



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: <u>4/27/2017</u> to <u>7/23/2017</u>	
1. Committee I.D. Number <u>C-2013-027</u>	4. Candidate Last Name <u>Smith</u> First Name <u>Charles "Chip"</u> M.I.
2. Committee Name <u>Committee to Elect Chip Smith</u>	4a. Office Sought Including District # or Community Served (If applicable) <u>Board-AZ City Commission</u>
5. Committee's Mailing Address <u>517 Krause St. Ann Arbor, MI 48103</u> Area Code and Phone <u>734-709-2027</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.	4b. County of Residence
6. Treasurer's Name & Residential Address <u>Samantha Brdek 1614 Dexter Ave Ann Arbor, MI 48103</u> Area Code & Phone <u>312-320-3056</u>	
7. Treasurer's Business Address <u>1614 Dexter Ave Ann Arbor, MI 48103</u> Area Code and Phone <u>312-320-3056</u>	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) <u>Samantha Brdek</u> Area Code and Phone

9. TYPE OF STATEMENT 9a. <input checked="" type="radio"/> Pre-Election <input type="radio"/> OR 9b. Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="radio"/> Primary General Convention Special School Caucus Date of Election, Convention or Caucus <u>8 Aug 2017</u>	Required ONLY if candidate is not on the ballot for the current year: July Quarterly October Quarterly 9c. Annual Statement () Coverage Year 9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	9e. By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
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10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper Samantha Brdek Signature [Signature] Date 7/25/2017
Candidate Chip Smith Signature [Signature] Date 27 July 2017



1. Committee I.D. Number C-2013-027

2. Committee Name Committee to Elect Chip Smith

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>11,510</u>	(18.) \$ <u>11,510</u>
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>11,510</u>	(19.) \$ <u>-</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>-</u>	(20.) \$ <u>11,510</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>11,510</u>	
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1329.65</u>	(21.) \$ <u>1,329.65</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>-</u>	(22.) \$ <u>-</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>6,926.94</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>-</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>-</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>6,926.94</u>	(23.) \$ <u>6,926.94</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>-</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>-</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>-</u>	(24.) \$ <u>-</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>-</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>-</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>318.48</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>11,510</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>11,828.48</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>6,926.94</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>4,901.54</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2013-027
2. Committee Name Committee to Elect Chip Smith

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? YES	4. Date of Receipt	<u>4/30/2017</u>		
Name & Address: <u>Vandervliet, M. Grace</u> <u>503 W. Jefferson</u> <u>Ann Arbor, MI 48103</u>				\$ <u>100</u>	\$ <u>100</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					
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt	<u>5/5/17</u>		
Name & Address: <u>Clevey, Mark</u> <u>2917 Brockman Blvd</u> <u>Ann Arbor, MI 48104</u>				\$ <u>100</u>	\$ <u>100</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					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>5/14/17</u>		
Name & Address: <u>Lindeberg, John</u> <u>416 Longshore Drive</u> <u>Ann Arbor, MI 48105</u>				\$ <u>50</u>	\$ <u>50</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					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>5/14/17</u>		
Name & Address: <u>Harrington, Mary</u> <u>353 Lake Park Lane</u> <u>Ann Arbor, MI 48103</u>				\$ <u>20</u>	\$ <u>20</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					

Page Subtotal

270⁰⁰

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-2013-029
2. Committee Name Comm. For 40 Elect Chg Sm. 71

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? YES	4. Date of Receipt	<u>5/14/17</u>		
Name & Address: <u>Printon, Stacie</u> <u>3060 B, Apt 2A</u> <u>Ann Arbor, MI 48105</u>				\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt	<u>5/14/17</u>		
Name & Address: <u>Hewitt, Roger</u> <u>2057 Pauline Ct</u> <u>Ann Arbor, MI 48103</u>				\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>5/14/17</u>		
Name & Address: <u>Kotarski, John</u> <u>1230 Saunders Cres</u> <u>Ann Arbor, MI 48103</u>				\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>5/14/17</u>		
Name & Address: <u>Hankenson, Kurt</u> <u>727 Linden St</u> <u>East Lansing, MI 48823</u>				\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>MSU</u> Business Address <u>220 Trowbridge Rd, East Lansing, MI 48824</u>					
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					

