



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.

<p>1. Committee I.D. Number C-2011-039</p> <p>2. Committee Name JANE LUMM FOR City Council</p> <p>3. This Statement covers From: 8/19/11 to 10/23/11</p>		<p>4. Candidate Last Name LUMM First Name JANE M.I. B</p> <p>4a. Office Sought Including District # or Community Served (If applicable) ANN ARBOR CITY COUNCIL WARD #2</p> <p>4b. County of Residence WASHTENAW</p>							
<p>5. Committee's Mailing Address 2921 Overridge Drive Ann Arbor, MI 48104</p> <p>Area Code and Phone 734-677-4010</p> <p><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>6. Treasurer's Name & Residential Address STEPHEN B. DOBSON 3350 CEDARS ROAD ANN ARBOR MI 48105</p> <p>Area Code & Phone 734-604-0501</p>							
<p>7. Treasurer's Business Address N/A</p> <p>Area Code and Phone _____</p>		<p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) MONIQUE WARDNER 2921 Overridge Dr. Ann Arbor, MI 48104</p> <p>Area Code and Phone 734-368-4859</p>							
<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> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Primary</td> <td><input checked="" type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Convention</td> <td><input type="checkbox"/> School</td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Caucus</td> </tr> </table> <p>Date of Election, Convention or Caucus Nov. 8, 2011</p>				<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Convention	<input type="checkbox"/> School	<input type="checkbox"/> Special	<input type="checkbox"/> Caucus
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General								
<input type="checkbox"/> Convention	<input type="checkbox"/> School								
<input type="checkbox"/> Special	<input type="checkbox"/> Caucus								
<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"/> Dissolution of Candidate Committee</p> <p>Effective Date of Dissolution _____</p> <p><small>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.</small></p> <p><small>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</small></p>									
<p><small>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.</small></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 Stephen B. Dobson</p> <p>Type or Print Name</p>		<p>Step B Dobson</p> <p>Signature</p>							
<p>Date 10/28/11</p>		<p>Candidate JANE B. LUMM</p> <p>Type or Print Name</p>							
<p>JANE B. LUMM</p> <p>Signature</p>		<p>Date 10/28/11</p>							



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number

C-2011-039

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name

JANE LUMM FOR CITY COUNCIL

RECEIPTS

Column I
This Period

Column II
Cumulative this election cycle

3. Contributions

- a. Itemized (Schedule 1A - Column 6)
b. Unitemized (less than \$20.01 each - no Schedule)
c. Subtotal of "Contributions"

(3a.) \$ 18,950

(3b.) \$ NOT APPLICABLE

(3c.) \$ 18,950

(18.) \$ 18,950

4. Other Receipts (Schedule 1A -1, Column 6)

(4.) \$ -

(19.) \$ -

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

(5.) \$ 18,950

(20.) \$ 18,950

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$ -

(21.) \$ -

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$ -

(22.) \$ -

EXPENDITURES

8. Expenditures

- a. Itemized (Schedule 1B, Column 6)
b. Itemized Get-Out-the-Vote (Schedule 1B-G)
c. Unitemized (less than \$50.01 each - no Schedule)

(8a.) \$ 11,696

(8b.) \$ -

(8c.) \$ -

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)

(9.) \$ 11,696

(23.) \$ 11,696

INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)

10. Disbursements

- a. Itemized (Schedule 1C, Column 6)
b. Unitemized (less than \$50.01 each - no Schedule)

(10a.) \$ -

(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)
b. Owed to the Committee (Schedule 1E)

(12a.) \$ -

(12b.) \$ -

BALANCE STATEMENT

13. Ending Balance of last report filed
(Enter zero if no previous reports have been filed.)
14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)
15. SUBTOTAL Add lines 13 and 14
16. Amount expended during reporting period
(Add lines 9 and 11)
17. ENDING BALANCE
(Subtract line 16 from line 15)

(13.) \$ -

(14.) + \$ 18,950

(15.) = \$ 18,950

(16.) - \$ 11,696

(17.) \$ 7,254 *



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM FOR CITY 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? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>CAMPBELL, BARBARA K.</u> <u>309 S. DEVENA BLVD</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>N/A (Not Employed)</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>SHELDON, INGRID B.</u> <u>1416 FOLKSTONE CT.</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>FLOYD, JOHN C.</u> <u>519 SUNSET RD</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA / FINANCIAL ADVISOR</u> Employer <u>SELF EMPLOYED ACCOUNTANT</u>		Click Here for Memo Itemization	
Business Address <u>ANN ARBOR</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>BORQUE, DEBRA</u> <u>1615 KEARNEY RD</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RESEARCH ADMIN.</u> Employer <u>UNIV. OF MICHIGAN</u>		Click Here for Memo Itemization	
Business Address <u>426 THOMPSON ST. ANN ARBOR</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

800

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMMAI City 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 <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>10/9/11</u>		
Name & Address: <u>SOERGE, RODNEY A.</u> <u>1040 GREENHILLS DR.</u> <u>ANN ARBOR, MI 48105</u>				\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:				Click Here for Memo Itemization	
Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>10/9/11</u>		
Name & Address: <u>KREHBIEL, DAVID E.</u> <u>2940 PROVENANCE DR.</u> <u>ANN ARBOR, MI 48104</u>				\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:				Click Here for Memo Itemization	
Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>10/9/11</u>		
Name & Address: <u>HEUTSCHEL, KATHRYN J.</u> <u>2203 MCLAROSE</u> <u>ANN ARBOR, MI 48104</u>				\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:				Click Here for Memo Itemization	
Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>10/9/11</u>		
Name & Address: <u>MITCHELL, RITA L.</u> <u>621 5th STREET</u> <u>ANN ARBOR, MI 48103</u>				\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:				Click Here for Memo Itemization	
Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					

