



**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: 8/28/18 to 10/21/18

1. Committee I.D. Number  
C2013-04  
2. Committee Name  
JEFF HAYNER FOR CITY COUNCIL

4. Candidate Last Name HAYNER First Name JEFF M.I. L  
4a. Office Sought Including District # or Community Served (If applicable)  
ANN ARBOR CITY COUNCIL WARD 01  
4b. County of Residence WASHTEWAN

5. Committee's Mailing Address  
1807 PONTIAC TRAIL  
ANN ARBOR, MI  
734 255 6085 48105  
Area Code and Phone  
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  
JEFF HAYNER  
1807 PONTIAC TRAIL  
ANN ARBOR, MI 48105  
Area Code & Phone 734 255 6085

7. Treasurer's Business Address  
  
Area Code and Phone \_\_\_\_\_

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)  
  
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  
4/6/18

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 hereby 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.  
Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.  
Effective date of dissolution  
NOV 5 2:21 PM  
Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.  
FILED  
WASHINGTON COUNTY, MI  
LAURENCE STEINBAUM  
COUNTY CLERK/REGISTER

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 JEFF HAYNER Signature [Signature] Date 11/3/18  
Candidate JEFF HAYNER Signature [Signature] Date 11/3/18



1. Committee I.D. Number C2013-014

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Jeff Hayner For City Council

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>4375.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>4375.00</u>	(18.) \$ <u>9665.07</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>-</u>	(19.) \$ <u>-</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>4375.00</u>	(20.) \$ <u>9665.07</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>975.58</u>	(21.) \$ <u>975.58</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>-</u>	(22.) \$ <u>-</u>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1158.51</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>-</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>-</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>1158.51</u>	(23.) \$ <u>6226.73</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>-</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>-</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>-</u>	(24.) \$ <u>-</u>
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>-</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>-</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>2110.85</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>4375.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>4586.85</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1158.51</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>3428.34</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C2013-014  
2. Committee Name Jeff Hayner for City Council

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 Name & Address: <u>TOM STUBERGA</u> <u>1202 TRAVEL ST</u> <u>AZ MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/14/18</u>	\$ <u>100</u>	\$ <u>100</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: <u>PETER ECKSTEIN</u> <u>2551 LONDON DRIVE</u> <u>AZ MI 48104-4617</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/14/18</u>	\$ <u>550</u>	\$ <u>710</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3 Name & Address: <u>LYNN BORSSET</u> <u>322 VIRGINIA AVE</u> <u>AZ MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/14/18</u>	\$ <u>50</u>	\$ <u>100</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4 Name & Address: <u>LIBBY HAYNER</u> <u>2278 MAYFIELD RD</u> <u>SAGINAW MI 48602</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/16/18</u>	\$ <u>300</u>	\$ <u>300</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 1000  
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 C2013-014  
2. Committee Name Jeff Hayner for City Council

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 Name & Address: <u>RITA CARUSO</u> <u>556 OLIVIALE CIRCLE</u> <u>AZ MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/18</u>	\$ <u>25</u>	\$ <u>25</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 checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: <u>GLEN ZIGLER</u> <u>514 KRAUSE ST</u> <u>AZ MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/18</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 Name & Address: <u>DARREN MCKINNON</u> <u>809 DANIEL ST</u> <u>AZ MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/18</u>	\$ <u>100</u>	\$ <u>100</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 checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 Name & Address: <u>BRAXTON BLAKE</u> <u>1508 LONGSHORE AVE</u> <u>AZ MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/18</u>	\$ <u>50</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AUTHOR</u> Employer <u>SELF</u> Business Address <u>1508 LONGSHORE AZ MI 48105</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal

375

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 C2013-014  
2. Committee Name Jeff Hayner For City Council

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>10/4/18</u>		
Name & Address: <u>JEFF CROCKETT</u> <u>506 E. KINGSLEY</u> <u>AZ MI 48104</u>			\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____			Click Here for Memo Itemization	
Business Address _____				
Type of Contribution: <input 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>10/4/18</u>		
Name & Address: <u>JOHN C FLOYD</u> <u>579 SUNSET RD</u> <u>ANN ARBOR, MI 48103</u>			\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____			Click Here for Memo Itemization	
Business Address _____				
Type of Contribution: <input 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>10/4/18</u>		
Name & Address: <u>KATHLEEN CLARK</u> <u>549 S. FIRST</u> <u>ANN ARBOR, MI 48105</u>			\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____			Click Here for Memo Itemization	
Business Address _____				
Type of Contribution: <input 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>10/10/18</u>		
Name & Address: <u>JEFF HAYNER</u> <u>1807 PONTIAC TRAIL</u> <u>AZ MI 48105</u>			\$ <u>100</u>	\$ <u>700</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>SATURATE STUDIOS LLC</u>			Click Here for Memo Itemization	
Business Address <u>1807 PONTIAC TRAIL AZ MI 48105</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)

Enter this total on line 3a of Summary Page.