Page Subtotal 340

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-2013-027
2. Committee Name Committee to Elect Chip Smith

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 Name & Address: <u>Gordon, Robert</u> <u>2328 Fernwood Ave</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? YES 4. Date of Receipt <u>5/24/17</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>Smith, Patricia</u> <u>110 Depot Street</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? YES 4. Date of Receipt <u>5/24/17</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>Warpehoski, Charles</u> <u>2020 Winewood Ave</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? YES 4. Date of Receipt <u>5/24/17</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Interfaith Peace & Justice Coalition</u> Business Address <u>1414 Hill St, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>Spindler Jeffrey</u> <u>515 W. Summit St.</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? YES 4. Date of Receipt <u>5/24/17</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 295
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CANDIDATE COMMITTEE**

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3. Contribution # 1	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Lowenstein, Joan</u> <u>502 Burson Place</u> <u>Ann Arbor, MI 48104</u>				\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>lawyer</u> Employer <u>Jaffe Law</u> Business Address <u>27777 Franklin Rd #2500, Southfield, MI 48034</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Wojkowiak, Audrey</u> <u>523 Longshore B</u> <u>Ann Arbor, MI 48105</u>				\$ <u>50</u>	\$ <u>50</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 checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Piotrowski, David</u> <u>7566 Lake Hollow Court</u> <u>Dexter, MI 48130</u>				\$ <u>100</u>	\$ <u>100</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 checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Pinnell, Anthony</u> <u>1328 Minerva Rd</u> <u>Ann Arbor, MI 48104</u>				\$ <u>25</u>	\$ <u>25</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 checked="" type="checkbox"/> Fund Raiser					

Page Subtotal 425
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3. Contribution # 1	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Violet, Katie</u> <u>312 Berkley</u> <u>Ann Arbor, MI 48103</u>				\$ <u>20</u>	\$ <u>20</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 checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt	<u>5/25/17</u>		
Name & Address: <u>Brdek, Samantha</u> <u>1614 Dexter Ave</u> <u>Ann Arbor, MI 48103</u>				\$ <u>30</u>	\$ <u>30</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 checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Stults, Melissa</u> <u>2320 Walter Dr</u> <u>Ann Arbor, MI 48103</u>				\$ <u>100</u>	\$ <u>100</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 checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Feliks, Kyle</u> <u>1827 N. Franklin Ct</u> <u>Ann Arbor, MI 48103</u>				\$ <u>50</u>	\$ <u>50</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 checked="" type="checkbox"/> Fund Raiser					

Page Subtotal 200
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3. Contribution # 1 Name & Address: <u>Vander Broeck, Jamie</u> <u>625 Barber Ave</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? YES 4. Date of Receipt <u>5/24/17</u>	\$ <u>20</u>	\$ <u>20</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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Burke, Lori</u> <u>705 Gott St</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? YES 4. Date of Receipt <u>5/24/17</u>	\$ <u>50</u>	\$ <u>50</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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Rogers, Julie</u> <u>1203 Belmar Pl</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? YES 4. Date of Receipt <u>5/24/17</u>	\$ <u>50</u>	\$ <u>50</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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Grand, Julie</u> <u>1604 Brooklyn Ave</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? YES 4. Date of Receipt <u>5/24/17</u>	\$ <u>20</u>	\$ <u>20</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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 140

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3. Contribution # 1	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Krapohl, Greta</u> <u>1502 Golden Ave</u> <u>Ann Arbor, MI 48104</u>				\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person _____ <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Bobbin, Janis</u> <u>3465 Vintage Valley Rd</u> <u>Ann Arbor, MI 48105</u>				\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person _____ <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Stumpff, Andrew</u> <u>618 S. Ashley St</u> <u>Ann Arbor, MI 48103</u>				\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person _____ <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>5/24/17</u>		
Name & Address: <u>Briggs, Erica</u> <u>204 Mark Hannah Pl</u> <u>Ann Arbor, MI 48103</u>				\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person _____ <input checked="" type="checkbox"/> Fund Raiser					

