



**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: 10/24/13 to 11/25/13

1. Committee I.D. Number  
C-2013-026

2. Committee Name  
Sam DeVarti for Council

4. Candidate Last Name DeVarti First Name Samuel M.I. D.R.

4a. Office Sought Including District # or Community Served (If applicable)  
Council Member Ward 3

4b. County of Residence

5. Committee's Mailing Address  
1231 Baldwin ave.  
Ann Arbor MI 48104

Area Code and Phone 734-255-2204

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  
Patricia Garay  
1307 Granger ave  
Ann Arbor MI 48104

Area Code & Phone 734-846-3053

7. Treasurer's Business Address  
1307 Granger  
Ann Arbor MI 48104

Area Code and Phone 734-846-3053

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

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  School  
 Special  Caucus

Date of Election, Convention or Caucus  
11/5/2013

9c.  Annual Statement (\_\_\_\_\_) covers \_\_\_\_ Year

9d.  Amendment to Campaign Statement (Complete Form 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e.  Dissolution of Candidate Committee

Effective Date of Dissolution

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

FILED  
2013 DEC -5 PM 1:51  
LAWRENCE KEEFER  
COUNTY CLERK  
REGISTERED  
WASHTENAW COUNTY, MI

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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 Patricia M Garay Patricia M Garay Date 12-4-13  
Type or Print Name Signature

Candidate Sam DeVarti Sam DeVarti Date 12/4/13  
Type or Print Name Signature



1. Committee I.D. Number C-2013-026

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Sam DeWarti for Council

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>690.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>690.00</u>	(18.) \$ <u>1635.00</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ _____	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>690.00</u>	(20.) \$ <u>1636.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>34.82</u>	(21.) \$ <u>660.22</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>621.27</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>621.27</u>	(23.) \$ <u>1312.69</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>253.68</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>690.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>943.58</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>621.27</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>322.31</u> *	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2013-076  
2. Committee Name Sam Dellanti for Council

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 10/24/13  
Name & Address:  
Kary L. Moss  
2730 Daleview  
Ann Arbor MI 48105

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/26/13  
Name & Address:  
Denise A. Thal  
1519 Granger ave.  
Ann Arbor MI 48104

\$ 25.00 \$ 25.00

5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

Click Here for Memo Itemization

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 10/26/13  
Name & Address:  
Lawrence Bryk.  
1222 Woodlawn  
Ann Arbor MI 48104

\$ 5.00 \$ 5.00

5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

Click Here for Memo Itemization

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/26/13  
Name & Address:  
Diana Pratt  
1612 Granger ave  
Ann Arbor MI 48104

\$ 20.00 \$ 20.00

5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

Click Here for Memo Itemization

Page Subtotal \$100.00

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2013-026

2. Committee Name Sam Delladi for Council

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 10/27/13

Name & Address:  
Gary Boren  
322 E. Washington  
Ann Arbor MI 48104

\$ 60.00 \$ 60.00

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

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

[Click Here for Memo Itemization](#)

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/27/13

Name & Address:  
Martin Tucker  
88 Dunbar Rd  
Palm Beach Gardens FL 33418-6815

\$ 100.00 \$ 100.00

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

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

[Click Here for Memo Itemization](#)

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 10/28/13

Name & Address:  
Pam Kisch  
713 Miner st  
Ann Arbor MI 48103

\$ 80.00 \$ 80.00

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

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

[Click Here for Memo Itemization](#)

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/31/13

Name & Address:  
Ruth Kraut  
1127 Clair Circle  
Ann Arbor MI 48103

\$ 50.00 \$ 50.00

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

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

[Click Here for Memo Itemization](#)

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$290.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_

2. Committee Name \_\_\_\_\_

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 11/25/13

Name & Address:

Sam DeVarti  
1231 Baldwin ave.  
Ann Arbor MI 48104

\$ 300.00 \$ 505.00

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

Occupation Line Cook Employer Northside Grill

Click Here for Memo Itemization

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt \_\_\_\_\_

Name & Address \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

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

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

Click Here for Memo Itemization

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt \_\_\_\_\_

Name & Address \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

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

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

Click Here for Memo Itemization

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt \_\_\_\_\_

Name & Address \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

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

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

Click Here for Memo Itemization

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal

\$ 300.00

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

\$ 690.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED IN-KIND CONTRIBUTIONS**

