



**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: 4/28/18 to 7/23/18

<p>1. Committee I.D. Number</p> <p>2. Committee Name <u>Committee to Elect Ron Ginyard</u></p>	<p>4. Candidate Last Name <u>Ginyard</u> First Name <u>Ronald</u> M.I. <u>D</u></p> <p>4a. Office Sought/Including District # or Community Served (If applicable) <u>ANN ARBOR City Council Ward 1</u></p> <p>County of Residence <u>Washtenaw</u></p>
<p>5. Committee's Mailing Address <u>448 Brookside Ann Arbor, MI 48105</u></p> <p>Area Code and Phone <u>734-795-5545</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 &amp; Residential Address <u>Ronald Ginyard 448 Brookside Ann Arbor, MI 48105</u></p> <p>Area Code &amp; Phone <u>734-795-5545</u></p>
<p>7. Treasurer's Business Address <u>448 Brookside Ann Arbor, MI. 48105</u></p> <p>Area Code and Phone <u>734-795-5545</u></p>	<p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)</p>

WASHINGTON COUNTY, MI  
 2018 JUN 27 P 4:11 PM  
 REGISTERED TREASURER

<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" type="checkbox"/> Primary</p> <p><input type="checkbox"/> General</p> <p><input type="checkbox"/> Convention</p> <p><input type="checkbox"/> Special</p> <p><input type="checkbox"/> School</p> <p><input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>8/7/2018</u></p>	<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly</p> <p><input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement ( ) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	<p>9e. Dissolution of Candidate Committee</p> <p><input type="checkbox"/> 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>
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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	<u>Ronald Ginyard</u>	Signature	<u>[Signature]</u>	Date	<u>7/27/2018</u>
Candidate	<u>Ronald Ginyard</u>	Signature	<u>[Signature]</u>	Date	<u>7/27/2018</u>



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2018-031  
2. Committee Name Committee to Elect Ron Ginyard

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? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address: <u>ANN BANNISTER</u> <u>612 N. MAIN ANN ARBOR, MI.</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Ad Council Member</u> Employer <u>City of Ann Arbor</u>		Click Here for Memo Itemization	
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? <input type="checkbox"/> YES	4. Date of Receipt <u>6/15/18</u>	
Name & Address: <u>Rich Riolo &amp; Susan Movet</u> <u>704 Brookside</u> <u>Ann Arbor, MI 48105</u>		\$ <u>25.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6/15/18</u>	
Name & Address: <u>Henry &amp; Abbie Root</u> <u>475 Hilldale Ann Arbor</u>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6/15/18</u>	
Name & Address: <u>Angela Brown</u> <u>2043 Delafield Ann Arbor 48105</u>		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 330.00

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-2018-031  
 2. Committee Name Committee to Elect Ron Gumpel

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.

3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 6/15/18  
 Name & Address: Ellen Fischer  
MARIA ASIS  
1620 Pentz Ann Arbor, MI

6. Amount \$108.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$100.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
 Business Address \_\_\_\_\_  
 Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 6/15/18  
 Name & Address: L. & Pat Manley  
Lamont Manley  
2645 Powell  
Ann Arbor, MI 48104

6. Amount \$60.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$100.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
 Business Address \_\_\_\_\_  
 Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt \_\_\_\_\_  
 Name & Address: Ted Reynolds  
351 Hilldale Ann Arbor, MI  
48105

6. Amount \$20.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$20.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
 Business Address \_\_\_\_\_  
 Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 6/13/18  
 Name & Address: Charles Borgsdorf  
Linda Borgsdorf  
409 Argo Dr. Ann Arbor, MI

6. Amount \$250.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$250.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
 Business Address \_\_\_\_\_  
 Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal 430.00

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-2018-031  
 2. Committee Name Committee to Elect Ron Gunnard

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? <input type="checkbox"/> YES 4. Date of Receipt <u>6/15/18</u> Name & Address: <u>Sean &amp; Angela Fitzgerald</u> <u>2030 Delafield Ann Arbor, MI</u>	<u>\$ 20.00</u>	<u>\$ 20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Pre School Provider</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/15/18</u> Name & Address: <u>Jonathan Leving</u> <u>Noga Leving</u> <u>3006 Lexington Dr Ann Arbor, MI</u> <u>48105</u>	<u>\$ 100.00</u>	<u>\$ 20.00</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		<a href="#">Click Here for Memo Itemization</a>
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/15/18</u> Name & Address: <u>Leah Gunn</u> <u>Robert Gunn</u> <u>2115 Nature Court Ann Arbor, MI</u>	<u>\$ 100.00</u>	<u>\$ 100.00</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		<a href="#">Click Here for Memo Itemization</a>
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: <u>Christopher Taylor for Mayor</u> <u>2115 Nature Court #207</u> <u>Ann Arbor, MI 48104</u>	<u>\$ 100.00</u>	<u>\$ 100.00</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		<a href="#">Click Here for Memo Itemization</a>