Page Subtotal 270
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

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CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2013-027
2. Committee Name Committee to Elect Chip Smith

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? YES	4. Date of Receipt <u>5/24/17</u>		
Name & Address: <u>McCune, Andrew</u> <u>5187 Wimbledon Cir</u> <u>Ann Arbor, MI 48108</u>			\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: <input checked="" type="radio"/> Direct Loan from a person <input checked="" type="radio"/> Fund Raiser				
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt <u>5/24/17</u>		
Name & Address: <u>Fraser, Sarah</u> <u>303 W. Woodland St</u> <u>Ferndale, MI 48220</u>			\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: <input checked="" type="radio"/> Direct Loan from a person <input checked="" type="radio"/> Fund Raiser				
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt <u>5/24/17</u>		
Name & Address: <u>Hauptman, Jeff</u> <u>611 Stratford Dr</u> <u>Ann Arbor, MI 48104</u>			\$ <u>1,000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Oxford Companies</u> Business Address <u>210 S. Fifth Ave, Ann Arbor, MI 48104</u>				
Type of Contribution: <input checked="" type="radio"/> Direct Loan from a person <input checked="" type="radio"/> Fund Raiser				
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt <u>5/24/17</u>		
Name & Address: <u>Scott, Katie</u> <u>926 Loyola Dr</u> <u>Ann Arbor, MI 48103</u>			\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: <input checked="" type="radio"/> Direct Loan from a person <input checked="" type="radio"/> Fund Raiser				

Page Subtotal 1,175
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2013-027
2. Committee Name Committee to Elect Chip Smith

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? YES	4. Date of Receipt <u>5/24/17</u>	
Name & Address: <u>Rubin, Laura</u> <u>625 Fountain St.</u> <u>Ann Arbor, MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			
Type of Contribution: <input checked="" type="radio"/> Direct Loan from a person <input checked="" type="radio"/> Fund Raiser			
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt <u>5/28/17</u>	
Name & Address: <u>Weinert, Bryan</u> <u>108 Worden Ave</u> <u>Ann Arbor, MI 48103</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director of Strategy</u> Employer <u>Recycle Ann Arbor</u> Business Address <u>2420 S. Industrial Highway, Ann Arbor, MI 48104</u>			
Type of Contribution: <input checked="" type="radio"/> Direct Loan from a person Fund Raiser			
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt <u>5/31/17</u>	
Name & Address: <u>Ziph, Elizabeth</u> <u>1501 Hillridge Blvd</u> <u>Ann Arbor, MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			
Type of Contribution: <input checked="" type="radio"/> Direct Loan from a person Fund Raiser			
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt <u>6/2/17</u>	
Name & Address: <u>Firke, Samuel</u> <u>2809 Craig Rd</u> <u>Ann Arbor, MI 48103</u>		\$ <u>125</u>	\$ <u>125</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Project Director</u> Employer <u>Data & Analysis @ TNTIP</u> Business Address <u>186 Joralemon St, Suite 300, Brooklyn, NY 11201</u>			
Type of Contribution: <input checked="" type="radio"/> Direct Loan from a person Fund Raiser			

Page Subtotal

425

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-2013-027

2. Committee Name Committee to Elect Chris Smith

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? YES	4. Date of Receipt	<u>6/2/17</u>		
Name & Address: <u>Gunn, Leah</u> <u>2115 Nature Cove Ct, Apt 207</u> <u>Ann Arbor, MI 48104</u>				\$ <u>100</u>	\$ <u>100</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					
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt	<u>6/2/17</u>		
Name & Address: <u>Feldt, Linda</u> <u>3 Keppler Ct</u> <u>Ann Arbor, MI 48103</u>				\$ <u>40</u>	\$ <u>40</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					
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt	<u>6/2/17</u>		
Name & Address: <u>Christopher Taylor for Mayor</u> <u>2115 Nature Cove Ct, Apt 207</u> <u>Ann Arbor, MI 48104</u>				\$ <u>100</u>	\$ <u>100</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					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>6/2/17</u>		
Name & Address: <u>Babuska, Christopher</u> <u>813 Hiscock St</u> <u>Ann Arbor, MI 48103</u>				\$ <u>100</u>	\$ <u>100</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					