Page Subtotal

300

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMAN For City 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? <input type="checkbox"/> YES	4. Date of Receipt <u>9/10/11</u>	
Name & Address: <u>CONNELLAN, S.S.</u> <u>3125 GEDDES AVE.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/11</u>	
Name & Address: <u>MAASEN, BEIGITTE</u> <u>1178 HEATNEWAY</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>TURCOTTE, CLAIRE L.</u> <u>1 REGENT DRIVE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>75</u>	\$ <u>75</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		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/2/11</u>	
Name & Address: <u>STETZ, JOHN</u> <u>3444 E. HURON RIVER DR.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER - HR</u> Employer <u>FORD MOTOR CO.</u> Business Address <u>DEARBORN, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

325

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

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Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUNN for City 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? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>WARDNER, MONIQUE C.</u> <u>2921 OVERMIDGE DR.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>N/A (Not Employed)</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>CARILL, DAVID P.</u> <u>1418 BROADWAY ST.</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>SCHULZE, AKEEN M.</u> <u>1956 BAULEND DR.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/11</u>	
Name & Address: <u>ECKSTEIN, PETER C.</u> <u>2551 LONDONDERRY RD.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

450

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

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: LEWIS, CAROLYN D. 2250 GLENDALE RD. ANN ARBOR, MI 48104		10/10/11	
5. If over \$100.00 cumulative, please provide:		\$ 100	\$ 100
Occupation _____ Employer _____		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	
Name & Address: WINKELMAN, SARA JANE 3050 FOX CROFT ANN ARBOR, MI 48104		10/8/11	
5. If over \$100.00 cumulative, please provide:		\$ 25	\$ 25
Occupation _____ Employer _____		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 #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: DAILEY, ROBERT M. 1523 EDENBOROUGH ANN ARBOR, MI 48104		10/10/11	
5. If over \$100.00 cumulative, please provide:		\$ 20	\$ 20
Occupation _____ Employer _____		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 #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: MUNDUS, WILLIAM 11 REGENT DRIVE ANN ARBOR, MI 48104		10/8/11	
5. If over \$100.00 cumulative, please provide:		\$ 50	\$ 50
Occupation _____ Employer _____		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			

Page Subtotal

195

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/11</u>	
Name & Address: <u>BOEIS, KATHERYN A.</u> <u>P.O. Box 8117</u> <u>Ann Arbor, MI 48107</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/7/11</u>	
Name & Address: <u>DELANCEY, BARBARA L.</u> <u>2111 Belmont Rd.</u> <u>Ann Arbor, MI 48104</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/7/11</u>	
Name & Address: <u>DARCA, MICHAEL</u> <u>2225 DEVONSHIRE RD</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/8/11</u>	
Name & Address: <u>POWELL, SUZANNE</u> <u>8 Rutven Place</u> <u>Ann Arbor, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

225

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/8/11</u>	
Name & Address: <u>RICHART, BETTY</u> <u>2210 MILL STREET</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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>10/8/11</u>	
Name & Address: <u>MOSS, CRUISE W. (TRUST)</u> <u>2205 MELROSE AVE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/8/11</u>	
Name & Address: <u>KOZMA, ADAM</u> <u>2996 Appleway</u> <u>Ann Arbor, MI 48104</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/11</u>	
Name & Address: <u>SCHULTE, JEROME P.</u> <u>3334 YELLOWSTONE DR</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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			

Page Subtotal

300

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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 <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>10/8/11</u>	
Name & Address: <u>ALUSE, MARTHA R.</u> <u>1821 SHERIDAN</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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>10/9/11</u>	
Name & Address: <u>FERNANDINO, JANETTE</u> <u>276 INDIAN RIVER PLACE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/7/11</u>	
Name & Address: <u>EDSALL, THOMAS A.</u> <u>2152 GEORGETOWN BLVD.</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/8/11</u>	
Name & Address: <u>DAVIS, WILLIAM J.</u> <u>264 BARTON SHORE DR.</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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			

Page Subtotal

375

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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 <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>10/10/11</u>		
Name & Address: CONLIN, LAVERA E. 2215 DEVONSHIRE RD. ANN ARBOR, MI 48104			\$ <u>100</u>	\$ <u>100</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			Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/11</u>		
Name & Address: BHATIA, INDERPAL S. 2555 DEVONSHIRE SP. ANN ARBOR, MI 48104			\$ <u>50</u>	\$ <u>50</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			Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/6/11</u>		
Name & Address: HOOD, E. EDWARD 1980 STONEBRIDGE DR. North ANN ARBOR, MI 48106			\$ <u>100</u>	\$ <u>100</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			Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/7/11</u>		
Name & Address: ROBERTSON, WILLIAM 1511 GRANBARK AVE ANN ARBOR, MI 48104			\$ <u>100</u>	\$ <u>100</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			Click Here for Memo Itemization	

Page Subtotal

350

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMAN FOR CITY 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

10/10/11

Name & Address:

BREWER, NANCY
3460 E. HURON RIVER DR.
ANN ARBOR, MI 48104

\$ 100

\$ 100

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

10/10/11

Name & Address

GARTHWAITE, PENALTY A.
5118 ISLAND SHORE DR.
LANSING, MI 48143

\$ 100

\$ 100

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

10/8/11

Name & Address:

AMONSEN, EDWIN J.
3043 OVERIDGE DR
ANN ARBOR, MI 48104

\$ 100

\$ 100

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

10/7/11

Name & Address

FOSTER, TERRY M.
1207 ARINGTON BLVD
ANN ARBOR, MI 48104

\$ 50

\$ 50

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

350

Grand Total of All Schedules 1A
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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM FOR CITY 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 <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>10/8/11</u>	
Name & Address: <u>MUSKOVITZ, JOAN</u> <u>2101 WEEDSIDE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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>10/7/11</u>	
Name & Address: <u>NEWCOMB, WILLIAM K.</u> <u>17 HEATHERIDGE ST</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/7/11</u>	
Name & Address: <u>CERNY, PATTI B.</u> <u>2800 FAIRLANE DR.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/8/11</u>	
Name & Address: <u>AFIFI, SHERIF S.</u> <u>2446 ADAMS CIR.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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			