**SCHEDULE 1-IK**

1. Committee I. D. Number C-2013-026

**CANDIDATE COMMITTEE**

2. Committee Name Sam Dellanti 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 Fair Market Value

8. Cumulative for Election Cycle (Through date in Item 5)

Contribution # 1 PAC Receipt?  Yes

Name & Address:  
Ellen Rabinowitz  
1231 Baldwin ave  
Ann Arbor MI 48104  
If over \$100.00 cumulative, please provide:  
Occupation:  
Employer Name & Business Address:

4.  Endorsement or Guarantee of Bank Loan  
 Goods Donated or Loaned  Services Donated  
 Goods or Services Purchased by Candidate or Others \$ 16.42 \$ 16.42  
 Goods or Services Purchased by Candidate or Others- LOAN

Description Thank you letters

5. Date Of Receipt: 11/13/13

6. Vendor Name & Address:  
Fedex Office  
2800 S. State st.  
Ann Arbor MI 48104

Click Here for Memo Itemization

Fund Raiser Contribution

Contribution # 2 PAC Receipt?  Yes

Name & Address:  
Ellen Rabinowitz  
1231 Baldwin ave  
Ann Arbor MI 48104  
If over \$100.00 cumulative, please provide:  
Occupation:  
Employer Name & Address:

4.  Endorsement or Guarantee of Bank Loan  
 Goods Donated or Loaned  Services Donated  
 Goods or Services Purchased by Candidate or Others \$ 18.40 \$ 34.82  
 Goods or Services Purchased by Candidate or Others- LOAN

Description Stamps for thank you letters

5. Date Of Receipt: 11/14/13

6. Vendor Name & Address:  
Liberty Station  
200 E. Liberty  
Ann Arbor MI 48104

Click 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 Purchased by Candidate or Others- LOAN

Description \_\_\_\_\_

5. Date Of Receipt: \_\_\_\_\_

6. Vendor Name & Address:

Click Here for Memo Itemization

Fund Raiser Contribution

Page Subtotal \$34.82

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) \$34.82

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2013-026

2. Committee Name Sam DeVarti for Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>David DeVarti</u></p> <p>Address <u>1231 Baldwin ave Ann Arbor MI 48104</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Reimbursement for over contribution</u></p> <p><input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>10/30/13</u> Date</p>	<p><u>\$ 225.40</u></p> <p>Click Here for Memo Itemization Type </p>
<p>Expenditure #2</p> <p>Name <u>U of M Credit Union</u></p> <p>Address <u>P.O. Box 7850 Ann Arbor MI 48107</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Paper Statement Fee</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>11/1/13</u> Date</p>	<p><u>\$ 1.00</u></p> <p>Click Here for Memo Itemization Type </p>
<p>Expenditure #3</p> <p>Name <u>Kolossus Printing</u></p> <p>Address <u>1214 S. University Ann Arbor MI 48104</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Payment for printed literature</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>11/8/13</u> Date</p>	<p><u>\$ 94.87</u></p> <p>Click Here for Memo Itemization Type </p>
<p>Expenditure #4</p> <p>Name <u>David DeVarti</u></p> <p>Address <u>1231 Baldwin ave Ann Arbor MI 48104</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Reimbursement for In-kind contribution</u></p> <p><input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>11/25/13</u> Date</p>	<p><u>\$ 300.00</u></p> <p>Click Here for Memo Itemization Type </p>
<p>Expenditure #5</p> <p>Name</p> <p>Address</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: _____</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>_____ Date</p>	<p>\$ _____</p> <p>Click Here for Memo Itemization Type </p>

Subtotal this page \$621.27

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) \$621.27

Enter this total  
on line 8a of  
Summary Page



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

1. Committee I.D. Number C-2013-026  
2. Committee Name Sam DeVarti for Council

This Schedule itemizes:

a.  Debts and obligations owed by or forgiven the committee OR b.  Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: David DeVarti 1231 Baldwin ave Ann Arbor MI 48104	4. Type: <u>Reimbursement</u> 5. <u>Date Debt Was Incurred:</u> <u>9/30/13</u> 6. <u>Original Amount of Debt:</u> <u>\$ 625.40</u>	10/30/13 \$ 225.40 11/27/13 \$ 300.00 _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ 525.40	\$ 100.00 <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	_____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	_____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

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

0  
0

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.