Page Subtotal 320.00

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-2018-031  
 2. Committee Name Committee to Elect Ron Gwynne

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 7/5/18  
 Name & Address: JUDITH GREENBAUM  
374 HILDALE DR.  
ANN ARBOR, MI. 48105  
 5. If over \$100.00 cumulative, please provide: \$ 100.00 \$ 100.00  
 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 \_\_\_\_\_  
 Name & Address: JOANN F. CAVALETTI & DAVID CAVALETTI  
1428 PONTIAC TRAIL  
ANN ARBOR, MI. 48105  
 5. If over \$100.00 cumulative, please provide: \$ 100<sup>00</sup> \$ 100<sup>00</sup>  
 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 \_\_\_\_\_  
 Name & Address: JOHN HIEFTJE & KATHRYN GOODSON  
1046 BALDWIN  
ANN ARBOR, MI 48104  
 5. If over \$100.00 cumulative, please provide: \$ 100<sup>00</sup> \$ 100<sup>00</sup>  
 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 \_\_\_\_\_  
 Name & Address: HARRY COHEN & JAN COHEN  
3140 W. DOBSON PL  
ANN ARBOR, MI. 48105  
 5. If over \$100.00 cumulative, please provide: \$ 500 \$ 100<sup>00</sup>  
 Occupation RESTAURANTOUR Employer BLACK PEARL  
 Business Address 302 S. MAIN, ANN ARBOR  
 Type of Contribution:  Direct  Loan from a person  Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal 800.00

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-2018-031  
 2. Committee Name Committee to Elect Ron Givens

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)
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3. Contribution #1      PAC Receipt?  YES      4. Date of Receipt \_\_\_\_\_  
 Name & Address:  
Ronald Zapalski  
652 Northside  
Ann Arbor, MI 48105

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

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

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

Type of Contribution:  Direct     Loan from a person     Fund Raiser

\$ <u>100.<sup>00</sup></u>	\$ <u>100</u>
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[Click Here for Memo Itemization](#)

3. Contribution #2      PAC Receipt?  YES      4. Date of Receipt \_\_\_\_\_  
 Name & Address:  
DAVID AND TAMARA HAIG  
476 HILLDALE DRIVE  
ANN ARBOR, MI. 48105

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

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

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

Type of Contribution:  Direct     Loan from a person     Fund Raiser

\$ <u>100.<sup>00</sup></u>	\$ <u>100.<sup>00</sup></u>
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[Click Here for Memo Itemization](#)

3. Contribution #3      PAC Receipt?  YES      4. Date of Receipt \_\_\_\_\_  
 Name & Address:  
SHARON C. HERBERT  
2205 WILDERNESS VIEW  
SANTA FE, NM 87501

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

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

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

Type of Contribution:  Direct     Loan from a person     Fund Raiser

\$ <u>200.<sup>00</sup></u>	\$ <u>200.<sup>00</sup></u>
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[Click Here for Memo Itemization](#)

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:  Direct     Loan from a person     Fund Raiser

\$ <u>400.<sup>00</sup></u>	\$ _____
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[Click Here for Memo Itemization](#)

Page Subtotal	<u>400</u>
Grand Total of All Schedules 1A (Complete on last page of Schedule)	<u>2,555.<sup>00</sup></u>

Enter this total on line 3a of Summary Page.

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2018-031

2. Committee Name Committee to Elect Ron Compton

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 \_\_\_\_\_

Name & Address:  
Edward Sanders  
YVONNE PAPPAS 433 Hilldale  
Ann Arbor 48105

\$ 25.00 \$ 25.00

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 \_\_\_\_\_

Name & Address:  
ANDREAS GAILUS  
LISA DISCH  
441 Hilldale Ann Arbor, MI  
48105

\$ 150.00 \$ 150.00

5. If over \$100.00 cumulative, please provide:  
Occupation Professor Employer U of M

[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:  
DANIEL J. SHORE  
CHARLES WARPENOSKI  
2020 WINDWOOD Ann Arbor  
48105

\$ 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

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

Name & Address:  
Janet Holloway  
701 Brookside  
Ann Arbor, MI 48105

\$ 50.00 \$ 50.00

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

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

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal 275.00  
Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED IN-KIND CONTRIBUTIONS  
SCHEDULE 1-IK**

1. Committee I. D. Number C-2018-031  
2. Committee Name COMMITTEE TO ELECT <sup>RON</sup> GAINYARD

**CANDIDATE COMMITTEE**

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 <b>\$335</b>	8. Cumulative for Election Cycle (Through date in Item 5) <b>\$335</b>
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Contribution # 1 PAC Receipt?  Yes

Name & Address:  
**DAVE HAILA  
476 HILLDALE  
ANN ARBOR, MI.**

If over \$100.00 cumulative, please provide:  
Occupation: **REWIDDELER**

Employer Name & Business Address:  
**HAILA CONSTRUCTION  
476 HILLDALE  
ANN ARBOR, MI.**

