



**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.

| | | |
|---|--|---|
| <p>1. Committee I.D. Number C-2017-003</p> <p>2. Committee Name Committee to Elect Anne Bannister</p> <p>5. Committee's Mailing Address 612 North Main Street Ann Arbor, MI 48104 Area Code and Phone 734-945-1639 <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></p> <p>7. Treasurer's Business Address 612 North Main Street Ann Arbor, MI 48104 Area Code and Phone 734-945-1639</p> | <p>3. This Statement covers From: 7/24/17 to 8/28/17</p> <p>4. Candidate Last Name Bannister First Name Anne M.I. _____</p> <p>4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local Ann Arbor City Council Member - Ward One</p> <p>4b. County of Residence WASHTENAW</p> <p>6. Treasurer's Name & Residential Address Anne Bannister 612 North Main Street Ann Arbor, MI 48104 Area Code & Phone 734-945-1639</p> <p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Area Code and Phone _____</p> | |
| <p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus August 8, 2017</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. <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. <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 lates 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> |
| <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> | | |
| <p>Current Treasurer or Designated Record keeper Anne Bannister Type or Print Name</p> | | <p><i>Anne Bannister</i> Signature</p> <p>Date 09/07/17</p> |
| <p>Candidate Anne Bannister Type or Print Name</p> | | <p><i>Anne Bannister</i> Signature</p> <p>Date 09/07/17</p> |

FILED
 COUNTY OF WASHTENAW
 2017 SEP 17 P 4:45
 CLERK OF COUNTY REGISTER



C-2017-003

1. Committee I.D. Number _____

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Anne Bannister

| RECEIPTS | Column I This Period | Column II Cumulative this election cycle |
|--|--------------------------------|---|
| 3. Contributions | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ <u>650.00</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>650.00</u> | (18.) \$ <u>7,325.00</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ _____ | (19.) \$ _____ |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>650.00</u> | (20.) \$ <u>7,325.00</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>--0--</u> | (21.) \$ <u>365.00</u> |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ _____ | (22.) \$ _____ |
| EXPENDITURES | | |
| 8. Expenditures | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ <u>2,572.01</u> | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ <u>1,008.80</u> | |
| c. Unitemized (less than \$50.01 each - no Schedule) | (8c.) \$ _____ | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ <u>3,580.81</u> | (23.) \$ <u>6,550.36</u> |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | |
| 10. Disbursements | | |
| a. Itemized (Schedule 1C, Column 6) | (10a.) \$ _____ | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ _____ | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) | (11.) \$ _____ | (24.) \$ _____ |
| DEBTS AND OBLIGATIONS | | |
| 12. Debts and Obligations | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ _____ | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ _____ | |
| BALANCE STATEMENT | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ <u>3,705.45</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>650.00</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ <u>4,355.45</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ <u>3,580.81</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ <u>774.64</u> * | |



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C--2017--003

1. Committee I.D. Number

Committee To Elect Anne Bannister

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 <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>07/24/17</u> Name & Address: Bonnewit, Marcel 3653 Highlander Way East Ann Arbor, MI <u>48108</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 50.00 \$ _____ | \$ _____ Click Here for Memo Itemization |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/24/17</u> Name & Address: Rogow, Nina and Gary 1274 Bird Road Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 25.00 \$ _____ | \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/27/17</u> Name & Address: Onder, Jan 2671 Appleway Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 100.00 \$ _____ | \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/27/17</u> Name & Address: Valacak, Paul 1816 Timber Trail Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 50.00 \$ _____ | \$ _____ Click Here for Memo Itemization |

Page Subtotal **225.00**

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--2017--003
2. Committee Name Committee To Elect Anne Bannister

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 07/29/17
Name & Address:

Potts, Ethel K.
1014 Elder Blvd.
Ann Arbor, MI 48103

\$ 50.00 \$ 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 07/31/17
Name & Address

Van Appledorn, Suzanne
2960 Partridge Drive
Ann Arbor, MI 48103

\$ 25.00 \$ _____

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 08/03/17
Name & Address:

Pedrick, Linda
654 Greenhills Drive
Ann Arbor, MI 48105

\$ 50.00 \$ _____

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 08/08/17
Name & Address

Perry, Susan
1708 Fair Street
Ann Arbor, MI 48103

\$ 300.00 \$ 300.00

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

[Click Here for Memo Itemization](#)

Occupation Real Estate Broker Employer self-employed

Business Address 1708 Fair Street, Ann Arbor, MI 48103

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 425.00

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

650.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

C-2017-003

1. Committee I. D. Number _____
2. Committee Name Committee to Elect Anne Bannister

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|--|---|-------------------------|--------------------|
| Expenditure #1 Name Paypal Address 2211 North First Street San Jose, CA 95131 <input type="checkbox"/> Fund Raiser | Purpose: <u>Fees for using Paypal</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/27/11</u> Date | \$ <u>6.70</u> |
| Expenditure #2 Name Kathy Griswold Address 3565 Foxhunt Drive Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser | Purpose: <u>Reimburse postcard mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>7/28/17</u> Date | \$ <u>1,053.21</u> |
| Expenditure #3 Name Kathy Griswold Address 3565 Foxhunt Drive Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser | Purpose: <u>Reimburse postcard printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>7/28/17</u> Date | \$ <u>832.10</u> |
| Expenditure #4 Name Kathy Griswold Address 3565 Foxhunt Drive Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser | Purpose: <u>Reimburse stamps</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>680.00</u> |
| Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |

Subtotal this page **2,572.01**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **2,572.01**

Enter this total
on line 8a of
Summary Page



EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES

SCHEDULE 1 B - G

CANDIDATE COMMITTEE

C-2017--003

1. Committee I.D. Number

Committee to Elect Anne

2. Committee Name

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The -Vote activity in Item 4f. ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

| 3. Name and address of person or vendor to whom the expenditure was made | 4. Type of Activity | 5. Date | 6. Amount |
|--|---|------------------------|------------------|
| <p>Expenditure #1 Name & Address: TAA Publishing 6689 Orchard Lake Road, Suite 307 West Bloomfield, MI 48322</p> <p>For Activity Type b-f, check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p> | <p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): <u>Design Services for postcard</u> <small>Click Here for Memo Itemization Type</small></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p> | <p>8/5/17 Date</p> | <p>\$ 500.00</p> |
| <p>Expenditure #2 Name & Address: Kathy Griswold 3565 Foxhunt Drive Ann Arbor, MI 48105</p> <p>For Activity Type b-f, check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p> | <p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): <u>Reimburse postcard printing</u> <small>Memo Itemization Below</small></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p> | <p>8/3/17 Date</p> | <p>\$ 508.80</p> |
| <p>Expenditure #3 Name & Address:</p> <p>For Activity Type b-f, check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p> | <p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify):</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> |

Subtotal this page 1,008.80

Grand Total of all Schedules 1B-G) (Complete on last page of Schedule 1,008.80

Enter total on Line 8b Summary Page