



pre-election primary
Amended

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

2. Committee Name CTE 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> | (19.) \$ <u>-</u> |
| c. Subtotal of "Contributions" | (3c.) \$ <u>11,510</u> | (20.) \$ <u>11,510</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>11,510</u> | (20.) \$ <u>11,510</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>1,329.65</u> | (21.) \$ <u>1329.65</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>6926.94</u> | (23.) \$ <u>6926.94</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>6926.94</u> | (23.) \$ <u>6926.94</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>0</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>543.33</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>12,053.33</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>5,126.39</u> | |

LANSING REGISTER/CLERK
 COUNTY CLERK/REGISTER
 2017 DEC - 8 AM 9:16
 FILED
 WASHINGTON COUNTY MI



post-election primary
Amended

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

2. Committee Name CTE 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.</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>1704</u> | (18.) \$ <u>13,214 -</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ <u>0 -</u> | (19.) \$ <u> </u> |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>1704</u> | (20.) \$ <u>13,214</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>903.14</u> | (21.) \$ <u>2237.79</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>0</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>-</u> | |
| BALANCE STATEMENT | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ <u>5126.39</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>1704</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ <u>6830.39</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>4844.94</u> | |



pre-election general
Amended

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

2. Committee Name CTE 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>4350</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>4350</u> | (18.) \$ <u>18,564</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>4350</u> | (20.) \$ <u>18,564</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>655.63</u> | (21.) \$ <u>2,888.42</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>3563.07</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>3563.07</u> | (23.) \$ <u>12,475.46</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>-</u> | |
| BALANCE STATEMENT | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ <u>4844.94</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>4350</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ <u>9194.94</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ <u>3563.07</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ <u>5631.87</u> | |



post-election General
Amended

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

2. Committee Name CTE 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>2230</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>2230</u> | (18.) \$ <u>20,794</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ <u>430</u> | (19.) \$ <u>430</u> |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>2660</u> | (20.) \$ <u>21,224</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>166.75</u> | (21.) \$ <u>3055.17</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>7869.94</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>7869.94</u> | (23.) \$ <u>20,345.40</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>5631.87</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>2660</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ <u>8291.87</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ <u>7869.94</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ <u>421.93</u> | |



**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>10/23/17</u> to <u>11/27/17</u> | |
| 1. Committee I.D. Number <u>C-2013-027</u> | 4. Candidate Last Name <u>Smith</u> First Name <u>Charles</u> M.I. <u>"Chip"</u> |
| 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>734-709-2022</u> <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> | 4b. County of Residence <u>Washtenaw</u> |
| 7. Treasurer's Business Address <u>1614 Dexter Ave Ann Arbor, MI 48103</u> Area Code and Phone <u>313-320-3056</u> | 6. Treasurer's Name & Residential Address <u>Samantha Brodek</u> <u>1614 Dexter Ave</u> <u>Ann Arbor, MI 48103</u> Area Code & Phone <u>313-320-3056</u> |
| | 8. Designated Record keeper's Name and Mailing Address (if the committee has a Designated Record keeper) <u>Samantha Brodek</u> |

| | | |
|---|--|--|
| 9. TYPE OF STATEMENT 9a. Pre-Election OR 9b. <u>Post-Election</u> Pre-Election or Post-Election Statement relates to: Primary <u>General</u> Convention Special School Caucus Date of Election, Convention or Caucus <u>11/7/2017</u> | Required ONLY if candidate is not on the ballot for the current year: July Quarterly October Quarterly | 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 lates 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 _____ |
| | 9c. Annual Statement (_____) Coverage Year 9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) | 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 <u>Samantha Brodek</u> Type or Print Name | <u>[Signature]</u> Signature | Date <u>12/10/17</u> |
| Candidate <u>Chip Smith</u> Type or Print Name | <u>[Signature]</u> Signature | Date <u>12/10/17</u> |



**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: 8/29/17 to 10/22/17

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 Breden
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 Breden
Area Code and Phone

9. TYPE OF STATEMENT
9a. Pre-Election Post-Election
Pre-Election or Post-Election Statement relates to:
 Primary
 General
 Convention
 Special
 School
 Caucus
Date of Election, Convention or Caucus
11/7/2017

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 lates 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 Breden Signature _____ Date 12/10/17
Candidate Chip Smith Signature _____ Date 12/10/17

FILED
WASHTENAW COUNTY MI
2017 DEC 11 AM 9:43
MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 7/24/17 to 8/28/17

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 734-1709-2022
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 Brdek
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 Brdek
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 lates 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 Brdek Type or Print Name [Signature] Signature Date 12/10/17
Candidate Chip Smith Type or Print Name [Signature] Signature Date 12/10/17



**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: 4/27/17 to 7/23/17

| | |
|--|--|
| <p>1. Committee I.D. Number <u>C-2013-027</u></p> <p>2. Committee Name <u>CTE Chip Smith</u></p> | <p>4. Candidate Last Name First Name M.I. <u>Smith Charles "Chip"</u></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <u>Board - AZ City Commission</u></p> <p>4b. County of Residence</p> |
|--|--|

| | |
|---|---|
| <p>5. Committee's Mailing Address <u>517 Krause St. Ann Arbor, MI 48103</u></p> <p>Area Code and Phone <u>734-709-2072</u></p> <p>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p> | <p>6. Treasurer's Name & Residential Address <u>Samantha Brdek 1614 Dexter Ave Ann Arbor, MI 48103</u></p> <p>Area Code & Phone <u>312-320-3056</u></p> |
|---|---|

| | |
|--|--|
| <p>7. Treasurer's Business Address <u>1614 Dexter Ave Ann Arbor, MI 48103</u></p> <p>Area Code and Phone <u>312-320-3056</u></p> | <p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) <u>Samantha Brdek</u></p> <p>Area Code and Phone _____</p> |
|--|--|

| | | |
|---|--|--|
| <p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="radio"/> Pre-Election OR 9b. <input type="radio"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" type="radio"/> Primary <input type="radio"/> General <input type="radio"/> Convention <input type="radio"/> Special <input type="radio"/> School <input type="radio"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>8 Aug 2017</u></p> | <p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly</p> <p>9c. Annual Statement (_____) Coverage Year</p> <p>9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p> | <p>9e.</p> <p>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> |
|---|--|--|

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>Current Treasurer or Designated Record keeper <u>Samantha Brdek</u></p> <p>Type or Print Name _____ Signature _____</p> | <p>Date <u>12/10/17</u></p> <p>Candidate <u>Chip Smith</u></p> <p>Type or Print Name _____ Signature _____</p> <p>Date <u>12/10/17</u></p> |
|--|--|

FILED
 WASHTENAW COUNTY MI
 2017 DEC 11 A 9:43
 CLERK OF SUPERIOR COURT
 LAWRENCE WESTERBAUGH