Page Subtotal

350

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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 <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>10/7/11</u>	
Name & Address: <u>MUNTER, JEWEL F.</u> <u>123 LAURIN DR.</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/7/11</u>	
Name & Address: <u>VEIGEL, JACQUELYN M.</u> <u>3000 GLAZIER WAY, Apt 360</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/5/11</u>	
Name & Address: DEERBROOK <u>DEERBROOK, MARK C</u> <u>1527 STONEHAVEN RD</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHYSICIAN</u> Employer <u>PARTNERS IN MEDICINE</u> Business Address <u>2200 GREEN RD. ANN ARBOR</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/3/11</u>	
Name & Address: <u>STAPLES, WILLIAM R.</u> <u>5 RIDGEMORE DR</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	

Page Subtotal

450

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

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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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

10/5/11

Name & Address:

MATTHEWS, JUDITH A
4926 SAINT ANDREWS COURT
ANN ARBOR, MI 48106

\$ 25

\$ 25

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

10/4/11

Name & Address

BUNCHART, KENT
701 WESLEY
ANN ARBOR MI 48103

\$ 50

\$ 50

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

10/4/11

Name & Address:

CRESS, CONSTANCE J TRUST
1958 BOULDER DR
ANN ARBOR, MI 48104

\$ 100

\$ 100

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

10/4/11

Name & Address

COCHRANE, MARIE L. LIVING TRUST
1530 EDINBOROUGH
ANN ARBOR, MI 48104

\$ 100

\$ 100

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

275

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-2011-039
2. Committee Name JANE LUMM For City 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 <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>10/3/11</u> Name & Address: <u>LONG, PETER AND EISENSTADT, PEG</u> <u>1993 STONEBROOK DR. N</u> <u>ANN ARBOR, MI 48106</u>	\$ <u>50</u> \$ <u>50</u> Click Here for Memo Itemization		
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			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/11</u> Name & Address: <u>SKUPSKI, JAMES N AND WIDZINSKI, DIANNE</u> <u>2940 DEVONSHIRE RD</u> <u>ANN ARBOR, MI 48104</u>	\$ <u>250</u> \$ <u>250</u> Click Here for Memo Itemization		
5. If over \$100.00 cumulative, please provide: (DIANNE) Occupation <u>MANAGER</u> Employer <u>UNIV. OF MICHIGAN</u> <u>SCHOOL OF MUSIC</u> Business Address <u>ANN ARBOR</u> Type of Contribution: <input checked="" 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>10/3/11</u> Name & Address: <u>SPOSITO, JOHNG.</u> <u>2230 CHAUCER DR.</u> <u>ANN ARBOR, MI 48103</u>	\$ <u>200</u> \$ <u>200</u> Click Here for Memo Itemization		
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" 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>10/5/11</u> Name & Address: <u>DONNELLAN, ROBERT J.</u> <u>1934 Boulder DR.</u> <u>ANN ARBOR, MI 48104</u>	\$ <u>100</u> \$ <u>100</u> Click Here for Memo Itemization		
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			

Page Subtotal

600

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMI FOR CITY 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

10/5/11

Name & Address:

VAUGHAN, CHRISTOPHER C.
2836 BIRACLIFF ST.
ANN ARBOR, MI 48105

\$ 50

\$ 50

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

10/5/11

Name & Address:

CARLISLE, BARBARA K.
2935 EXMOOR RD
ANN ARBOR, MI 48104

\$ 50

\$ 50

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

10/6/11

Name & Address:

HEIKKINEN, PRUDENCE F.
1914 WAYNE ST
ANN ARBOR, MI 48104

\$ 100

\$ 100

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

10/4/11

Name & Address:

COOPER, HOWARD J. TRUST
2465 LONDONDERRY RD
ANN ARBOR, MI 48104

\$ 200

\$ 200

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

Occupation PRINCIPAL Employer AUTO DEALERSHIPS

Business Address ANN ARBOR AREA

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal

400

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMAN For City 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 <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>10/4/11</u>	
Name & Address: <u>NELSON, STEWART</u> <u>2975 NICKORY LANE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED AIRLINE PILOT</u> Employer <u>N/A</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>10/6/11</u>	
Name & Address: <u>PETERSON, DONALD C.</u> <u>2725 DENVERSHIRE RD</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/4/11</u>	
Name & Address: <u>HALLER, DEBORAH A.</u> <u>2108 COPLEY AVE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>40</u>	\$ <u>40</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/4/11</u>	
Name & Address: <u>RENICKAL, KATHRYN A TRUST</u> <u>2154 S. SEVENTH ST.</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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			

Page Subtotal 390

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name Jane Luman For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>HURWITZ, SUSAN S.</u> <u>1520 CAMBRIDGE</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/3/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>WHITE, Nancy C.</u> <u>1603 GRANBER AVE</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/11</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>WHITE, JAMES J. AND NANCY C.</u> <u>1603 GRANBER</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/11</u>	\$ <u>100</u>	\$ <u>00</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		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>CHANDLER, SUSAN E.</u> <u>2211 DEVONSHIRE RD</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	

Page Subtotal

450

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

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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMIN FOR CITY 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 <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>10/6/11</u>	
Name & Address: <u>FINIK, PATRICIA S TTEE</u> <u>1629 SHEELAN</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</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>10/3/11</u>	
Name & Address: <u>BARNETT, MARY RINNE</u> <u>1 RUTHVEN PLACE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/4/11</u>	
Name & Address: <u>BARNETT, GLYNIS D.</u> <u>1 RUTHVEN PLACE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/6/11</u>	
Name & Address: <u>RIDHA, SOPHIA</u> <u>2038 S. SEVENTH ST</u> <u>ANN ARBOR MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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			

Page Subtotal

350

Grand Total of All Schedules 1A
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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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 <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>10/4/11</u>	
Name & Address: <u>REINHART, CHARLES R REVOCABLE TRUST</u> <u>2200 GREEN RD, SUITE E - PERSONAL</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/3/11</u>	
Name & Address: <u>JERNIGAN, GAREY FERDINAND</u> <u>2700 GLADSTONE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/6/11</u>	
Name & Address: <u>BEWATER, RALPH H.</u> <u>1200 BATHART RD. APT 553</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>25</u>	\$ <u>25</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		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/4/11</u>	
Name & Address: <u>BEUCHE, DEBORAH M</u> <u>1063 YOUNG PL.</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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375

