



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**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.

<p>1. Committee I.D. Number <u>C-2016-162</u></p> <p>2. Committee Name <u>Committee to Elect Jeff Gaynor</u></p> <p>5. Committee's Mailing Address <u>3020 Bogos Circle</u> <u>Ann Arbor, MI 48105</u></p> <p>Area Code and Phone <u>734-277-2305</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>7. Treasurer's Business Address <u>(same)</u></p> <p>Area Code and Phone _____</p>		<p>3. This Statement covers From: <u>8/16/20</u> to <u>10/20/20</u></p> <p>4. Candidate Last Name <u>Gaynor</u> First Name <u>Jeffrey</u> M.I. <u>T.</u></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <u>Ann Arbor Public Schools Board of Education</u></p> <p>4b. County of Residence <u>Washtenaw</u></p> <p>6. Treasurer's Name & Residential Address <u>Tina Luick</u> <u>1455 N. Dancer Rd</u> <u>Dexter, MI 48130</u> <u>48130</u></p> <p>Area Code & Phone <u>734-474-4423</u></p> <p>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) <u>NONE</u></p> <p>Area Code and Phone _____</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input 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 checked="" 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>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.</p> <p>Current Treasurer or Designated Record keeper <u>Tina D. Luick</u> <u>Tina D. Luick</u> Type or Print Name Signature Date <u>10/22/2020</u></p> <p>Candidate <u>Jeffrey T GAYNOR</u> <u>Jeffrey T Gaynor</u> Type or Print Name Signature Date <u>10-22-2020</u></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>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number C-2016-162

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Jeff Gaynor

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>4646.69</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>4646.69</u>	(18.) \$ <u>4646.59</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>4646.69</u>	(20.) \$ <u>4646.59</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>3320.96</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>3320.96</u>	(23.) \$ <u>3320.96</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>624.10</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>4646.59</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>4646.59</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>3320.96</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>1325.77</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2016-162
2. Committee Name Committee To Elect Jeff Gaynor

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>08/21/20</u> Name & Address: Jeff Gaynor 3020 Bolgos Circle Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>1200.00</u>	\$ <u>1200.00</u>
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/21/20</u> Name & Address: Jeff Gaynor 3020 Bolgos Circle Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>1250.00</u> 1200.00
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/27/20</u> Name & Address: Judah Garber 1508 Granger Ann Arbor, MI 48104 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	\$ <u>100.00</u>	\$ <u>100.00</u>
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/28/20</u> Name & Address: Gina Maksimchuk 2648 Bernice St Ann Arbor, MI 48103 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	\$ <u>50.00</u>	\$ <u>50.00</u>
Click Here for Memo Itemization		

Page Subtotal \$1,400.00

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 C-2016-162
2. Committee Name Committee To Elect Jeff Gaynor

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>08/29/20</u> Name & Address: <u>Vincent Song</u> <u>2120 Folkstone Rd</u> <u>Timonium, MD 21093</u>		\$ <u>50.00</u>	\$ <u>50.00</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		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/29/20</u> Name & Address: <u>Jenny Silva</u> <u>732 Lans Way</u> <u>Ann Arbor, MI 48103</u>		\$ <u>50.00</u>	\$ <u>50.00</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		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/29/20</u> Name & Address: <u>Bruce Geffen</u> <u>2636 Gloucester Way</u> <u>Ann Arbor, MI 48104</u>		\$ <u>50.00</u>	\$ <u>50.00</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		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/30/20</u> Name & Address: <u>Laura Shue</u> <u>673 Dornoch Dr</u> <u>Ann Arbor, MI 48103</u>		\$ <u>60.00</u>	\$ <u>60.00</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		Click Here for Memo Itemization	

Page Subtotal \$210.00

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 C-2016-162
2. Committee Name Committee To Elect Jeff Gaynor

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>08/31/20</u>	
Name & Address: Susan Bartman 712 Miner St. Ann Arbor, MI 48103		\$ <u>50.00</u>	\$ <u>50.00</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		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/30/20</u>	
Name & Address: Peter Ways 815 Mt. Pleasant Ave Ann Arbor, MI 48103		\$ <u>25.00</u>	\$ <u>25.00</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		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/02/20</u>	
Name & Address: Laurie Williams 707 Lakeview Ave Ann Arbor, MI 48103		\$ <u>50.00</u>	\$ <u>50.00</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		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/03/20</u>	
Name & Address: Kate Remen-Wait 817 W Summit St Ann Arbor, MI 48103		\$ <u>20.00</u>	\$ <u>20.00</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		Click Here for Memo Itemization	

