

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	l signed by andidate.	3. This Statement covers Fro	om: 10/24/16	to 11/2	28/16
1. Committee I.D. Number		4. Candidate Last Name	Fi	rst Name	M.I.
C-2016-162		Gaynor	Jeffrey	/	T
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable) Board Member - Ann Arbor School Board			
Committee to Elect Jeffrey C	3aynor	4b. County of Residence W.	ASHTENAW		
5. Committee's Mailing Address		6. Treasurer's Name & Resid			
Committee to Elect Jeffrey Gaynor		Jacki Weisman			
1010 Red Oak Road		1010 Red Oak Road			
Ann Arbor, MI 48103		Ann Arbor, MI 48103			
Area Code and Phone If the address in this box is different from the comminaling address on the Statement of Organization, research to this address by the filing official. 7. Treasurer's Business Address Truven Health Analytics 100 Phoenix Drive Ann Arbor, MI 48109		Area Code & Phone (734) 3 8. Designated Record keeper) Designated Record keeper)		ng Address (If t	: he committee has a
Area Code and Phone (734) 913-3613		Area Code and Phone			
9. TYPE OF STATEMENT	<u> </u>	Alea Code and Filone	9e, Dissolution	of Candidate	Committee
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to: Primary	Required ON is not on the current year:		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 oustanding assets, owes no lates fees or has any oustanding debt.		
☐Convention	October Q	uarterly	Further, if the diss considered a requ	solution cannot uest for the Rep	t be granted, that this be porting Waiver.
[─── ──	^{9c.}	l Statement () Coverage Year	Effectiv	e date of disso	plution
Caucus Caucus Caucus Caucus	Comp	dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to te which Statement is being fed.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
11/08/16					
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a			nent and attached s	chedules (if an	y) and to the best of
Current Treasurer or Designated Record keeper To Distribute Treasurer or Jacki Weisma	n	, Jachi Wus	nan	Date	2-4-16
Type or Print Name		Signature	M.		12/W/201L
Candidate Type or Print Name		Signature	THE	Date	7112012
		/ 			