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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

10/5/11

Name & Address:

ENGELBERT, DAVID E.
715 BAYLAW CT
ANN ARBOR, MI 48105

\$ 50

\$ 50

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt

10/6/11

Name & Address

BACHACH, BARBARA J.
3989 PENBERTON DR.
ANN ARBOR, MI 48105

\$ 100

\$ 100

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt

10/4/11

Name & Address:

PORTER, RICHARD C.
1012 SCOTT PLACE
ANN ARBOR, MI 48105

\$ 50

\$ 50

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt

10/5/11

Name & Address

BRATTON, ROGER R.
3226 EDGEWOOD DR.
ANN ARBOR, MI 48104

\$ 50

\$ 50

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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250

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANIS LUNN For City 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 <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>10/4/11</u>	
Name & Address: <u>DEIUNGER, JACOB A.</u> <u>3063 OVERHILL DR.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/3/11</u>	
Name & Address: <u>NACE, BILL</u> <u>1216 LORNALESIDE DR.</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/5/11</u>	
Name & Address: <u>EDERBAEN, BARBARA C.</u> <u>1509 NORMANDY</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>N/A</u> Employer <u>N/A (NOT EMPLOYED)</u>			
Business Address _____			
Type of Contribution: <input checked="" 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>10/3/11</u>	
Name & Address: <u>HAGERTY, LAURENCE J.</u> <u>2972 NEARNEYWAY</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>PRESIDENT</u> Employer <u>MEAPRUS INC.</u>			
Business Address <u>176 FEDERAL ST. BOSTON, MASS 02110</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 550

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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

10/4/11

Name & Address:

COUYOUNJIAN, KARL
2137 MELROSE
ANN ARBOR, MI 48104

\$ 100

\$ 100

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt

10/4/11

Name & Address

MILLER, STEPHEN S.
2412 GEORGETOWN BLVD.
ANN ARBOR, MI 48105

\$ 50

\$ 50

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt

10/3/11

Name & Address:

KARAM, ABE
5261 VILLAGE RD
SAGINAW, MI 48176

\$ 100

\$ 100

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt

10/4/11

Name & Address

RESSLER, MARGARET J TTEE
2960 HICKORY LANE
ANN ARBOR, MI 48104

\$ 100

\$ 100

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

350

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LOMAN For City 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 <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>10/5/11</u>	
Name & Address: <u>BOHRA, ARNO C.</u> <u>755 PATRICIA AVE</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/6/11</u>	
Name & Address: <u>MCKENNEY, CHRIS L.</u> <u>350 S. MAIN ST STE 400</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>9/5/11</u>	
Name & Address: <u>SNELL, FREDERICK</u> <u>5599 GREAT HAWK CIRCLE</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/6/11</u>	
Name & Address: <u>HANNAWAY, MARY A TRUST</u> <u>1407 WAREFIELD AVE</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

300

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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

10/5/11

Name & Address:

KENNEY, DONALD H.
2204 APPLEWOOD CT.
ANN ARBOR, MI 48103

\$ 25 \$ 25

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt

10/4/11

Name & Address

DEBBACK, JOHANN
317 ROCK CREEK CT.
ANN ARBOR, MI 48104

\$ 100 \$ 100

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES

4. Date of Receipt

10/5/11

Name & Address:

FINGARLE, MARK M.
3131 LAKE HAVEN DR
ANN ARBOR, MI 48105

\$ 50 \$ 50

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES

4. Date of Receipt

10/5/11

Name & Address

SIMON, FRAUKE
3112 OVENIDGE DR.
ANN ARBOR, MI 48104

\$ 50 \$ 50

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

225

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANIS LUMAN FOR CITY 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 <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>10/7/11</u>	
Name & Address: <u>SIDNEY, KAREN M.</u> <u>100 LONGMAN</u> <u>ANN ARBOR MI 48103</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/6/11</u>	
Name & Address: <u>DETTER, RAYMOND A.</u> <u>120 N. DIVISION, Apt 1</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/7/11</u>	
Name & Address: <u>JOHANSEN, ELMER L</u> <u>2630 MANCHESTER RD.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>RETIRED</u> Employer <u>N/A</u>			
Business Address _____			
Type of Contribution: <input checked="" 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>10/3/11</u>	
Name & Address: <u>WILKES, WENDY L.</u> <u>2840 QUERRIDGE DR.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

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Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JAMES LUMM For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>ABBOTT, PATRICIA C.</u> <u>2124 RUMBLEMEDE BLVD</u> <u>AA, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/5/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>SCHWITT-GREECH, SUSAN E.</u> <u>3075 MOUNTAIN VALLEY</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/6/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>BLAKE, KATHY N C.</u> <u>1207 BROOKLYN AVE</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/4/11</u>	\$ <u>25</u>	\$ <u>25</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		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>POLLOCK, JAMES K.</u> <u>3025 FAIRLANE ST.</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/5/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	

Page Subtotal

225

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>WHITE, DOUGLAS J.</u> <u>2846 Provincial</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/6/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>NEARY, JANET L.</u> <u>845 ARLINGTON</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/6/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>GOLDSMITH, ALAN</u> <u>2280 AMESBURY DR</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/8/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>LARSON, MYRA</u> <u>3575 E. HUDON RIVER DR.</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/6/11</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

500

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

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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name Jane Lunn For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>BLACK, HERBERT R.</u> <u>2411 SHANNONDALE</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/3/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>FINGERLE, CLARE</u> <u>1966 BOULDER DR.</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/6/11</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>STENUGOLD, FRED</u> <u>3410 ANDOVER RD</u> <u>ANN ARBOR, MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/6/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>RILEY, LOLA J.</u> <u>1310 FOLKSTONE CT.</u> <u>ANN ARBOR, MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/7/11</u>	\$ <u>20</u>	\$ <u>20</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		Click Here for Memo Itemization	