**ITEMIZED IN-KIND CONTRIBUTIONS**

**SCHEDULE 1-IK**

1. Committee I. D. Number C2013-014

2. Committee Name Jeff Hayner for City Council

**CANDIDATE COMMITTEE**

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 all 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? <input type="checkbox"/> Yes Name & Address: <u>HATHAWAY'S HIDEAWAY</u> <u>20 S. ASHLEY</u> <u>AZ MI 48104</u> If over \$100.00 cumulative, please provide: Occupation: <u>OWNER</u> Employer Name & Business Address: <u>310 S. ASHLEY</u> <u>AZ MI 48104</u> <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description: <u>WATER USE</u> 5. Date Of Receipt: <u>10/4/18</u> 6. Vendor Name & Address: <u>HATHAWAY'S HIDEAWAY</u> <u>310 S. ASHLEY</u> <u>AZ MI 48104</u> Click Here for Memo Itemization	\$ <u>160<sup>-</sup></u> \$ <u>160<sup>-</sup></u>	
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>KATHY GRISWOLD</u> <u>3565 FOX HUNT DR</u> <u>AZ MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: <u>RETIRED</u> Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description: <u>T SHIRTS</u> 5. Date Of Receipt: <u>9/8/18</u> 6. Vendor Name & Address: <u>HEIKKINEN PRODUCTIONS</u> <u>PO BOX 980401</u> <u>YPSILANTI, MI 48198</u> Click Here for Memo Itemization	\$ <u>111<sup>30</sup></u> \$ <u>111<sup>30</sup></u>	
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>KATHY GRISWOLD</u> <u>3565 FOX HUNT</u> <u>AZ MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: <u>RETIRED</u> Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description: <u>SIGNS</u> 5. Date Of Receipt: <u>10/20/18</u> 6. Vendor Name & Address: <u>SAWIKI + SONS</u> <u>1521 W. LAFAYETTE</u> <u>DETROIT, MI 48216</u> Click Here for Memo Itemization	\$ <u>395<sup>53</sup></u> \$ <u>504<sup>83</sup></u>	

Page Subtotal

664<sup>83</sup> 664<sup>83</sup>

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

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED IN-KIND CONTRIBUTIONS**

**SCHEDULE 1-IK**

**CANDIDATE COMMITTEE**

1. Committee I. D. Number C2013-014  
2. Committee Name Jeff Hammer for City Council

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 all 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)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>PETER NELSON</u> <u>1319 AND MOORE AVE</u> <u>ANN ARBOR, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>ENGINEER</u> Employer Name &amp; Business Address: <u>FORD MOTOR COMPANY</u> <u>15303 COMMERCIAL DR</u> <u>DEARBORN, MI 48120</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>Buttons</u> 5. Date Of Receipt: <u>10/4/18</u> 6. Vendor Name &amp; Address: <u>MIDWEST BUTTONS</u> <u>25735 LEACH ST</u> <u>DOWNSWOOD, MI 48066</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ <u>126<sup>75</sup></u> \$ <u>126<sup>75</sup></u></p>	
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>PETER NELSON</u> <u>1319 AND MOORE AVE</u> <u>ANN ARBOR, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>ENGINEER</u> Employer Name &amp; Address: <u>FORD MOTOR COMPANY</u> <u>15303 COMMERCIAL DR</u> <u>DEARBORN, MI 48120</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>WEB HOSTING SETUP</u> 5. Date Of Receipt: <u>10/6/18</u> 6. Vendor Name &amp; Address: <u>WIK.COM</u> <u>2601 MISSION ST.</u> <u>SAN FRANCISCO, CA 94110</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ <u>84-</u> \$ <u>210<sup>75</sup></u></p>	
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>FRANK BENNET</u> <u>1039 PARKWOOD AVE</u> <u>YPSILANTI, MI 48198</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name &amp; Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>PRINTING AT HOME</u> 5. Date Of Receipt: <u>10/10/18</u> 6. Vendor Name &amp; Address: <u>FRANK BENNET</u> <u>1039 PARKWOOD AVE</u> <u>YPSILANTI, MI 48198</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ <u>100-</u> \$ <u>100-</u></p>	

Page Subtotal 310<sup>75</sup> 437<sup>50</sup>

Grand Total of all Schedules 1-IK (Complete on last page of Schedule) 975<sup>58</sup>

Enter this total on line 6 of Summary Page