Page Subtotal \$145.00

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 C-2016-162

2. Committee Name Committee to Elect Jeff Gaynor

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>09/06/20</u> Name & Address: <u>Ellen Offen</u> <u>1911 Boulder Drive</u> <u>Ann Arbor, MI 48104</u>		\$ <u>250.00</u>	\$ <u>250.00</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		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/10/20</u> Name & Address: <u>Jeff Alson</u> <u>2822 Sagebrush Cir, Apt. 207</u> <u>Ann Arbor, MI 48103</u>		\$ <u>100.00</u>	\$ <u>100.00</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		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/10/20</u> Name & Address: <u>David Wible</u> <u>2146 Needham Rd</u> <u>Ann Arbor, MI 48104</u>		\$ <u>35.00</u>	\$ <u>35.00</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		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/11/20</u> Name & Address: <u>David Russell</u>		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>teacher</u> Employer <u>Ann Arbor Public Schools</u> Business Address <u>2555 S. State St., Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$ 535.00

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 C-2016-162
2. Committee Name Committee to Elect Jeff Gaynor

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>09/12/20</u> Name & Address: Jill McGinn 1715 Glastonbury Ann Arbor, MI 48103		\$ <u>50.00</u>	\$ <u>50.00</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		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/20</u> Name & Address: <i>Cynthia Bogen Page-Bogen</i> 1081 Bandera Dr. Ann Arbor, MI 48103		\$ <u>100.00</u>	\$ <u>100.00</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		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/20</u> Name & Address: Cary Kocher 712 Miner St. Ann Arbor, MI 48103		\$ <u>25.00</u>	\$ <u>25.00</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		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/19/20</u> Name & Address: Sharon Simonton 4235 Pontiac Trail Ann Arbor, MI 48105		\$ <u>5.00</u>	\$ <u>5.00</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		Click Here for Memo Itemization	

Page Subtotal

\$180.00

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 C-2016-162
2. Committee Name Committee to Elect Jeff Gayno

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>09/22/20</u> Name & Address: Nicholas Roumel 2718 Hampshire Rd Ann Arbor, MI 48104		\$ <u>100.00</u>	\$ <u>100.00</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		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/20</u> Name & Address: Alina Verdiyan 7592 Abigail Dr. Ypsilanti, MI 48198		\$ <u>100.00</u>	\$ <u>100.00</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		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/01/20</u> Name & Address: Bill Pidgeon 2721 Georgetown Blvd Ann Arbor, MI 48105		\$ <u>25.00</u>	\$ <u>25.00</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		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10/06/20</u> Name & Address: Michigan Education Association-PAC 1216 Kendale Blvd. East Lansing, MI 48223		\$ <u>1000.00</u>	\$ <u>1000.00</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		Click Here for Memo Itemization	

Page Subtotal \$1,225.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2014-162
2. Committee Name Committee to Elect Jeff Gaynor

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 all contributions regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt	<u>10/8/2020</u>		
Name & Address: <u>LIVNA Local 499</u> <u>3080 Platt Rd.</u> <u>Ann Arbor, MI 48108</u>				\$ <u>250.⁰⁰</u>	\$ <u>250.⁰⁰</u>
5. If over \$100.00 cumulative, please provide:				Click Here for Memo Itemization	
Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>8/18/20, 9/18/20, 10/18/20</u>		
Name & Address: <u>Jeff Gaynor</u> <u>3020 Belgos Cir</u> <u>Ann Arbor, MI 48105</u>				\$ <u>51.⁰⁰</u>	\$ <u>1301.00</u>
3 payments of \$17 for WIX (website)					
5. If over \$100.00 cumulative, please provide:				Click Here for Memo Itemization	
Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>8/29/20</u>		
Name & Address: <u>Jeff Gaynor</u> <u>3020 Belgos Cir</u> <u>Ann Arbor, MI 48105</u>				\$ <u>77.59</u>	\$ <u>1378.59</u>
fliers at OfficeMax					
5. If over \$100.00 cumulative, please provide:				Click Here for Memo Itemization	
Occupation <u>Retired</u> Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>10/18/20</u>		
Name & Address: <u>Jeff Gaynor</u> <u>3020 Belgos Cir</u> <u>Ann Arbor, MI 48105</u>				\$ <u>573.10</u>	\$ <u>1951.69</u>
Printer Cartridges Amazon					
5. If over \$100.00 cumulative, please provide:				Click Here for Memo Itemization	
Occupation <u>Retired</u> Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					

Page Subtotal

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

~~378.59~~ 951.69
~~14073.59~~ 4646.69

Enter this total on
line 3a of Summary
Page.



