



**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: 7/24/2017 to 8/28/2017

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

2. Committee Name
Committee to Elect Chip Smith

4. Candidate Last Name Smith First Name Charles "Chip" M.I.
4a. Office Sought Including District # or Community Served (If applicable)
Board - AZ City Commission
4b. County of Residence

5. Committee's Mailing Address
517 Krause St.
Ann Arbor, MI 48103

Area Code and Phone 734-709-2022
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.

6. Treasurer's Name & Residential Address
Samantha Bredak
1614 Dexter Ave
Ann Arbor, MI 48103

Area Code & Phone 312-320-3056

7. Treasurer's Business Address
1614 Dexter Ave
Ann Arbor, MI 48103

Area Code and Phone 312-320-3056

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
Samantha Bredak

Area Code and Phone _____

9. TYPE OF STATEMENT

9a. Pre-Election OR 9b. Post-Election

Pre-Election or Post-Election Statement relates to:
Primary
General
Convention
Special
School
Caucus

Date of Election, Convention or Caucus
8 Aug 2017

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.

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 Bredak Signature _____ Date 6 Sept 2017

Candidate Chip Smith Signature _____ Date 6 Sep 2017

FILED
 WASHTENAW COUNTY MI
 2017 SEP -7 A
 9 30
 LANDELIN ESTATE
 COUNTY CLERK
 CENTER



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>1704.⁰⁰</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>1704.⁰⁰</u> | (18.) \$ <u>13,214.⁰⁰</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ <u>-</u> | (19.) \$ <u>-</u> |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>1704.⁰⁰</u> | (20.) \$ <u>13,214.⁰⁰</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>903.14</u> | (21.) \$ <u>2232.79</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>1985.45</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>1985.45</u> | (23.) \$ <u>8912.39</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>294.34</u> | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ <u>294.34 -</u> | |
| BALANCE STATEMENT | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ <u>4,901.54</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>1704.00</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ <u>6605.54</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ <u>1985.45</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ <u>4620.09</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>7/24/2017</u> | | |
| Name & Address: <u>Jessica Letaw</u> <u>1910 W. Liberty St, Apt 2</u> <u>Ann Arbor, MI 48103</u> | | | | \$ <u>50⁰⁰</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>7/28/2017</u> | | |
| Name & Address: <u>Peter Honeyman</u> <u>113 S. 4th Apt. 4</u> <u>Ann Arbor, MI 48104</u> | | | | \$ <u>50⁰⁰</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>7/28/2017</u> | | |
| Name & Address: <u>Laura King-Moore</u> <u>1304 Edgewood Dr</u> <u>Ann Arbor, MI 48103</u> | | | | \$ <u>99⁰⁰</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>8/2/2017</u> | | |
| Name & Address: <u>Robert Galardi</u> <u>315 2nd St, Apt 217</u> <u>Ann Arbor, MI 48103</u> | | | | \$ <u>50⁰⁰</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

249⁰⁰

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>8/2/17</u> | | |
| Name & Address: <u>John Splitz</u> <u>207 W. William St, Apt 3</u> <u>Ann Arbor, MI 48104</u> | | | | \$ <u>250⁰⁰</u> | \$ _____ |
| 5. If over \$100.00 cumulative, please provide: | | | | | |
| Occupation <u>owner</u> | | Employer <u>Gold Bond Cleaners</u> | | | |
| Business Address <u>332 Maynard 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 | | | | | |
| 3. Contribution # 2 | PAC Receipt? YES | 4. Date of Receipt | <u>8/7/17</u> | | |
| Name & Address: <u>Linh Song</u> <u>1290 Bardstown Trail</u> <u>Ann Arbor, MI 48105</u> | | | | \$ <u>1,000⁰⁰</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 | | | | | |
| 3. Contribution # 3 | PAC Receipt? YES | 4. Date of Receipt | <u>8/3/17</u> | | |
| Name & Address: <u>Artel Ryan</u> <u>335 Columbine Court</u> <u>Ann Arbor, MI 48103</u> | | | | \$ <u>95⁰⁰</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>8/3/17</u> | | |
| Name & Address: <u>John Ivanacich</u> <u>1324 Wells St</u> <u>Ann Arbor, MI 48104</u> | | | | \$ <u>25⁰⁰</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

