



*Amend*

**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 <b>C-2016-162</b></p> <p>2. Committee Name <b>Committee to Elect Jeff Gaynor</b></p> <p>3. This Statement covers From: <b>8/16/20</b> to <b>10/20/20</b></p>		<p>4. Candidate Last Name <b>Gaynor</b> First Name <b>Jeffrey</b> M.I. <b>T.</b></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <b>Ann Arbor Public Schools Board of Education</b></p> <p>4b. County of Residence <b>Washtenaw</b></p>	
<p>5. Committee's Mailing Address <b>3020 Bogos Circle Ann Arbor, MI 48105</b></p> <p>Area Code and Phone <b>734-277-2305</b></p> <p><small>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.</small></p>		<p>6. Treasurer's Name &amp; Residential Address <b>Tina Luick 1455 N. Dancer Rd Dexter, MI <del>48130</del> 48130</b></p> <p>Area Code &amp; Phone <b>734-471-4423</b></p>	
<p>7. Treasurer's Business Address <b>(same)</b></p> <p>Area Code and Phone _____</p>		<p>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) <b>NONE</b></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 <b>11-3-2020</b></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>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>	
<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 <b>Tina D. Luick</b></p> <p>Type or Print Name</p>		<p><b>Tina D. Luick</b></p> <p>Signature</p>	
<p>Candidate <b>Jeffrey T. GAYNOR</b></p> <p>Type or Print Name</p>		<p><b>Jeffrey T. Gaynor</b></p> <p>Signature</p>	
<p>Date <b>10/22/2020</b></p>		<p>Date <b>10-22-2020</b></p>	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

2. Committee Name Committee to Elect Jeff Gaynor

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>4647.86</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>4647.86</u>	(18.) \$ <u>4647.86</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0</u>	(19.) \$ <u>0</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>4647.86</u>	(20.) \$ <u>4647.86</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
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>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
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>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>3320.96</u>	(23.) \$ <u>3320.96</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	(24.) \$ <u>0</u>
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>624.10</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>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>4647.86</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>4647.86</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>1326.90</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 all contributions regardless of amount.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 08/21/20

Name & Address:

Jeff Gaynor  
3020 Bolgos Circle  
Ann Arbor, MI 48105

\$ 1200.00

\$ 1200.00

5. If over \$100.00 cumulative, please provide:

Occupation retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 08/21/20

Name & Address

Jeff Gaynor  
3020 Bolgos Circle  
Ann Arbor, MI 48105

\$ 50.00

1250.00  
\$ ~~1250.00~~

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 08/27/20

Name & Address:

Judah Garber  
1508 Granger  
Ann Arbor, MI 48104

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 08/28/20

Name & Address

Gina Maksimchuk  
2648 Bernice St  
Ann Arbor, MI 48103

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	

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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	

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  
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**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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	
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		<a href="#">Click Here for Memo Itemization</a>	

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>LiUNA 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:		<a href="#">Click Here for Memo Itemization</a>	
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>3 payments of \$17</u> <u>for WIX (website)</u> \$ <u>51.00</u>	\$ <u>1301.00</u> <u>51.00</u>
5. If over \$100.00 cumulative, please provide:		<a href="#">Click Here for Memo Itemization</a>	
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>fliers at OfficeMax</u> \$ <u>77.59</u>	\$ <u>1378.59</u> <u>77.59</u>
5. If over \$100.00 cumulative, please provide:		<a href="#">Click Here for Memo Itemization</a>	
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>Printer Cartridges</u> <u>Amazon</u> \$ <u>573.10</u>	\$ <u>1951.69</u> <u>573.10</u>
5. If over \$100.00 cumulative, please provide:		<a href="#">Click Here for Memo Itemization</a>	
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

378.59

951.69

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

4073.00

4666.69

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>8/16/20</u> Name & Address: <u>Jeff Gaynor</u> <u>3020 Belgos Cir</u> <u>Ann Arbor, MI 48105</u>		\$ <u>1.17</u>	\$ <u>1952.86</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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 1952.86

