

STATEMENT OF ORGANIZATION FOR CANDIDATE COMMITTEES

TYPE OR PRINT CLEARLY. AN AMENDMENT TO THIS FORM MUST BE FILED IF INFORMATION ON THE FORM CHANGES. SEE INSTRUCTIONS ON REVERSE FOR UPDATING PROCEDURES.

1. Committee Identification No. C-2002 - 034		
2. Type of Filing a. Original OR b. Amendment to Item(s)# 10 c. Date Change(s) Took Place 2 / 24 / 03 3. Full Name Of Committee (must include candidate's first and last name)		
Glenn Nelson for School Board		
4. Candidate Last Name Nelson First Name Glenn M.I. L.		
4a. County of Residence Washtenaw 4b. Political Party (If applicable)		
4c. Driver License # (Optional)		
4d. Office Sought: (Check one)		
Governor		
4e. District # or Jurisdiction		
5. Date Committee Was Formed 04/13/02 (Mo/Day/Yr)	6. Committee Area Code and Phone Number 734 -663 9606	
7. Committee Mailing Address (May be P. O. Box) Include Zip Code 1240 Ferdon Ann Arbor, MI 48104	7a. Committee Street Address (May <u>not</u> be P. O. Box) 1240 Ferdon Ann Arbor, MI 48104	
8. <u>Treasurer.</u> Name and Mailing Address of Committee Treasurer (Last Name, First Name, Middle Initial. Please Include Zip Code.) Bryunt, Fran E. 1246 Ferdon Ann Arbor, MI 48104- 734-663-9606 Area Code and Phone Driver License # (Optional)	9. <u>Designated Record keeper</u> . Name and address of the person (other than the treasurer) who will be responsible for the committee secords and Campaign Statement filings. If committee treasurer than the treasurer hands these responsibilities, leave this item blank. Area Code and Phone Driver License # (Optional)	
REPORTING WAIVER The committee does NOT expect to receive or expend in excess of \$1,000.00 in an election. The Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold. (Direct and in-kind contributions, expenditures and outstanding dest count against the \$1,000.00 Reporting Waiver threshold.) Funds left over from one election count toward the "amount received" for the next election. Please note: If a request for a Reporting Waiver is not received on or before the filling deadline of a required Campaign Statement, the Campaign Statement. 11. Names and Addresses of depositories or intended depositories of committee funds.		
(Bank, Credit Union or Savings & Loan Association)	ace funds.	12. This item applies only to a Gubernatorial Candidate Committee.
11a. Official Depository: 1501 E. Stadium Blvd. 11b. Secondary Depository: Ann Arbor, MI 48104		☐ Check if this committee intends to seek qualifying contributions for public funding.
13. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement, and that the contents are true, accurate and complete to the best of my/our knowledge or belief.		
Current Treasurer Fran E. Bryant , Fran E Type or Print Name Signatur Candidate Gleun L. Nelson Illiam L. Type or Print Name Signatur	Melson	Date 2 / 22 / 03 Mo. Day Year Date 2 / 22 / 0 / 3
July 1 can		

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Authority granted under Act 388 of 1976, as amended

C-2002-10340004001