1370⁰⁰

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. 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>8/7/17</u> | \$ <u>10⁰⁰</u> | \$ _____ |
| Name & Address: <u>Patti Smith</u> <u>2327 Fernwood Ave</u> <u>Ann Arbor, MI 48104</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>8/16/17</u> | \$ <u>75⁰⁰</u> | \$ _____ |
| Name & Address: <u>Amanda Cantrell</u> <u>1619 Waltham Dr.</u> <u>Ann Arbor, MI 48103</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 | _____ | \$ _____ | \$ _____ |
| Name & Address: | | | | | |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ | | | | | |
| Type of Contribution: <input 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 | _____ | \$ _____ | \$ _____ |
| Name & Address: | | | | | |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ | | | | | |
| Type of Contribution: <input type="radio"/> Direct <input type="radio"/> Loan from a person <input type="radio"/> Fund Raiser | | | | | |

Page Subtotal

85⁰⁰

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

1704⁰⁰

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>Chip Smith</u> Address <u>517 Krause St. Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser | Purpose: <u>repayment for Facebook Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>7/31/17</u> Date | <u>\$ 75⁰⁰</u> |
| Expenditure #2 Name <u>Printing Plus/United Sons</u> Address <u>105 W. Michigan Ave Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser | Purpose: <u>door hangers & mailers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>8/2/17</u> Date | <u>\$ 1057⁰⁰</u> |
| Expenditure #3 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>8/2/17</u> Date | <u>\$ 102.57</u> |
| Expenditure #4 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>8/8/17</u> Date | <u>\$ 500⁰⁰</u> |
| Expenditure #5 Name <u>Brian Marlos</u> Address <u>412 W. Grand Blvd Detroit, MI 48216</u> <input type="checkbox"/> Fund Raiser | Purpose: <u>running gotv</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>8/8/17</u> Date | <u>\$ 250⁰⁰</u> |

Subtotal this page 1985.45
Grand Total of all Schedules 1B (Complete on last page of Schedule) 1985.45

Enter this total on line 8a of Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2013-027
2. Committee Name Committee 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 all 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) |
|--|--|-----------------------------------|---|
| <p>Contribution # 1 PAC Receipt? Yes</p> <p>Name & Address: <u>Bodak, 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>4.83 hrs @ \$23/hr</u></p> <p>5. Date Of Receipt: <u>7/24 - 8/28/2017</u></p> <p>6. Vendor Name & Address:</p> | <p>\$ <u>111.09</u></p> | <p>\$ <u>365.70</u></p> |
| <p>Contribution # 2 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: <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 <u>Services Donated</u></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>Facebook Ads</u></p> <p>5. Date Of Receipt: <u>8/8/2017</u></p> <p>6. Vendor Name & Address: <u>Facebook</u> <u>Attn: Community Support</u> <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u></p> | <p>\$ <u>110⁰⁰</u></p> | <p>\$ <u>110⁰⁰</u></p> |
| <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: <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 <u>Services Donated</u></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>Adwords - video ads</u></p> <p>5. Date Of Receipt: <u>8/8/2017</u></p> <p>6. Vendor Name & Address: <u>Google</u> <u>Mountain View, CA</u></p> | <p>\$ <u>682.05</u></p> | <p>\$ <u>792.05</u></p> |

Page Subtotal 903.14 1267.75

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 903.14

Enter this total
on line 6 of Summary
Page



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

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

| This Schedule itemizes: | | | | | | |
|--|---|---|---------------------------------------|--|--|--|
| a. Debts and obligations owed <u>by</u> or forgiven the committee | | OR | | | b. Debts and obligations owed <u>to</u> or forgiven <u>by</u> 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? Yes Owed to or by: <u>Pizza House</u> <u>618 Church St.</u> <u>Ann Arbor, MI 48104</u> | 4. Type: <u>Pizza House Party on primary</u> 5. <u>Date Debt Was Incurred:</u> <u>8/8/2017</u> 6. <u>Original Amount of Debt:</u> <u>\$ 294.34</u> | \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ | \$ <u>0</u> | \$ <u>294.34</u> FORGIVEN | | |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | | | | | | |
| Debt #2 Corp? Yes Owed to or by: <u>NGP VAN Inc.</u> <u>PO Box 392264</u> <u>Pittsburgh, PA 15251</u> | 4. Type: <u>bankcard merchant fees</u> 5. <u>Date Debt Was Incurred:</u> <u>8/23/17</u> 6. <u>Original Amount of Debt:</u> <u>\$ 60.00</u> | <u>9/2 \$ 60.00</u> \$ _____ \$ _____ \$ _____ \$ _____ | \$ <u>60.00</u> | \$ <u>0</u> FORGIVEN | | |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | | | | | | |
| Debt #3 Corp? Yes Owed to or by: | 4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____ | \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ | \$ _____ | \$ _____ FORGIVEN | | |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | | | | | | |

Page Subtotal (Outstanding debt) 294.34
Grand Total of all Schedules 1E 294.34
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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