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420

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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 <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: GRAY, JERRY M. 3080 HUNTING VALLEY DR ANN ARBOR, MI 48104		10/8/11	
5. If over \$100.00 cumulative, please provide:		\$ 25	\$ 25
Occupation _____ Employer _____		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	
Name & Address: DEEM, MARIE E. 1024 GREENHILLS DR. ANN ARBOR, MI 48105		10/7/11	
5. If over \$100.00 cumulative, please provide:		\$ 50	\$ 50
Occupation _____ Employer _____		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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: ARMENYAKOVA, VIVIANNE N. 920 VESPER RD ANN ARBOR, MI 48103		10/6/11	
5. If over \$100.00 cumulative, please provide:		\$ 50	\$ 50
Occupation _____ Employer _____		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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: DOBSON, MARY H. 4001 GLACIER HILLS DR APT 313 ANN ARBOR, MI 48105		10/8/11	
5. If over \$100.00 cumulative, please provide:		\$ 200	\$ 200
Occupation <u>RETIRED</u> Employer <u>N/A</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			

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325

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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? <input type="checkbox"/> YES	4. Date of Receipt <u>10/8/11</u>	
Name & Address: <u>HADLER, RICHARD A. TRUST</u> <u>2121 Greenview</u> <u>Ann Arbor, MI 48103</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/6/11</u>	
Name & Address: <u>WOOD, PAMELA S.</u> <u>1375 BURGUNDY RD</u> <u>Ann Arbor, MI 48105</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/6/11</u>	
Name & Address: <u>BRYANT, BARBARA E.</u> <u>1505 SHELDON DR.</u> <u>Ann Arbor, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/5/11</u>	
Name & Address: <u>DOBSON, STEPHEN B.</u> <u>3350 CEDARS</u> <u>Ann Arbor, MI 48105</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>RETIRED</u> Employer <u>N/A</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

450

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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? <input type="checkbox"/> YES	4. Date of Receipt <u>10/1/11</u>	
Name & Address: <u>POTTS, ETHEL K.</u> <u>1014 ELORE BLVD</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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>10/3/11</u>	
Name & Address: <u>LUMM, JOHN AND JANE</u> <u>3075 OVERIDGE DRIVE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>1,000</u>	\$ <u>1,000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FINANCE MANAGER</u> Employer <u>EASTERN MICHIGAN UNIV.</u>		Click Here for Memo Itemization	
Business Address <u>YPSILANTI, MI</u>			
Type of Contribution: <input checked="" 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>9/26/11</u>	
Name & Address: <u>EDWARDS, ANN A.</u> <u>4066 GLACIER HILLS CIR.</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</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 #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/15/11</u>	
Name & Address: <u>SHAFERAN, EDWARD A. TTEE</u> <u>209 S. FOURTH AVE., STE 1C</u> <u>ANN ARBOR,</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRINCIPAL</u> Employer <u>SHAFERAN COMPANIES (REAL ESTATE)</u>		Click Here for Memo Itemization	
Business Address <u>ANN ARBOR</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

1,730

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUNN For City 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 <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>8/14/11</u>	
Name & Address: <u>CASSEDAUM, JANET</u> <u>4 HEATHERIDGE ST.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>9/5/11</u>	
Name & Address: <u>OCHOTNY, MARCIA A.</u> <u>3162 Birchwood Ct</u> <u>Ann Arbor, MI 48105</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>9/6/11</u>	
Name & Address: <u>HARDING, MAUREEN M</u> <u>1720 Sheridan</u> <u>Ann Arbor, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>9/22/11</u>	
Name & Address: <u>MORRIS, LESLIE</u> <u>1023 Young Place</u> <u>Ann Arbor, MI 48105</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>RETIRED</u> Employer <u>N/A</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

400

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name Jane Luman For City 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? <input type="checkbox"/> YES	4. Date of Receipt <u>9/24/11</u>	
Name & Address: <u>SALVETTE, EMILY H.</u> <u>2016 DEVONSHIRE RD</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SECRETARY</u> Employer <u>UNIV. OF MICHIGAN</u> Business Address <u>1415 WASHINGTON HHS ANN ARBOR</u>		Click Here for Memo Itemization	
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>10/14/11</u>	
Name & Address: <u>SETTIMI, PATRICIA G</u> <u>3109 W. DOBSON AVE</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" 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>10/22/11</u>	
Name & Address: <u>WEISMAN, ROBERT O.</u> <u>2961 DEVONSHIRE RD</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" 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>10/21/11</u>	
Name & Address: <u>CARVER, CHARLES A.</u> <u>2008 S. STATE ST. SUITE A</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

500

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM FOR CITY 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? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: STAPLETON, JAMES F. 4484 LAKE FOREST DR. E ANN ARBOR, MI 48108		10/18/11	
5. If over \$100.00 cumulative, please provide:		\$ 150	\$ 150
Occupation <u>PRINCIPAL</u> Employer <u>B+R CONSULTANTS</u>		Click Here for Memo Itemization	
Business Address <u>ANN ARBOR</u>			
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	
Name & Address: GRADWOHL, STEPHEN AND MANN, LISA L 3090 EXMOOR ANN ARBOR, MI 48104		10/18/11	
5. If over \$100.00 cumulative, please provide:		\$ 40	\$ 40
Occupation _____ Employer _____		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 #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: MEASE, NELSON K. 2484 PINECREST AVE ANN ARBOR, MI 48104		10/18/11	
5. If over \$100.00 cumulative, please provide:		\$ 50	\$ 50
Occupation _____ Employer _____		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 #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: CARUSO, VINCENT A. 556 GLENDALE CIR. ANN ARBOR, MI 48103		10/19/11	
5. If over \$100.00 cumulative, please provide:		\$ 35	\$ 35
Occupation _____ Employer _____		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			

Page Subtotal

275

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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 <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>10/17/11</u>	
Name & Address: <u>PETERSON, KENALEYNA K.</u> <u>3069 Overridge</u> <u>Ann Arbor, MI</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/21/11</u>	
Name & Address: <u>MILLER, DIANE C.</u> <u>3991 WARDWOOD</u> <u>Ann Arbor, MI 48105</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/20/11</u>	
Name & Address: <u>ALDRICH, KATHERINE A.</u> <u>1059 YOUNG PLACE</u> <u>Ann Arbor, MI 48105</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/21/11</u>	
Name & Address: <u>BLOOM, MARTHA L.</u> <u>3466 RIVERBEND DR.</u> <u>Ann Arbor, MI 48105</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