Page Subtotal 340

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-2013-027
2. Committee Name Committee to Elect Chip Smith

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?	YES	4. Date of Receipt		
Name & Address: <u>Cohen, Harry</u> <u>3140 W. Dobson Pl</u> <u>Ann Arbor, MI 48105</u>				\$ <u>1,000</u>	\$ <u>1,000</u>
5. If over \$100.00 cumulative, please provide:					
Occupation <u>restaurant owner</u>		Employer <u>Black Pearl</u>			
Business Address <u>302 S. Main 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					
3. Contribution #2	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Hutton, Susan</u> <u>1102 Olivia Ave</u> <u>Ann Arbor, MI 48104</u>				\$ <u>100</u>	\$ <u>100</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					
3. Contribution #3	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Lomako, Nicholas</u> <u>20154 Edgewood Ave</u> <u>Livonia, MI 48152</u>				\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Senior Vice President</u>		Employer <u>Wade Trim</u>			
Business Address <u>Guardian Building, 500 Griswold, Suite 2500, Detroit, MI 48226</u>					
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Bryan, Susan</u> <u>1116 W. Washington St</u> <u>Ann Arbor, MI 48103</u>				\$ <u>100</u>	\$ <u>100</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					

Page Subtotal 1,350

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-2013-027
2. Committee Name Comm. Free to Elect Chip Smith

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? YES	4. Date of Receipt	<u>6/24/17</u>		
Name & Address: <u>Joseph Thomas</u> <u>3865 S. Michael Rd</u> <u>Ann Arbor, MI 48103</u>				\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive</u> Employer <u>Vision, Inc.</u> Business Address <u>3865 S. Michael Rd, Ann Arbor, MI 48103</u> 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? YES	4. Date of Receipt	<u>6/28/17</u>		
Name & Address: <u>Sokatch, Andrew</u> <u>47 Maplewood Ave</u> <u>Newton Center, MA 02459</u>				\$ <u>100</u>	\$ <u>100</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					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>6/29/17</u>		
Name & Address: <u>Goodman, Adam</u> <u>615 Hiscock</u> <u>Ann Arbor, MI 48103</u>				\$ <u>50</u>	\$ <u>50</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					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>6/30/17</u>		
Name & Address: <u>Weinert, Daryl</u> <u>1400 Linwood Ave</u> <u>Ann Arbor, MI 48103</u>				\$ <u>100</u>	\$ <u>100</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					

Page Subtotal

500

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-2013-027
2. Committee Name Committee to Elect Chip Smith

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	<u>6/30/17</u>		
Name & Address: <u>Rotella, Elyce</u> <u>500 W. Jefferson St</u> <u>Ann Arbor, MI 48103</u>				\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt	<u>7/8/17</u>		
Name & Address: <u>Bernstein, Mark</u> <u>2002 Scottwood Ave</u> <u>Ann Arbor, MI 48104</u>				\$ <u>1,000</u>	\$ <u>1,000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>attorney</u> Employer <u>The Sam Bernstein Law Firm, PLLC</u> Business Address <u>31731 Northwestern Highway, Suite 333, Farmington Hills, MI 48334</u> Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>7/9/17</u>		
Name & Address: <u>Ketelaar, Daniel</u> <u>225 S. Ashley St, Suite 203</u> <u>Ann Arbor, MI 48104</u>				\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>real estate</u> Employer <u>Urban Group Development Company</u> Business Address <u>225 S. Ashley St, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser * money returned check 10/3/17					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>7/9/17</u>		
Name & Address: <u>Hohnke, Carsten</u> <u>301 W. Revena Blvd</u> <u>Ann Arbor, MI 48103</u>				\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					

Page Subtotal 1,400
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-2013-027
2. Committee Name Committee to Elect Ch. Smith

