



**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: 10/21/18 to 11/26/18

1. Committee I.D. Number
C2013-014

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 1

4b. County of Residence WASHTENAW

5. Committee's Mailing Address
1807 PONTIAC TRAIL
ANN ARBOR, MI 48105
(734) 2556085

Area Code and Phone (734) 2556085

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
(734) 2556085

Area Code & Phone (734) 2556085

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 _____

FILED
 WASHTENAW COUNTY, MI
 DEC - 6 P 2:15
 CLERK/REGISTRAR

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
11/6/2018

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 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 _____

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 JEFF HAYNER Signature [Signature] Date 12/7/18

Candidate JEFF HAYNER Signature [Signature] Date 12/7/18



1. Committee I.D. Number C 2013 - 014

2. Committee Name JUDE HAYNER FOR CITY COUNCIL

**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>1640-</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>1640-</u>	(18.) \$ <u>11305.02</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>-</u>	(19.) \$ <u>-</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>1640-</u>	(20.) \$ <u>11305.02</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>2276.19</u>	(21.) \$ <u>3252.46</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>-</u>	(22.) \$ <u>-</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>5023.74</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>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>5023.74</u>	(23.) \$ <u>11250.48</u>
INCIDENTAL EXPENSE DISBURSEMENTS (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>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>-</u>	(24.) \$ <u>-</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>-</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>-</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>3428.34</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>1640.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>5068.34</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>5023.74</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>44.60 *</u>	



**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>HAYNER, JEFF</u> <u>1807 PONTIAC TRAIL</u> <u>ANN ARBOR, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: <u>OWNER</u> Employer Name & Business Address: <u>SATURATE STUDIOS LLC</u> <u>1807 PONTIAC TRAIL</u> <u>ANN ARBOR, MI 48105</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 type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>FOOD FOR ELECTION PARTY</u> 5. Date Of Receipt: <u>11/5/18</u> 6. Vendor Name & Address: <u>WESTSIDE BBQ</u> <u>108 E. MADISON</u> <u>ANN ARBOR, MI 48104</u> Click Here for Memo Itemization	\$ <u>500</u> \$ <u>500</u>	
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>HAYNER, JEFF</u> <u>1807 PONTIAC TRAIL</u> <u>ANN ARBOR, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: <u>OWNER</u> Employer Name & Address: <u>SATURATE STUDIOS LLC</u> <u>1807 PONTIAC TRAIL</u> <u>ANN ARBOR, MI 48105</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 type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>KARAOKE SERVICES ELECTION PARTY</u> 5. Date Of Receipt: <u>11/6/18</u> 6. Vendor Name & Address: <u>MANS HALL'S KARAOKE</u> <u>AND ENTERTAINMENT</u> <u>(734) 972-4188 NORTHVILLE, MI 48167</u> Click Here for Memo Itemization	\$ <u>200</u> \$ <u>700</u>	
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>HAYNER, JEFF</u> <u>1807 PONTIAC TRAIL</u> <u>ANN ARBOR, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation: <u>OWNER</u> Employer Name & Address: <u>SATURATE STUDIOS LLC</u> <u>1807 PONTIAC TRAIL</u> <u>ANN ARBOR, MI 48105</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 type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>RENTAL OF UPSTAIRS SPACE + STAFF</u> 5. Date Of Receipt: <u>11/6/18</u> <u>FOR ELECTION PARTY</u> 6. Vendor Name & Address: <u>NGCTO, LLC</u> <u>516 E. LIBERTY</u> <u>ANN ARBOR, MI 48104</u> Click Here for Memo Itemization	\$ <u>1500</u> \$ <u>2200</u>	

Page Subtotal 2200 2200

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 7

Enter this total on line 6 of Summary Page



**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK**

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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)
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Contribution # 1 PAC Receipt? Yes

Name & Address: HUNTER, ELIZABETH
827 BRUCE ST
ANN ARBOR, MI 48103

If over \$100.00 cumulative, please provide:
Occupation:
Employer Name & Business 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

Description: OFFICE SUPPLIES, COPIERS, PAPER

5. Date Of Receipt: 11/03/18

6. Vendor Name & Address:
STAPLE
2001 JACKSON AVE
ANN ARBOR, MI 48103

Click Here for Memo Itemization

Fund Raiser Contribution

~~Contribution # 2 PAC Receipt? Yes~~

~~Name & Address:~~

~~**If over \$100.00 cumulative, please provide:**
Occupation:
Employer 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~~

~~Description:~~

~~5. Date Of Receipt:~~

~~6. Vendor Name & Address:~~

~~Click Here for Memo Itemization~~

~~Fund Raiser Contribution~~

~~Contribution #3 PAC Receipt? Yes~~

~~Name & Address:~~

~~**If over \$100.00 cumulative, please provide:**
Occupation:
Employer 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~~

~~Description:~~

~~5. Date Of Receipt:~~

~~6. Vendor Name & Address:~~

~~Click Here for Memo Itemization~~

~~Fund Raiser Contribution~~

Page Subtotal 76.88

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 2276.88

Enter this total
on line 6 of Summary
Page