275

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMAN For City 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

10/19/11

Name & Address:

THOMSON, WILLIAM J.
874 BEAUFIELD CIRCLE
ANN ARBOR, MI 48104

\$ 100

\$ 100

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

10/17/11

Name & Address

MOMIS, MICHAEL D.
1023 YOUNG PLACE
ANN ARBOR, MI 48105

\$ 100

\$ 100

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

10/16/11

Name & Address:

FREEMAN, DOUGLAS D.
2128 MCLOOSE AVE
ANN ARBOR, MI 48104

\$ 50

\$ 50

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

10/18/11

Name & Address

HOBBS, LYNN L.
3965 RIDGEMAR SQUARE
ANN ARBOR, MI 48105

\$ 100

\$ 100

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

350

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>MERIDITH, ANN R.</u> <u>3985 FENBERTON DR.</u> <u>ANN ARBOR, MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/19/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>REECE, JAMES S.</u> <u>339 Rock Creek Ct.</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/18/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>TIMMER, KENNETH J.</u> <u>2112 ASSET ST.</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/17/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>HOEFLE, MILTON L.</u> <u>1020 BELMONT</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	

Page Subtotal

250

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

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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUNN For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>MAUGH, JUDYTHA R.</u> <u>2158 MELROSE AVE</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/17/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>EEID, JANET R.</u> <u>1070 CHESTNUT</u> <u>ANN ARBOR, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/21/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>LOWE, RICHARD</u> <u>1715 SCIO CHURCH RD.</u> <u>ANN ARBOR, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/11</u>	\$ <u>15</u>	\$ <u>15</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		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>CANHAM-EATON, CLAIKE</u> <u>1665 SHERIDAN DR.</u> <u>ANN ARBOR MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/11</u>	\$ <u>25</u>	\$ <u>25</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		Click Here for Memo Itemization	

Page Subtotal

240

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUNN FOR CITY 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 <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>10/14/11</u>	
Name & Address: <u>DAANE, DIKE AND MARYANN</u> <u>1116 CHESTNUT</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/12/11</u>	
Name & Address: <u>DASCOLA, BOB</u> <u>304 S. STATE ST.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/15/11</u>	
Name & Address: <u>DAVIS, DAVE AND GRETCHEN</u> <u>3510 WINDENHURST CT.</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/14/11</u>	
Name & Address: <u>HILBERT, STU AND BARBARA</u> <u>2200 HIGHLAND RD</u> <u>ANN ARBOR MI 48104</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

100

Grand Total of All Schedules 1A
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Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM FOR CITY COMMISSION

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

10/14/11

Name & Address:

HOFF, DIANNE
1936 Boulder Dr.
Ann Arbor, MI 48104

\$ 25

\$ 25

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

10/14/11

Name & Address

NAGOURNEY, PETER
914 Lincoln Ave
Ann Arbor, MI 48104

\$ 25

\$ 25

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

10/16/11

Name & Address:

RICHARDSON, CLARK S.
215 Brookside Dr
Ann Arbor, MI 48105

\$ 25

\$ 25

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

10/15/11

Name & Address

SCHMEAL, R.B. JOAN
682 Greenhills Dr
Ann Arbor, MI 48105

\$ 25

\$ 25

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

100

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMI FOR CITY 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 <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>10/15/11</u>	
Name & Address: <u>CERVINO, STEPHEN + EMILY</u> <u>2404 VINEWOOD</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/13/11</u>	
Name & Address: <u>DOHLER, DARE + JANET</u> <u>1241 ARLINGTON</u> <u>ANN ARBOR MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/16/11</u>	
Name & Address: <u>FLINGERLE, JOHN + LAUREL</u> <u>1316 IROQUOIS PLACE</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/15/11</u>	
Name & Address: <u>CRIPPONS, BOB + KATHLEEN</u> <u>1235 MOREHEAD CT</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

200

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMAN FOR CITY 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

10/17/11

Name & Address:

HALL, HELEN
2015 ANDERSON AVE
ANN ARBOR, MI 48104

\$ 50

\$ 50

Click Here for Memo Itemization

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

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐

Loan from a person

☐

Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

10/15/11

Name & Address

HAWKINS, NANCY + JAN
1790 ARLINGTON BLVD
ANN ARBOR, MI 48104

\$ 50

\$ 50

Click Here for Memo Itemization

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

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐

Loan from a person

☐

Fund Raiser

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt

10/13/11

Name & Address:

HUNTZICKER, TOM + KAY
1705 MORTON AVE
ANN ARBOR, MI 48104

\$ 50

\$ 50

Click Here for Memo Itemization

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

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐

Loan from a person

☐

Fund Raiser

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt

10/14/11

Name & Address

JENSEN, KENNETH
2150 AMELIA PLACE
AA MI 48104

\$ 50

\$ 50

Click Here for Memo Itemization

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

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐

Loan from a person

☐

Fund Raiser

Page Subtotal

200

Grand Total of All Schedules 1A
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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name Jane Luman For City 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 <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>10/13/11</u>	
Name & Address: <u>LAIXAW, DAVID + MARIE</u> <u>1954 BOULDER DR</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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>10/15/11</u>	
Name & Address: <u>LANDAU, ALICE</u> <u>1335 STARK STRASSE</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/14/11</u>	
Name & Address: <u>LEON, IRV AND ALAN</u> <u>3117 OVERIDGE DR</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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 #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/13/11</u>	
Name & Address: <u>UPTON, BILL AND DUSTY</u> <u>2780 PROVINCIAL DR</u> <u>ANN ARBOR MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		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			

Page Subtotal

200

Grand Total of All Schedules 1A
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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>UPTON, ANNE + HARBERT</u> <u>2000 Dry Street</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>WAX, HARVEY + ROBIN</u> <u>3093 Overridge Dr</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/11</u>	\$ <u>50</u>	\$ <u>50</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		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>BENFORD, HARRY</u> <u>4082 Glenview Hills Dr</u> <u>Ann Arbor, MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>CANNIGAN, TIM AND NOREEN</u> <u>1922 Boulder Dr</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	