Fund Raiser Contribution

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 **FOOD FOR HOUSE PARTY**

5. Date Of Receipt: **6/15/18**

6. Vendor Name & Address:

Click Here for Memo Itemization

\$ 225.00 \$ 225.00

Contribution # 2 PAC Receipt?  Yes

Name & Address:  
**ZACHARY ACKERMAN  
1506 MORTON AVE  
ANN ARBOR, MI.**

If over \$100.00 cumulative, please provide:  
Occupation: **BUSINESS CONSULTANT**

Employer Name & Address:

Fund Raiser Contribution

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 **PRINTING**

5. Date Of Receipt: **6/7/18**

6. Vendor Name & Address:

Click Here for Memo Itemization

\$ 110.00 \$ 110.00

Contribution #3 PAC Receipt?  Yes

Name & Address:

If over \$100.00 cumulative, please provide:  
Occupation:  
Employer Name & Address:

Fund Raiser Contribution

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

Page Subtotal **\$335** **\$335**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) **\$335**

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2018-031  
 2. Committee Name Committee to Elect Ron Gwynard

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>FedX</u> Address <u>2609 Plymouth Rd Ann Arbor, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing Walk Lit</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/13/18</u> Date	<u>\$ 131.71</u>
Expenditure #2 Name <u>FedX</u> Address <u>2609 Plymouth Ann Arbor, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing Walk Lit</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/15/18</u> Date	<u>\$ 66.55</u>
Expenditure #3 Name <u>FedX</u> Address <u>2609 Plymouth Ann Arbor, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing Walk Lit</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/18/18</u> Date	<u>\$ 51.20</u>
Expenditure #4 Name <u>Hess Printing</u> Address <u>201 Elm Wyandotte MI 48192</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Walk Literature</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/24/18</u> Date	<u>\$ 377.36</u>
Expenditure #5 Name <u>Sawicki &amp; Sons</u> Address <u>1521 Lafayette Blvd Detroit, MI</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>6/26/18</u> Date	<u>\$ 628.05</u>

Subtotal this page \$ 1254.87

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-2018-031  
 2. Committee Name Committee to Elect Ron Ginyard

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>NORTHSIDE GRILL</u> Address <u>1015 BROADWAY</u> <u>ANN ARBOR, MI. 48105</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>COMMITTEE</u> <u>BREAKFAST MTG</u> <small>Click Here for Memo Itemization Type</small>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/2/18</u> <small>Date</small>	<u>\$ 18.71</u>
Expenditure #2 Name <u>DAVID MALCOM</u> Address <u>LOTT STREET</u> <u>ANN ARBOR, MI. 48103</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>SIGN DELIVERY</u> <small>Click Here for Memo Itemization Type</small>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/28/18</u> <small>Date</small>	<u>\$ 30<sup>00</sup></u>
Expenditure #3 Name <u>HESS PRINTING</u> Address <u>201 ELM</u> <u>WYNDOTT, MI. 48192</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>MAILING</u> <small>Click Here for Memo Itemization Type</small>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/9/18</u> <small>Date</small>	<u>\$ 307<sup>69</sup></u>
Expenditure #4 Name <u>MICHAEL WILLMAR</u> Address <u>1</u> <u>MILAND, MI.</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>PHOTOGRAPHER</u> <small>Click Here for Memo Itemization Type</small>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/9/18</u> <small>Date</small>	<u>\$ 125<sup>00</sup></u>
Expenditure #5 Name _____ Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____ <small>Click Here for Memo Itemization Type</small>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ <small>Date</small>	\$ _____

Subtotal this page 481.40

Grand Total of all Schedules 1B  
 (Complete on last page of Schedule) \$ 1,736.27

Enter this total  
 on line 8a of  
 Summary Page



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2018-031  
2. Committee Name COMMITTEE TO ELECT RON GINYARD

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>6/15/18</u>	4. Number of Individuals Attending or Participating (whichever is greater). <u>24</u>	5. Type of Fund Raising Activity <u>KICK OFF</u>	6. Address and Name (if any) of the place where the activity was held. <u>DAVE HAIG</u> <u>476 WILLDALE</u> <u>ANN ARBOR, MI</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$ 980.00  
8. Other Receipts —  
9. Gross Receipts (Add lines 7 and 8) 980.00  
10. Total Cost of Event 225.00  
(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-IK), 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.



1. Committee I.D. Number C-2018-031

2. Committee Name Committee to Elect Ron Ginyard

**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>2,555.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>2,555.00</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ _____	(20.) \$ _____
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>335.00</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1,736.27</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>—</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>49.92</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>1,786.19</u>	(23.) \$ _____
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
10. Disbursements		
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>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>2,555.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>2,555.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1,786.19</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>768.81</u>	