 48106</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Contribution</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/5/18</u> Date	<u>\$ 2000.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #18 Name <u>Kappa Foundation</u> Address <u>4370 Westpark Ann Arbor, MI 48108</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ticket and book ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/2/18</u> Date	<u>\$ 215.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #19 Name <u>Washtenaw County Community and Justice Foundation</u> Address <u>3840 Maple Dr. Ypsilanti, MI 48197</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>golf outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/1/18</u> Date	<u>\$ 130.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #20 Name <u>Paya</u> Address <u>12120 Sunset Hills Rd. Suite 500 Reston, VA 20190</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/4/18</u> Date	<u>\$ 5.49</u> <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page 2353.37

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

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**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number \_\_\_\_\_

2. Committee Name \_\_\_\_\_

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #21 Name: <u>Go Daddy</u> Address: <u>14455 N. Hayden Rd. #219</u> <u>Scottsdale, AZ 85260</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/4/18</u> Date	<u>\$ 7.99</u>
Expenditure #22 Name: <u>Paya</u> Address: <u>12120 Sunset Hills Rd.</u> <u>Suite 500</u> <u>Reston, VA 20190</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/2/18</u> Date	<u>\$ 2.50</u>
Expenditure #23 Name: <u>Go Daddy</u> Address: <u>14455 N. Hayden Rd. #219</u> <u>Scottsdale, AZ 85260</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/2/18</u> Date	<u>\$ 7.99</u>
Expenditure #24 Name: <u>Conan Smith for County Commission</u> Address: <u>234 8th St</u> <u>Ann Arbor, MI 48103</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fund raiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/14/18</u> Date	<u>\$ 100.00</u>
Expenditure #25 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 118.48

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 3114.21

Enter this total  
on line 8a of  
Summary Page