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? YES	4. Date of Receipt	<u>7/13/17</u>		
Name & Address: <u>Ramsay-Smith, Alec</u> <u>1442 W. Argyle St.</u> <u>Chicago, IL 60640</u>				\$ <u>100</u>	\$ <u>100</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					
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt	<u>7/13/17</u>		
Name & Address: <u>Deitch, Laurence B.</u> <u>4021 Hidden Woods Dr</u> <u>Bloomfield Hills, MI 48301</u>				\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>lawyer</u> Employer <u>Bodman</u> Business Address <u>201 S. Division St, Suite 400, 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					
3. Contribution #3	PAC Receipt? YES	4. Date of Receipt	<u>7/13/17</u>		
Name & Address: <u>Edelson, Gabriel Joseph</u> <u>3590 Broadway Blvd</u> <u>Bloomfield Hills, MI 48301</u>				\$ <u>500⁰⁰</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>lawyer</u> Employer <u>Honigman</u> Business Address <u>39400 Woodward Ave, Ste 101, Bloomfield Hills, MI 48304</u>					
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt? YES	4. Date of Receipt	<u>7/13/17</u>		
Name & Address: <u>Edelson, Stephanie</u> <u>3590 Broadway Blvd</u> <u>Bloomfield Hills, MI 48301</u>				\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>teacher</u> Employer <u>unknown</u> Business Address <u>unknown</u>					
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					

Page Subtotal

1600

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-2013-027

2. Committee Name Committee to Elect Chip Smith

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? YES	4. Date of Receipt	<u>7/13/17</u>		
Name & Address: <u>Schloff, J; II</u> <u>1423 Iroquois Pl</u> <u>Ann Arbor, MI 48104</u>				\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide:					
Occupation <u>lawyer</u>		Employer <u>Aidenbaum Schloff and Bloom PLLC</u>			
Business Address <u>6960 Orchard Lake Rd, Ste 250, West Bloomfield MI 48322</u>					
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt	<u>7/13/17</u>		
Name & Address: <u>Breza, John M.</u> <u>310 N. Connecticut Ave</u> <u>Royal Oak, MI 48067</u>				\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide:					
Occupation <u>executive</u>		Employer <u>First Holding Mgmt Co. LLC</u>			
Business Address <u>6960 Orchard Lake Rd, #300, west Bloomfield Township, MI 48322</u>					
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>7/13/17</u>		
Name & Address: <u>Kaplan, Helen Feingold</u> <u>3545 Charter Pl</u> <u>Ann Arbor, MI 48105</u>				\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide:					
Occupation <u>social worker - clinical</u>		Employer <u>unknown</u>			
Business Address <u>500 E. Washington St, Suite 100, Ann Arbor, MI 48104</u>					
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>7/13/17</u>		
Name & Address: <u>Bloom, Carey</u> <u>2030 E. Aster Place</u> <u>Chandler AZ 85286</u>				\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide:					
Occupation <u>unemployed</u>		Employer _____			
Business Address _____					
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser					

Page Subtotal 2000

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-2013-027
2. Committee Name Committee to Elect Chip Smith

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? YES	4. Date of Receipt <u>7/14/17</u>		
Name & Address: <u>Radina, Travis</u> <u>2750 Windwood Dr, Apt 146</u> <u>Ann Arbor MI 48105</u>			\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser				
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt <u>7/15/17</u>		
Name & Address: <u>Needham, Bob</u> <u>220 W. Summit St.</u> <u>Ann Arbor, MI 48103</u>			\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser				
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt <u>7/18/17</u>		
Name & Address: <u>Cox, Norman</u> <u>1520 Linwood Ave</u> <u>Ann Arbor, MI 48103</u>			\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser				
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt <u>7/20/17</u>		
Name & Address: <u>Elyakin, Margaret</u> <u>1300 Red Oak Rd</u> <u>Ann Arbor, MI 48103</u>			\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: <input checked="" type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser				

Page Subtotal

240

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-2013-027
2. Committee Name Committee to Elect Chry Smith

