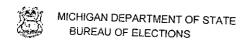


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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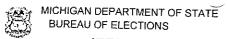


1. Committee I.D. Number <u>C-2007-019</u>

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Mike Anglin for Council

Column I This Period	Column II Cumulative this election cycle
	Carrialogive trills election cycle
_{(3a.) \$} 819.00	
	(18.) \$ \$9,308.00
(5.) \$ \$819.00	(19.) \$ (20.) \$
(6.) \$ \$20.13	(21.) \$ \$198.63
(7.) \$	(22.) \$
(8a.) \$ \$3,713.29	
(8b.) \$	
	
(9.) \$ \$3,713.29	(23.) \$ \$9,335.97
	(20.) \$
(10a.) \$	
(11.) \$	(24.) \$
(12a.) \$ _ \$562.81	
(12b.) \$BALANCE STATEMENT	
(13.) \$_\$2,900.42	
(14.) + \$ \$819.00	
(15.) = \$ \$3,719.42	
(16.) - \$ \$3,713.29	
(17.) \$ \$6.13	
	(3b.) \$ NOT APPLICABLE (3c.) \$ \$819.00 (4.) \$ (5.) \$ \$819.00 (6.) \$ \$20.13 (7.) \$ (8a.) \$ \$3,713.29 (8b.) \$ (8c.) \$ (9.) \$ \$3,713.29 (10a.) \$ (11.) \$ (12a.) \$ \$562.81 (12b.) \$ BALANCE STATEMENT (13.) \$ \$2,900.42 (14.) + \$ \$819.00 (15.) = \$ \$3,713.29 (10a.) \$ (16.) - \$ \$3,713.29

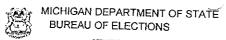


ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

CANDIDATE COMMITTEE

2. Committee Name Mike Anglin for Council

Enter contributor's name and address middle initial. Check box to indicate i Committee (PAC) Report all contributions	tions regardless of amount.	ndividual, enter last name, first nar cal Committee or an Independent	me, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
Contribution # 1 PAC Received Name & Address:	eipt? YES 4. Date	of Receipt 07/21/09		date of receipt)
Kent Burkhart 409 1/2 N Fourth Ave		·		
Ann Arbor MI 48104			_{\$} 99	ູ 99
5. If over \$100.00 cumulative, please	provide:		Ψ	
Occupation	Employer		Click Her	e for Memo Itemization
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
Contribution #2 PAC Receip Name & Address	ot? YES 4. Date	of Receipt 07/22/09		
Louis Breskman 315 W Jefferson Ct Ann Arbor MI 48103			_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please	provide:		Click Hero	for Memo Itemization
Occupation exec VP	Employer Z Technol	ogies	Ollow Liele	for Metrio Remization
Business Address 26500 Capital A	ve, Redford MI 48239			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
B. Contribution #3 PAC Receipt Name & Address:	? YES 4. Date of	of Receipt 07/31/09		
Cythia Lunan 312 Mark Hannah Ann Arbor MI 48103 5. If over \$100.00 cumulative, please p	arovido:		\$ 50	\$ 50 or Memo Itemization
Occupation	Employer			or World (tomization
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
Contribution # 4 PAC Receipt	? YES 4. Date of	of Receipt 07/31/09		
Susan Greenbert 1315 Culver Ann Arbor MI 48103			_{\$} 100	_s 100
. If over \$100.00 cumulative, please p	rovide:			
Occupation	Employer		Click Here fo	r Memo Itemization
Business Address				
Type of Contribution: 🚺 Direct	Loan from a person	Fund Raiser		
		Page Subtot	tal \$499.00	
		Grand Total of All Schedules 1,		-
age 1 of 3	(1	Complete on last page of Schedul	Enter this total on line 3a of Summary Page.	



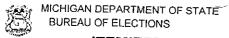
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

2. Committee Name Mike Anglin for Council

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Enter contributor's name and address middle initial. Check box to indicate i Committee (PAC) Report <u>all</u> contribu	tions regardless of amount.	ndividual, enter last name, first nar cal Committee or an Independent	me, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution #1 PAC Received Name & Address:	eipt? YES 4. Date	of Receipt 07/31/09		date of receipt)
Barbara Schneider				
206 Montgomery				
Ann Arbor MI 48103-4113			_s 20	ູ 20
5. If over \$100.00 cumulative, please	provide:		¥ <u></u>	<u> </u>
Occupation	Employer	·	Click Here	e for Memo Itemization
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
Contribution #2 PAC Receip Name & Address		of Receipt 07/31/09		
Jill Peek				
272 Crest			_s 100	100
Ann Arbor MI 48103			\$ <u></u>	_{\$} 100
5. If over \$100.00 cumulative, please	provide:		0"	
Occupation			Click Here	for Memo Itemization
Business Address				
Type of Contribution: ✓ Direct				
	Loan from a person	Fund Raiser		
 Contribution # 3 PAC Receipt Name & Address; 	? YES 4. Date of	of Receipt 07/31/09		
Karen Larson 1737 Tudor Ann Arbor MI 48103 5. If over \$100.00 cumulative, please p	rovide:		\$ 30 Click Here fo	s 30
Occupation	Employer			
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
. Contribution # 4 PAC Receipt	YES 4. Date o	f Receipt 07/31/09		
Sandra Foulke 1606 Waltham Ann Arbor MI 48103			_{\$} 50	_{s_} 50
. If over \$100.00 cumulative, please pr	rovide:		Oli-I-II (
Occupation	Employer	N- N-	Click Here foi	Memo Itemization
Business Address		•		
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
	<u> </u>	Page Subtot	al \$200.00	
		Grand Total of All Schedules 1/		-
_	(0	Complete on last page of Schedule	Enter this total on	J
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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2007-019