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

4647.86

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

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>	Purpose: <u>gas for yard signs</u>	<u>10/4/2020</u> Date	<u>\$ 23.50</u>
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement <a href="#">Click Here for Memo Itemization Type</a>		
Expenditure #2 Name <u>Amazon</u> Address <u>amazon.com</u>	Purpose: <u>printer cartridges</u>	<u>10/18/20</u> Date	<u>\$ 573.10</u>
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement <a href="#">Click Here for Memo Itemization Type</a>		
Expenditure #3 Name <u>Amazon</u> Address <u>amazon.com</u>	Purpose: <u>copy paper</u>	<u>9/7/20</u> Date	<u>\$ 34.96</u>
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement <a href="#">Click Here for Memo Itemization Type</a>		
Expenditure #4 Name <u>Jeff Gaynor</u> Address <u>3020 Bolgos Cir</u> <u>Ann Arbor, MI 48105</u>	Purpose: <u>Wix website (lmo.)</u>	<u>9/18/20</u> Date	<u>\$ 17.00</u>
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement <a href="#">Click Here for Memo Itemization Type</a>		
Expenditure #5 Name <u>Jeff Gaynor</u> Address <u>3020 Bolgos Cir.</u> <u>Ann Arbor, MI 48105</u>	Purpose: <u>Wix website (lmo.)</u>	<u>10/18/20</u> Date	<u>\$ 17.00</u>
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement <a href="#">Click Here for Memo Itemization Type</a>		

Subtotal this page 665.56

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 1173.56

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
<b>Expenditure #1</b> Name Address <div style="border: 1px solid black; padding: 5px; margin: 10px 0;">Jeffrey T Gaynor 3020 Bolgos Cir Ann Arbor, MI 48105</div> <input type="checkbox"/> Fund Raiser	Purpose: <u>repay loan</u>	<u>10/16/20</u> Date	<u>\$ 1327.59</u>
<a href="#">Click Here for Memo Itemization Type</a>			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
<b>Expenditure #2</b> Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____	_____ Date	\$ _____
<a href="#">Click Here for Memo Itemization Type</a>			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
<b>Expenditure #3</b> Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____	_____ Date	\$ _____
<a href="#">Click Here for Memo Itemization Type</a>			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
<b>Expenditure #4</b> Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____	_____ Date	\$ _____
<a href="#">Click Here for Memo Itemization Type</a>			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
<b>Expenditure #5</b> Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____	_____ Date	\$ _____
<a href="#">Click Here for Memo Itemization Type</a>			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			

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-2014-162  
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. Date Debt Was Incurred: <u>8/21/20</u> 6. Original Amount of Debt: <u>\$ 1200.00</u>	10/16/20 \$ 1200. \$ \$ \$ \$	\$ 1200.	\$ 0 <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. Date Debt Was Incurred: <u>8/21/20</u> 6. Original Amount of Debt: <u>\$ 50.00</u>	10/16/20 \$ 50. \$ \$ \$ \$	\$ 50.	\$ 0 <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:  Jeff Gaynor 3020 Belgos Circle Ann Arbor, MI 48105	4. Type: <u>loan</u> 5. Date Debt Was Incurred: <u>8/29/20</u> 6. Original Amount of Debt: <u>\$ 77.59</u>	10/16/20 \$ 77.59 \$ \$ \$ \$	\$ 77.59	\$ 0 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

0

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

X

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.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2016-162  
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 endorsers 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>8/18, 7/18, 10/18/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$3 x \$17 = \$51</u>	<del>11/1/20 \$51.00</del> <del>11/1/20 \$51.00</del> \$ \$ \$	0 <del>51.00</del> \$ \$	51.00 <del>51.00</del> \$ <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>10/18/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 573.10</u>	<del>11/1/20 \$573.10</del> <u>11/13/20 \$573.10</u> \$ \$ \$	0 <del>573.10</del> \$ \$	573.10 <del>573.10</del> \$ <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: Jeff Gaynor 3020 Belgos Circle Ann Arbor, MI 48105	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>	- \$- \$ \$ \$ \$	0 \$ \$	\$ 1.17 <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

Grand Total of all Schedules 1E

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

624.10  
~~624.10~~  
624.10  
~~624.10~~

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.