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? YES	4. Date of Receipt	<u>7/20/17</u>		
Name & Address: <u>Batterman, Joel</u> <u>2258 W. Grand Blvd, Apt 308</u> <u>Detroit, MI 48208</u>				\$ <u>5</u>	\$ <u>5</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 checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt	<u>7/20/17</u>		
Name & Address: <u>Scott, Jr., M. Douglas</u> <u>1525 Harding Rd</u> <u>Ann Arbor, MI 48104</u>				\$ 25	\$ <u>25</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					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>7/20/17</u>		
Name & Address: <u>Rogers, Virginia E.</u> <u>1332 White St.</u> <u>Ann Arbor, MI 48104</u>				\$ <u>10</u>	\$ <u>10</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					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>7/20/17</u>		
Name & Address: <u>Daly, James F.</u> <u>124 W. Summit St, Ste F</u> <u>Ann Arbor, MI 48103</u>				\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Manager</u> Employer <u>Ann Arbor Wellness Collective</u>					
Business Address <u>321 E. Liberty 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					

Page Subtotal 540
Grand Total of All Schedules 1A 11,510
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2013-027
2. Committee Name Committee to Elect Chip Smith

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Alex Yerkey</u> Address <u>3093 Williamsburg Rd Ann Arbor, MI 48108</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign management</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/27/17</u> Date	\$ <u>500</u>
Expenditure #2 Name <u>NGP VAN, Inc.</u> Address <u>PO Box 392264 Pittsburgh, PA 15251-9264</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>online donation application/website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/26/17</u> Date	\$ <u>450</u>
Expenditure #3 Name <u>Alex Yerkey</u> Address <u>3093 Williamsburg Rd Ann Arbor, MI 48108</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign management</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/26/17</u> Date	\$ <u>500</u>
Expenditure #4 Name <u>Chip Smith</u> Address <u>517 Krause St. Ann Arbor, MI 48103</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>repayment for fundraiser food, (4204) note cards, and yard signs, and (833) + shirts for parade (235)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/17/17</u> Date	\$ <u>1075</u>
Expenditure #5 Name <u>NGP VAN Inc.</u> Address <u>PO Box 392264 Pittsburgh, PA 15251-9264</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>bankcard merchant fees for online donations</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/2/17</u> Date	\$ <u>126.74</u>

Subtotal this page 2651.74

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-2013-027
2. Committee Name Committee to Elect Chip Smith

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Printing Plus</u> Address <u>105 W. Michigan Ave Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>postcards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/4/17</u> Date	\$ <u>450.50</u>
Expenditure #2 Name <u>Sawtcki & Son</u> Address <u>1521 W. Lafayette Detroit, MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>yard signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/14/17</u> Date	\$ <u>628.05</u>
Expenditure #3 Name <u>Ann Arbor Jaycees Foundation</u> Address <u>PO Box 1866 Ann Arbor, MI 48106</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>registration for 4th of July parade</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/16/17</u> Date	\$ <u>50</u>
Expenditure #4 Name <u>Printing Plus</u> Address <u>105 W. Washington Michigan Ave Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>direct mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/26/17</u> Date	\$ <u>709.70</u>
Expenditure #5 Name <u>Alex Yerkey</u> Address <u>3093 Williamsburg Ave Ann Arbor, MI 48108</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>campaign management</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/29/17</u> Date	\$ <u>500</u>

Subtotal this page 2338.25
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-2013-027
2. Committee Name Committee to Elect Chip Smith

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>NGV Van Inc</u> Address <u>PO Box 392264 Pittsburgh, PA 15251-9264</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>bankcard merchant fees for online donations</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/3/17</u> Date	\$ <u>36.39</u>
Expenditure #2 Name <u>Daniel Ketylaar</u> Address <u>225 S. Ashley St Suite 203 Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>return of donation to avoid conflict of interest</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/14/17</u> Date	\$ <u>200</u>
Expenditure #3 Name <u>Grange</u> Address <u>118 W. Liberty St. Ann Arbor, MI 48104</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser/meet and greet with Zach and Jason Ackerman Frenzel</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/14/17</u> Date	\$ <u>74.33</u>
Expenditure #4 Name <u>Printing Plus</u> Address <u>105 W. Michigan Ave Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>mailers and postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/24/17</u> Date	\$ <u>1626.23</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	_____	\$ _____

Subtotal this page 1936.95
Grand Total of all Schedules 1B (Complete on last page of Schedule) 6926.94
Enter this total on line 8a of Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2013-027