Page Subtotal

300

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039

2. Committee Name JAMIE LUNN FOR CITY 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 <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>10/15/11</u>	
Name & Address: <u>Copi, Davis and BARBARA</u> <u>1601 Cambridge Rd</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>10/15/11</u>	
Name & Address: <u>FLOYD, ESTHER M.</u> <u>505 E. NUCLEAR ST APT 702</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/13/11</u>	
Name & Address: <u>GAVIN, ROBERT</u> <u>1385 BURGUNDY</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" 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>10/14/11</u>	
Name & Address: <u>GELMAN, CHARLES + RITA</u> <u>505 E. NUCLEAR ST. APT 805</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

400

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMAN For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>HURDIS, IRVINE AND CHARLES</u> <u>2075 MARSHALL DR</u> <u>ANN ARBOR, MI 48103</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		\$ <u>100</u>	\$ <u>100</u>
3. Contribution #2 Name & Address: <u>KLEIN, TOM AND SALLY</u> <u>3087 OVERIDGE DR</u> <u>ANN ARBOR, MI 48104</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		\$ <u>100</u>	\$ <u>100</u>
3. Contribution #3 Name & Address: <u>LAIRD, JOHN + DEEY</u> <u>3150 HUNTING VALLEY DR</u> <u>ANN ARBOR, MI 48104</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		\$ <u>100</u>	\$ <u>100</u>
3. Contribution #4 Name & Address: <u>MCDONALD, GRIFF AND PAT</u> <u>3906 PENBERTON DR</u> <u>ANN ARBOR, MI 48105</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		\$ <u>100</u>	\$ <u>100</u>

Page Subtotal

400

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>Thompson, Beanie E</u> <u>5196 DONAL CT</u> <u>Ann Arbor, MI 48108</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/16/11</u>	\$ <u>100</u>	\$ <u>100</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		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>BUHR, JAMIE + CHARYL</u> <u>3105 Overridge Dr</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/11</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>J.D. BUHR + CO LLC</u> Business Address <u>Ann Arbor</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Eaton, John</u> <u>1606 Dickerson Dr</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/11</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MARK H. COUSINS, ATTORNEY</u> Business Address <u>26261 EVERMAN STE 110 SOUTHFIELD, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>FITZSIMMONS, JOE + BETT</u> <u>101 N. MAIN ST.</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/11</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

700

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JASE LUMM FOR CITY 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 <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>10/15/11</u>	
Name & Address: <u>READING, STEPHEN + AGNES</u> <u>153 Rindbrook Ave</u> <u>Ann Arbor, MI 48103</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>STEPHEN - President</u> Employer <u>AUTOMOTIVE DESIGN MEMPHIS, TN</u> <u>AGNES - SECRETARIES</u> Business Address <u>411 HURON VIEW ANN ARBOR</u>		Click Here for Memo Itemization	
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>10/15/11</u>	
Name & Address: <u>SAENS, DICK AND NORMA</u> <u>3645 DAREVIEW DR</u> <u>Ann Arbor, MI 48105</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>NUSTEP, INC.</u> Business Address <u>5111 VENTURE DRIVE STE 1 ANN ARBOR</u>		Click Here for Memo Itemization	
Type of Contribution: <input checked="" 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>10/13/11</u>	
Name & Address: <u>VAN NOOSE, RICHARD AND LUCIE</u> <u>111 N. Ashley Street</u> <u>Ann Arbor, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" 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>10/14/11</u>	
Name & Address: <u>WHITAKER, TOM AND SUSAN</u> <u>444 S. 5th AVE</u> <u>Ann Arbor, MI 48104</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INVESTOR</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>Ann Arbor</u>		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

800

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

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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

Jane Lunn for City 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

10/15/11

Name & Address:

ELLIOTT, BRUCE + CHERYL
2121 WATLING FORD RD
ANN ARBOR, MI 48104

\$ 250

\$ 250

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

Occupation

ATTORNEY

Employer

CONLIN, MCKENNEY, PAULDAIR

Click Here for Memo Itemization

Business Address

350 S. MAIN ST. ANN ARBOR

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:

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

\$

\$

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

Name & Address

\$

\$

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

250

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

18,950

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUNN FOR CITY COUNCIL

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		

Page Subtotal

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

NONE

Enter this total on
line 4 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number

C-2011-039

CANDIDATE COMMITTEE

2. Committee Name

JANE LUMM For City 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:

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**

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

Description _____

Employer Name & Business Address:

5. Date Of Receipt: _____

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

☐ Fund Raiser Contribution

Contribution # 2 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**

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

Description _____

Employer Name & Address:

5. Date Of Receipt: _____

6. Vendor Name & Address:

[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**

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

Description _____

Employer Name & Address:

5. Date Of Receipt: _____

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

☐ Fund Raiser Contribution

Page Subtotal

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

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2011-039
2. Committee Name JANE LUMM For City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>M. JEAN GRAY</u> Address <u>2232 S. MAIN ST. #245</u> <u>ANN ARBOR, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>DATABASE ENTRY</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/28/11</u> Date	<u>\$ 217</u>
Expenditure #2 Name <u>SAWICKI + SON</u> Address <u>1521 WEST LAFAYETTE</u> <u>DETROIT, MICHIGAN 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>YARD SIGNS/BUTTONS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/28/11</u> Date	<u>\$ 762</u>
Expenditure #3 Name <u>SPECTRUM PRINTERS INC.</u> Address <u>400 E. RUSSELL ROAD</u> <u>TECUMSEH, MI 49286</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING/PASTAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/29/11</u> Date	<u>\$ 777</u>
Expenditure #4 Name <u>PAESANO'S RESTAURANT</u> Address <u>3411 WASTENAW AVE</u> <u>ANN ARBOR, MI 48104</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FUNDRAISER</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/11</u> Date	<u>\$ 528</u>
Expenditure #5 Name <u>KAREN ANDERSON/GENE JONES</u> Address <u>1412 E. STADIUM</u> <u>ANN ARBOR, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>LITERATURE DESIGN + LAYOUT</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/11</u> Date	<u>\$ 637</u>