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **C-2016-162**
2. Committee Name **Committee to Elect Jeff Gaynor**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Sawicki & Son Address 1521 W. Lafayette Detroit, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: yard signs <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/27/20 Date	1211.05 \$ 1142.50
Expenditure #2 Name Jeff Gaynor Address 3020 Bolgos Cir Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: fliers at Office Max <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/29/20 Date	\$ 77.59
Expenditure #3 Name Jeff Gaynor Address 3020 Bolgos Cir Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: GoDaddy domain name <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/16/20 Date	\$ 1.17
Expenditure #4 Name Jeff Gaynor Address 3020 Bolgos Cir Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: WIX website (1 mo.) <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/18/20 Date	\$ 17.00
Expenditure #5 Name BP Gas Address Dearborn, MI <input type="checkbox"/> Fund Raiser	Purpose: yard sign pickup <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/4/20 Date	\$ 21.00

Subtotal this page

1327.81

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

C-2016-162

2. Committee Name

Committee to elect Jeff Gaynor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Sunoco</u> Address <u>1500 E. Stadium</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>gas for yard signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/2020</u> Date	<u>\$ 23.50</u>
Expenditure #2 Name <u>Amazon</u> Address <u>amazon.com</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>printer cartridges</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/20</u> Date	<u>\$ 573.10</u>
Expenditure #3 Name <u>Amazon</u> Address <u>amazon.com</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>copy paper</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/7/20</u> Date	<u>\$ 34.96</u>
Expenditure #4 Name <u>Jeff Gaynor</u> Address <u>3020 Belgos Cir</u> <u>Ann Arbor, MI 48105</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Wix website (lmo.)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/18/20</u> Date	<u>\$ 17.00</u>
Expenditure #5 Name <u>Jeff Gaynor</u> Address <u>3020 Belgos Cir.</u> <u>Ann Arbor, MI 48105</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Wix website (lmo.)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/20</u> Date	<u>\$ 17.00</u>

Subtotal this page

665.56

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

11931511

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2016-162
2. Committee Name Committee to Elect Jeff Gaynor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Jeff Gaynor</u> Address <u>3020 Belgos Cir</u> <u>Ann Arbor, MI 48105</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>repay loan</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/20</u> Date	<u>\$1327.59</u>
Expenditure #2 Name <u>Jeff Gaynor</u> Address <u>3020 Belgos Cir</u> <u>Ann Arbor, MI 48105</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>repay loan</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/20</u> Date	<u>\$</u>
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	<u>\$</u>
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	<u>\$</u>
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	<u>\$</u>

Subtotal this page 1327.59
Grand Total of all Schedules 1B
(Complete on last page of Schedule) 3320.96
Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2014-142

2. Committee Name

Committee to Elect Jeff Gaynor

This Schedule itemizes:

- a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Jeff Gaynor 3020 Belgos Circle Ann Arbor, MI 48105	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8/21/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1200.00</u>	<u>10/16/20 \$ 1200.</u> \$ \$ \$ \$	\$ <u>1200.</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN

If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Jeff Gaynor 3020 Belgos Circle Ann Arbor, MI 48105	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8/21/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 50.00</u>	<u>10/16/20 \$ 50.</u> \$ \$ \$ \$	\$ <u>50.</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Jeff Gaynor 3020 Belgos Circle Ann Arbor, MI 48105	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8/29/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 77.59</u>	<u>10/16/20 \$ 77.59</u> \$ \$ \$ \$	\$ <u>77.59</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

0

Grand Total of all Schedules 1E

0

(Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2016-1162

2. Committee Name Committee to Elect Jeff Gaynor

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Jeff Gaynor</u> <u>3020 Belgos Circle</u> <u>Ann Arbor, MI 48105</u>	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8/18, 9/18, 10/18/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$3 x \$17 = \$51</u>	11/1/20 \$ 51.00 \$ \$ \$ \$	\$ <u>0</u> \$51.00	\$ <u>51.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Jeff Gaynor</u> <u>3020 Belgos Circle</u> <u>Ann Arbor, MI 48105</u>	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>10/18/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 573.10</u>	11/1/20 \$ 573.10 \$ \$ \$ \$	\$ <u>0</u> \$573.10	\$ <u>573.10</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Jeff Gaynor</u> <u>3020 Belgos Circle</u> <u>Ann Arbor, MI 48105</u>	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8/16/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1.17</u>	<u>-</u> \$ \$ \$ \$ \$	\$ <u>0</u>	\$ <u>1.17</u> <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 624.10

Grand Total of all Schedules 1E 624.10
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.