		COMMITTEE	2. Committee Name	<u>-</u> . <u>-</u>	
Committee (PAC) Rep	port all contribution	is regardless of amount.	lividual, enter last name, first name I Committee or an Independent	, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1 Name & Address:	PAC Receipt	? YES 4. Date of	of Receipt 07/31/09		date of receipt)
Christine Hildeb			0//0//09		
Ann Arbor MI 48	3104			_{\$} 100	<i>"</i> 250
5. If over \$100.00 cum	iulative, please pi	rovide:		\$	_ \$
Occupation retired	,			Click Here	for Memo Itemization
Business Address					
Type of Contribution:	√ Direct	Loan from a person	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?		Receipt 07/31/09		
Jennifer Haines					
2776 Daleview E Ann Arbor MI 48				_{\$} 20	_{\$} 20
5. If over \$100.00 cumu	ilative, please pro	ovide:			
Occupation				Click Here fo	or Memo Itemization
Business Address					
Type of Contribution:		Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of	Receipt		
				\$	\$
5. If over \$100.00 cumul	lative, please pro	vide:		Click Here for	Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 4 ame & Address	PAC Receipt?	YES 4. Date of	Receipt		
. If over \$100.00 cumul	ntivo mlagos muni	da.		\$	\$
Occupation	ative, please prov			Click Here for	Memo Itemization
A	-				
Business Address Type of Contribution:	Direct	Loan from a person	Fund Raiser		
			Page Subtotal	\$120.00	
		(Co	Grand Total of All Schedules 1A omplete on last page of Schedule)	\$819.00	
age_3of3_				Enter this total on line 3a of Summary Page.	



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

C-2007-019

2. Committee Name Mike Anglin for Council

Name and address of person or vendor to whom paid	4 Durage /Day in 14 F	
Expenditure #1	4. Purpose (Required Information) 5. Da	te 6. Amount
Name Rita Mitchell		
	07/20/	09
Address 621 Fifth St	Purpose: reimburse postage 467.10; supl 264.90 Date	
Ann Arbor MI 48103	Click Here for N	lemo Itemization Type
	Check box if this expenditure is payment of	The memiliand rype
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #2		
Name Rita Mitchell	07/28/0	09
Address	Purpose: reimburse postage Date	\$ <u>946.00</u>
621 Fifth St	Pulpose:	
Ann Arbor MI 48103	Click Here for Me	emo Itemization Type
□	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #3		
Name Kathleen Clark	07/28/	na
Address	Purpose: reimvurse printing 540.60;supl 38.68 Date	\$ 579.28
549 S First St	Pulpose	
Ann Arbor MI 48103	[] [no Itemization Type
Fund Raiser	L_Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #4	- Colonium	
^{Name} Kolossos	09/04/00	
Address	08/04/09 Date	\$ 11.97
2055 W Stadium	Purpose: printing Date	
Ann Arbor MI 48103	Click Here for Mem	o Itemization Type
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
xpenditure #5		
^{lame} Kathleen Clark	08/10/09	
address	Purpose: reimburse printing Date	\$ 61.90
549 S First St	t dipose.	
Ann Arbor MI 48103	Click Here for Mem	o Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
	Subtotal this page	\$2,331.15
	Grand Total of all Schedules 1B	
	(Complete on last page of Schedule)	Enter this total
		Enter this total