Subtotal this page

2,921

Grand Total of all Schedules 1B
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Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number

C-2011-039

2. Committee Name

JANE LUMM For City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>SAWICKI + SON</u> Address <u>1521 W. LAFAYETTE</u> <u>DETROIT, MI</u> <u>48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>YARD STONES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/13/11</u> Date	\$ <u>572</u>
Expenditure #2 Name <u>US POSTAL SERVICE</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>STAMPS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>SEE BELOW</u> Date	\$ <u>843</u> <u>9/29</u> \$ <u>176</u> <u>10/7</u> <u>580</u> <u>10/18</u> <u>87</u>
Expenditure #3 Name <u>SPECTRUM PRINTING INC.</u> Address <u>400 E. RUSSELL RD</u> <u>TECONUMEN, MI</u> <u>49286</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING/POSTAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/11</u> Date	\$ <u>4,376</u>
Expenditure #4 Name <u>KOLOSSOS PRINTING INC.</u> Address <u>2055 W. STADIUM BLVD</u> <u>ANN ARBOR, MI</u> <u>48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING/POSTAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/11</u> Date	\$ <u>2,468</u>
Expenditure #5 Name <u>PERIPHERAL POLITICAL CONSULTING INC.</u> Address <u>P.O. BOX 6249</u> <u>EAST LANSING, MI</u> <u>48823</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>VOTER LISTS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/11</u> Date	\$ <u>516</u>

Subtotal this page

8,775

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

11,696

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES

SCHEDULE 1 B - G

CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City Council

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
Expenditure #1 Name & Address:	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): For Activity Type b-f, check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	_____ Date	\$ _____
Expenditure #2 Name & Address:	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): For Activity Type b-f, check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	_____ Date	\$ _____
Expenditure #3 Name & Address:	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): For Activity Type b-f, check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	_____ Date	\$ _____

Subtotal this page

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

NONE

Enter total
on Line 8b
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND EXPENDITURES

SCHEDULE 1B - IK
CANDIDATE COMMITTEE

1. Committee I. D. Number

C-2011-039

2. Committee Name

JANE LOMAN FOR CITY COUNCIL

3. Name and Address of person to whom goods or services were donated or transferred.

4. Type of In-Kind Expenditure
(Check appropriate box and fill in description)

5. Date:

6. Fair Market Value

Expenditure #1

Name & Address:

(NONE)

4. ☐ Donation of goods or services to a Ballot Question Committee
☐ Donation of assets to tax exempt charitable institution
☐ Donation of assets to Political Party Committee
☐ Other

Description

Click here for Memo Itemization Type

Expenditure #2

Name & Address:

4. ☐ Donation of goods or services to a Ballot Question Committee
☐ Donation of assets to tax exempt charitable institution
☐ Donation of assets to Political Party Committee
☐ Other

Description:

Click here for Memo Itemization Type

Expenditure #3

Name & Address:

4. ☐ Donation of goods or services to a Ballot Question Committee
☐ Donation of assets to tax exempt charitable institution
☐ Donation of assets to Political Party Committee
☐ Other

Description:

Click here for Memo Itemization Type

Expenditure #4

Name & Address:

4. ☐ Donation of goods or services to a Ballot Question Committee
☐ Donation of assets to tax exempt charitable institution
☐ Donation of assets to Political Party Committee
☐ Other

Description:

Click here for Memo Itemization Type

Expenditure #5

Name & Address:

4. ☐ Donation of goods or services to a Ballot Question Committee
☐ Donation of assets to tax exempt charitable institution
☐ Donation of assets to Political Party Committee
☐ Other

Description:

Click here for Memo Itemization Type

Page Subtotal

Grand Total of all Schedules 1B-1K
(Complete on last page of Schedule)

(NONE)

Enter this total
on line 7 of
the Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**

(For use by officeholders only)

1. Committee I. D. Number

C-2011-039

2. Committee Name

JANE LUMM For City Council

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: <div style="text-align: center; font-size: 2em;">N/A</div>	Purpose _____	_____ Date	\$ _____
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement Code _____		Click for Memo Itemization Type	
<input type="checkbox"/> Fund Raiser			
Disbursement # 2 Name & Address:	Purpose _____	_____ Date	\$ _____
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement Code _____		Click for Memo Itemization Type	
<input type="checkbox"/> Fund Raiser			
Disbursement # 3 Name & Address:	Purpose _____	_____ Date	\$ _____
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement Code _____		Click for Memo Itemization Type	
<input type="checkbox"/> Fund Raiser			
Disbursement # 4 Name & Address:	Purpose _____	_____ Date	\$ _____
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement Code _____		Click for Memo Itemization Type	
<input type="checkbox"/> Fund Raiser			

Subtotal this page

Grand Total of all Schedules 1C
(Complete on last page of Schedule)

Enter this total on line 10a of Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

C-2011-039

2. Committee Name

JANE LUMM For City 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 endorser 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? ☐ Yes
Owed to or by:

4. Type: _____

5. Date Debt Was Incurred: _____

6. Original Amount of Debt: _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

☐ FORGIVEN

If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Debt #2 Corp? ☐ Yes
Owed to or by:

4. Type: _____

5. Date Debt Was Incurred: _____

6. Original Amount of Debt: _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

☐ FORGIVEN

If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Debt #3 Corp? ☐ Yes
Owed to or by:

4. Type: _____

5. Date Debt Was Incurred: _____

6. Original Amount of Debt: _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

☐ 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)

None

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.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2011-039
2. Committee Name JANE LUMM For City Council

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>October 9, 2011</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>50</u>	5. Type of Fund Raising Activity <u>MEET THE CANDIDATE</u>	6. Address and Name (If any) of the place where the activity was held. <u>PAESANO'S RESTAURANT</u> <u>3411 LEASTENAW AVE.</u> <u>ANN ARBOR 48104</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$ 1,550
8. Other Receipts -
9. Gross Receipts (Add lines 7 and 8) \$ 1,550
10. Total Cost of Event \$ 528
(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.