



**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: 10/19/2020 to 11/23/2020

| | |
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| <p>1. Committee I.D. Number C-2011-040</p> <p>2. Committee Name Andy LaBarre for Washtenaw</p> | <p>4. Candidate Last Name LaBarre First Name Andrew M.I. R</p> <p>4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local</p> <p>4b. County of Residence WASHTENAW</p> |
| <p>5. Committee's Mailing Address 2411 Meadowridge Ct. Ann Arbor, MI 48105</p> <p>Area Code and Phone <u>(734) 945-1298</u> 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.</p> | <p>6. Treasurer's Name & Residential Address Ellen Offen 1911 Bolder Dr. Ann Arbor, MI 48104</p> <p>Area Code & Phone <u>(734) 417-7293</u></p> |
| <p>7. Treasurer's Business Address None</p> <p>Area Code and Phone _____</p> | <p>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) None</p> <p>Area Code and Phone _____</p> |

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| <p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary</p> <p><input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Convention</p> <p><input type="checkbox"/> Special</p> <p><input type="checkbox"/> School</p> <p><input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>11/3/2020</u></p> | <p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly</p> <p><input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p> | <p>9e. Dissolution of Candidate Committee</p> <p><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 late fees or has any outstanding debt.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p> |
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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.

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| <p>Current Treasurer or Designated Record keeper <u>Ellen Offen</u></p> <p>Type or Print Name</p> | <p><i>Ellen Offen</i></p> <p>Signature</p> | <p><u>12/3/2020</u></p> <p>Date</p> |
| <p>Candidate <u>Andrew LaBarre</u></p> <p>Type or Print Name</p> | <p><i>Andrew LaBarre</i></p> <p>Signature</p> | <p><u>12/3/2020</u></p> <p>Date</p> |

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 COUNTY, MI
 WASHTENAW
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1. Committee I.D. Number C-2011-040

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Andy LaBarre for Washtenaw

| RECEIPTS | Column I This Period | Column II Cumulative this election cycle |
|---|--------------------------------|---|
| 3. Contributions | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ <u>0</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.) \$ _____ |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>0</u> | (20.) \$ _____ |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>25.00</u> | (21.) \$ _____ |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ _____ | (22.) \$ _____ |
| EXPENDITURES | | |
| 8. Expenditures | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ <u>0</u> | |
| 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.) \$ <u>0</u> | (23.) \$ _____ |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | |
| 10. 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) | (11.) \$ _____ | (24.) \$ _____ |
| DEBTS AND OBLIGATIONS | | |
| 12. Debts and Obligations | | |
| 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 (Enter zero if no previous reports have been filed.) | (13.) \$ <u>2102.58</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>0</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ <u>0</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ <u>0</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ <u>2102.58</u> | |



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number C2011040

CANDIDATE COMMITTEE

2. Committee Name Andy LaBarre for Washtenaw

| 3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions. | 4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased | 7. Amount or Fair Market Value | 8. Cumulative for Election Cycle (Through date in Item 5) |
|---|--|--------------------------------|---|
|---|--|--------------------------------|---|

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|--|--|--------------------------------------|--|
| <p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Andrew LaBarre 2411 Meadowridge Ct. Ann Arbor, MI 48105</p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p> | <p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>Payment of late filing fee</u></p> <p>5. Date Of Receipt: <u>11/13/2020</u></p> <p>6. Vendor Name & Address: Washtenaw County Clerk's Office 200 N. Main St. Suite 120 Ann Arbor, MI 48104</p> <p style="text-align: right;">Click Here for Memo Itemization</p> | <p>\$ <u>25.00</u> \$ _____</p> | |
|--|--|--------------------------------------|--|

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|--|--|-------------------------------|--|
| <p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address:</p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p> | <p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description _____</p> <p>5. Date Of Receipt: _____</p> <p>6. Vendor Name & Address:</p> <p style="text-align: right;">Click Here for Memo Itemization</p> | <p>\$ _____ \$ _____</p> | |
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|---|--|-------------------------------|--|
| <p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address:</p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p> | <p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description _____</p> <p>5. Date Of Receipt: _____</p> <p>6. Vendor Name & Address:</p> <p style="text-align: right;">Click Here for Memo Itemization</p> | <p>\$ _____ \$ _____</p> | |
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|---------------|-------|
| Page Subtotal | 25.00 |
|---------------|-------|

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|--|-------|
| Grand Total of all Schedules 1-IK (Complete on last page of Schedule) | 25.00 |
|--|-------|

Enter this total
on line 6 of Summary
Page