Page 1 of 2

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

C-2007-019

2. Committee Name Mike Anglin for Council

Name and address of person or vendor to whom paid			
	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Holbrook Design		08/23/09	. 005.00
Address	Purpose: graphic design	Date	\$ 805.00
2882 Perrine Rd		_	
Rives Junction MI 49277	I		ŧÐKÊ∼ï‰3þPh⊷sÝbv
Fund Raiser	Check box if this expenditure is paymer debt or obligation reported on previous	nt of	
Expenditure #2	statement		
Name Kathleen Clark			
	_	08/23/09	\$ 577.14
Address	Purpose: food for volunteers	Date	
549 S First St	Y4	FÈU" (Labovilla)	244 ²
Ann Arbor MI 48103	 		DKÉ~ľ‰3þPh~sÝbv
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous	of	
Expenditure #3	statement		
Name			
Address			\$
Address	Purpose:	Date	
	¥15	Èk" ∕È≂P°Ý U4ĐI	KI ^A , You out the
	Check box if this expenditure is navment		NE~17603PPN-SYDW
Fund Raiser	debt or obligation reported on previous statement	oi.	
Expenditure #4	Catemon		
Name			
Address		Date	\$
	Purpose:	Date	
	Xf5	Èk" ∕È=P°Ý U4ĐK	É~1%-3hPh_eÝh
	Check box if this expenditure is payment of		- 1,000p; 11-3; DW
Fund Raiser	debt or obligation reported on previous statement	•	
Expenditure #5			
Name			
Address	_		\$
	Purpose:	Date	
	Xf5 £	Èk" ∕È=P°Ý U4ÐKI	Ê~ľ‰3þPh—sÝbw
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	;	
	Subto	otal this page \$	1,382.14
	Grand Total of all	a	
	(Complete on last and	5 55 Calandidas 1	3.713.29

te on last page of Schedule) 49,713

Enter this total on line 8a of Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS

C-2007-019

SCHEDULE 1-	1. Committee I. D. Number C-2007-018	<u> </u>
CANDIDATE COM	MITTEE 2. Committee Name Mike Anglin for	Council
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 8. Cumulativ Fair Market for Election
Contribution # 1 PAC Receipt? Yes Name & Address: Glenn Thompson 100 Longman Lane Ann Arbor MI 48103 If over \$100.00 cumulative, please provide: Occupation:	Goods Donated or Loaned Services Donated	\$ 20.13 \$ 20.13
Employer Name & Business Address: Fund Raiser Contribution	5. Date Of Receipt: 6. Vendor Name & Address: Staples Westgate Shopping Center Ann Arbor MI	Click Here for Memo Itemization
Contribution # 2 PAC Receipt? Yes Name & Address If over \$100.00 cumulative, please provide:	4.	\$
Occupation: Employer Name & Address:	Date Of Receipt: Vendor Name & Address:	lick Here for Memo Itemization
Fund Raiser Contribution		
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Bushesed by Candidate or Others	\$
Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN Description	ck Here for Memo Itemization
Fund Raiser Contribution		
	Page Subtotal	\$20.13

Enter this total on line 6 of Summary Page

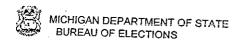
20.13

Grand Total of all Schedules 1-iK

(Complete on last page of Schedule)

Page 1 of 1

If



DEBIS AND OBLIGATIONS 1	Committee I.D. Number	2007-019		
SCHEDULE 1E				
	Committee Name Mike An	glin for Council		
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the co	mmittee OR b. \square Deck either a or b. Use only for the	ebts and obligations owed to	or forgiven by the co	ommittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation	7. Date and amount of		
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	(Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	each payment	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:	4. Type: candidate loan to committee			
Mike Anglin	4. Type:	07/13/07 \$ 1,500.00		
549 S First St	5. Date Debt Was Incurred;	07/27/07 _{\$} 1,200.00		
Ann Arbor MI 48103	06/17/07	11/26/07 _{\$} 120.00		
	6. Original Amount of Debt:		\$ 2950	\$_50
	\$_3000	\$	_	[]ronon m.
If bank loan, name of endorser or guarantor:		\$		FORGIVEN
Debt #2 Corp? Yes		f Amou	unt Endorsed: \$	
Owed to or by:	4. Type: candidate loan to committee	\$		
Mike Anglin 549 S First St	5. Date Debt Was Incurred:	ф.	[
Ann Arbor MI 48103	11/18/07		Ì	
7 441 / WBOL MI 40 103	6. Original Amount of Debt:	<u> </u>	\$	_{\$} 512.81
	\$ 512.81	\$	*	
IZA . A I		<u> </u>	L	FORGIVEN
If bank loan, name of endorser or guarantor:		Amou	unt Endorsed: \$	Ī
Debt #3 Corp? Yes Owed to or by:	4. Type:			
	5. Date Debt Was Incurred:	s		
	or save seed yras incurred.	\$		
	6. Original Amount of Debt:	\$		
·	\$. \$	· §	
	Φ	s	L	FORGIVEN
If bank loan, name of endorser or guarantor:		Amou	int Endamed 6	
		Affloc	int Endorsed: \$	
		Page Subtotal (Ou	tstanding debt)	562.81
(Com	plete on last page of Schedule sho	Council Total of a		562.81
A debt or obligation must be shown on this Schedule is this Campaign Statement or it was forgiven during the	f thorowas an outstandly		or by ng date of "o	nter this total I line 12a "owed "" or line 12b wed to" of the Immary Page
· -5~ ''1				