1. Committee I.D. Number <u>C-2016-162</u>

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jeffrey Gaynor

3. Contributions a. Iternized (Schedule 1A - Column 6) b. Uniternized (less than \$20.01 each - no Schedule) c. Subtotal of "Contributions" (Ac Other Receipts (Schedule 1A -1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) IN-KIND CONTRIBUTIONS S EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) 8. Expenditures 8. Expenditures 8. Expenditures 9. TOTAL Expenditures 9. TOTAL EXPENDITURES 10. Itemized (Iss than \$50.01 each - no Schedule) 10. Itemized (Iss than \$50.01 each - no Schedule) 11. TOTAL EXPENSE DISBURSEMENTS (Officerbolders Only) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 12. Delbursements a. Remized (Schedule 1E) 13. Ending Balance of last report filed (Inter zero if no previous reports have been filed.) 14. Annount received upper persons person (Ida.) \$ BALANCE STATEMENT (14.) \$ \$0.000 (24.) \$ \$0.000	RECEIPTS	Column I	Column II
b. Uniternized (less than \$20.01 each - no Schedule) c. Subtotal of "Contributions" 4. Other Receipts (Schedule 1A -1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) 1. H-KIND CONTRIBUTIONS & EXPENDITURES 8. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1-IK, Column 6) 6. S \$584.17 21.) \$ \$1,945.29 22.) \$ EXPENDITURES 8. Itemized (Schedule 1B, Column 6) 6. S \$68.00 22.) \$ EXPENDITURES 8. Itemized (Schedule 1B, Column 6) 6. Unitemized (Schedule 1B, Column 6) 6. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) 5. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no provious reports have been filed.) 14. Amount recoved during reporting period (14.) + \$ \$0.00	3. Contributions	This Period	Cumulative this election cycle
C. Subtotal of "Contributions" 4. Other Receipts (Schedule 1A -1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3e + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 5. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) 8. Expenditures 8. Expenditures 8. Expenditures 8. Expenditures 9. Itemized (Schedule 1B, Column 6) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8b) 10. Itemized Get-Out-the-Vote (Schedule 1B-G) 10. Otherwized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8b) 10. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements 10. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 12. Debts and Obligations 2. Owed by the Committee (Schedule 1E) 13. Ending Balance of last report filed (12a.) \$ BALANCE STATEMENT 13. Ending Balance of last report filed (15a.) \$ BALANCE STATEMENT 14. Amount received during reporting period 14.) + \$ \$0.00	a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
4. Other Receipts (Schedule 1A -1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3e + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (loss than \$50.01 each - no Schedule) 7. In-Kind Expenditures (Add Line 8e + Line 8b + Line 8b) 8. TOTAL EXPENDITURES (Add Line 8e + Line 8b + Line 8c) 9. TOTAL EXPENDITURES (Add Line 8e + Line 8b + Line 8c) 10. Disbursements a. Itemized (loss than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (loss than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10e + Line 10b) EBETS AND OBLIGATIONS 2. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 5. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (14.) + \$ \$0.00	b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 30 + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (104.) \$ \$0.00	c. Subtotal of "Contributions"	(3c.) \$	(18.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES	4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	
6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) 8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) (12a.) \$ BALANCE STATEMENT 13. Ending Balance of last report filed (Erier zero if no previous reports have been filed.) 14. Amount received during reporting period (14.) \$ \$0.00	l .	(5.) \$ \$0.00	(20.) \$ \$0.00
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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.) \$ 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) (9.) \$ 50.00 INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) (10b.) \$ 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) (11.) \$ 50.00 DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) (12a.) \$ 50.00 DEBTS AND OBLIGATIONS 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (14) + \$ \$0.00	7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) 9. TOTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting pariod (8b.) \$ (8c.) \$ \$0.00 (9.) \$ \$0.00 (23.) \$ \$0.00 (24.) \$ \$0.00	EXPENDITURES		
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9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements	b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6)	c. Unitemized (less than \$50.01 each - no Schedule)		
(Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) (14.) + \$ \$0.00	9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$ \$0.00
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13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (13.) \$ \$0.00 (14.) + \$ \$0.00	b. Owed to the Committee (Schedule 1E)	(12b.) \$	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (14.) + \$ \$0.00		BALANCE STATEMENT	
14. Amount received during reporting period (14.) + \$ \$0.00			
(Line 5, Total Continuutions & Other Necesips)	14. Amount received during reporting period		
	15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$0.00	
16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE	(Add lines 9 and 11)	(16.) - \$ \$0.00	
(Subtract line 16 from line 15) (17.) \$ \$0.00 *		(17.) \$ \$0.00 *	



Page ______ of _____

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number

C2016162

~			 TTT
LAN	11 HH 1A	TE COI	

2. Committee Name Committee to Elect Jeffrey Gaynor

	FEE S. Stem Stem		
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.	Type of In-Kind Contribution (Check applicable box) Date of Receipt 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? Yes Name & Address: Ann Arbor Community for Education-Political Action Committee 1010 Red Oak Road Ann Arbor, MI 48103	4.	548.33	1396.84
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others- LOAN Description Mailing Costs (Postage) 5. Date Of Receipt: 11/02/16 6. Vendor Name & Address: US Post Office Cli 2075 W. Stadium Blvd Ann Arbor, MI 48103	ck Here for Memo Ite	emization
Contribution # 2 PAC Receipt? Yes Name & Address Ann Arbor Community for Education-Political Action Committee 1010 Red Oak Road Ann Arbor, MI 48103	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	9.16 \$	1396.84
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Ad Costs 5. Date Of Receipt: 11/02/16 6. Vendor Name & Address: Facebook Ads Menlo Park, CA 94025	ck Here for Memo Ite	emization
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Ann Arbor Community for Education-Political Action Committee 1010 Red Oak Road Ann Arbor, MI 48103	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	6.68 _{\$_}	1396.84
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Ad Costs 5. Date Of Receipt: 11/08/16 6. Vendor Name & Address: Facebook Ads Menlo Park, CA 94025	ck Here for Memo Ite	emization
Fund Raiser Contribution	Page Subtotal	\$584.17	
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$584.17	<u></u>

Enter this total on line 6 of Summary Page