2. Committee Name Committee to Elect Chip Smith

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>5/24/2017</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>60</u> 30	5. Type of Fund Raising Activity <u>Campaign kickoff</u>	6. Address and Name (if any) of the place where the activity was held. <u>Arbor Brewing Company 114 E. Washington St. Ann Arbor, MI 48104</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$ 2,555

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$ 2,555

10. Total Cost of Event \$ 284
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-1K), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2013-027

2. Committee Name Committee to Elect Chip Smith

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>7/14/2017</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>~45</u>	5. Type of Fund Raising Activity <u>Meet and Greet</u>	6. Address and Name (If any) of the place where the activity was held. <u>Grange Kitchen & Bar</u> <u>118 W. Liberty St.</u> <input type="checkbox"/> <u>Ann Arbor, MI 48104</u> Private Residence
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7. Total Contributions \$ 73

8. Other Receipts \$ 280

9. Gross Receipts (Add lines 7 and 8) \$ 353

10. Total Cost of Event \$ 74.33
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
<u>Chip Smith</u>	<u>33%</u>	<u>33%</u>
<u>Jason Frenzel</u>	<u>34%</u>	<u>34%</u>
<u>Zachary Ackerman</u>	<u>33%</u>	<u>33%</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-1K), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2013-027
2. Committee Name Comm. Htee to Elect Chip Smith

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
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<p>Contribution # 1 PAC Receipt? Yes</p> <p>Name & Address: <u>Brdek, Samantha</u> <u>1614 Dexter Ave</u> <u>Ann Arbor, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Accountant</u> Employer Name & Business Address: <u>Self-employed/contractor</u> <u>1614 Dexter Ave</u> <u>Ann Arbor, MI 48103</u></p> <p>Fund Raiser Contribution</p>	<p>4. Endorsement or Guarantee of Bank Loan</p> <p>Goods Donated or Loaned <u>Services Donated</u></p> <p>Goods or Services Purchased by Candidate or Others</p> <p>Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>11.07 hours @ \$23/hr</u></p> <p>5. Date Of Receipt: <u>4/27/17 thru 7/20/17</u></p> <p>6. Vendor Name & Address:</p>	<p>\$ <u>254.61</u> \$</p>	<p>\$</p>
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<p>Contribution # 2 PAC Receipt? Yes</p> <p>Name & Address: Chip Smith <u>Chip Smith</u> <u>517 Krause St</u> <u>Ann Arbor, MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Senior Planner</u> Employer Name & Address: <u>Wade Trim</u> <u>500 Griswold St</u> <u>Suite 2500</u> <u>Detroit MI 48226</u></p> <p>Fund Raiser Contribution</p>	<p>4. Endorsement or Guarantee of Bank Loan</p> <p>Goods Donated or Loaned Services Donated</p> <p>Goods or Services Purchased by Candidate or Others</p> <p><u>Goods or Services Purchased by Candidate or Others- LOAN</u></p> <p>Description <u>fundraiser food @ Arbor Brewing Company</u></p> <p>5. Date Of Receipt: <u>5/24/2017</u></p> <p>6. Vendor Name & Address: <u>Arbor Brewing Company</u> <u>114 E. Washington St</u> <u>Ann Arbor, MI 48104</u></p>	<p>\$ <u>283.50</u> \$ 1075.04</p>	<p><u>283.50</u></p>
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<p>Contribution #3 PAC Receipt? Yes</p> <p>Name & Address: <u>Smith, Chip</u> <u>517 Krause St</u> <u>Ann Arbor MI 48103</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p> <p>Fund Raiser Contribution</p>	<p>4. Endorsement or Guarantee of Bank Loan</p> <p>Goods Donated or Loaned Services Donated</p> <p>Goods or Services Purchased by Candidate or Others</p> <p><u>Goods or Services Purchased by Candidate or Others- LOAN</u></p> <p>Description <u>notecards</u></p> <p>5. Date Of Receipt: <u>5/26/2017</u></p> <p>6. Vendor Name & Address: <u>Printing Plus</u> <u>105 W. Michigan Ave</u> <u>Ypsilanti, MI 48197</u></p>	<p>\$ <u>33.10</u> \$ 1075.04</p>	<p><u>316.60</u></p>
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Page Subtotal 571.21

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

Enter this total
on line 6 of Summary
Page