

# CANDIDATE COMMITTEE COVER PAGE

#### FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and sign the treasurer (or designated record keeper) and candid	ned by 3. This Statement covers:	<sub>tom</sub> 07/21/14 <sub>to</sub> 08/25/14				
1. Committee I.D. Number	4. Candidate Last Name	First Name M.I.				
c-2012-013	Warpehoski	Charles A				
2. Committee Name	<b>!</b>	strict # or Community Served (If applicable)				
	1	Ann Arbor City Council, Ward 5				
Committee to Elect Chuck Warpel	4b. County of Residence WA	4b. County of Residence <b>WASHTENAW</b>				
5. Committee's Mailing Address	6. Treasurer's Name & Reside	6. Treasurer's Name & Residential Address				
2020 Winewood	Nancy Shore					
Ann Arbor, MI 48103		2020 Winewood				
	Ann Arbor, MI 4810:	Ann Arbor, MI 48103				
Area Code and Phone (734) 972-8304 If the address in this box is different from the committee mailing address on the Statement of Organization, mail be sent to this address by the filing official.	may Area Code & Phone (734) 33	32-8623				
7. Treasurer's Business Address	8. Designated Record Keeper Designated Record Keeper)	er's Name and Mailing Address (If the committee has a				
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·		WASHI ZOIN S AWRED JUNTY				
		Y CONTRACTOR OF THE SECOND SEC				
Avea Cada and Bhana	Area Code and Phane	E R				
9. TYPE OF STATEMENT	Area Code and Phone	9e. Dissolution of Candidate Committee				
R <sub>4</sub>	equired ONLY if candidate	By checking this teleprotive certify an woutstanding debt				
The Election Of Ob. 17th our Election 18	not on the ballot for the urrent year:	By checking this teleph. We certify an proutstanding debt by the committee to the candidate or his or her spouse is here by discharged and for the committee has no outstanding assets,				
Pre-Election or Post-Election Statement relates to:	·					
Primary	July Quarterly	owes no lates fees or Pas any outstanding debt.				
1 ·	October Quarterly	Further if the dissolution cannot be granted that this be				
Convention		Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.				
Special 9c. 1						
School	Annual Statement () Coverage Year	Effective date of dissolution				
		<u></u>				
Caucus 9d. l	(Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.				
Date of Election, Convention or Caucus						
08/05/14						
10. Verification: I/We certify that all reasonable diligence of my\our knowledge and belief the contents are true, accurately	was used in the preparation of this statemerate and complete.	ent and attached schedules (if any) and to the best of				
Current Treasurer or Designated Record Keeper Nancy Shore	, 22_					
Type or Print Name	Signature	1				
Candidate Charles Warpehoski	, CAC	Date 8/31/2014				
Type or Print Name	Signature	V				

1. Committee I.D. Number <u>c-2012-013</u>

### SUMMARY PAGE **CANDIDATE COMMITTEE**

## 2. Committee Name Committee To Elect Chuck Warpehoski

RECEIPTS COMMITTEE	Column I	Column B
	This Period	Column It Cumulative this election cycle
3. Contributions	55.00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 55.00	-
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	_
c. Subtotal of "Contributions"	(3c.) \$ \$55.00	(18.) \$ \$4,521.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$55.00	(20.) \$ \$4,521.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$236.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$236.00
EXPENDITURES		
8. Expenditures	·	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$2,208.25	<u>.</u>
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	_
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$2,208.25	(23.) \$ \$4,421.98
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. ttemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(106.) \$	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$0.00	_
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	_
<ul> <li>13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)</li> <li>14. Amount received during reporting period (Line 5, Total Contributions &amp; Other Receipts)</li> <li>15. SUBTOTAL Add lines 13 and 14</li> <li>16. Amount expended during reporting period (Add lines 9 and 11)</li> <li>17. ENDING BALANCE (Subtract line 16 from line 15)</li> </ul>	BALANCE STATEMENT  (13.) \$ \$4,600.53  (14.) + \$ \$55.00  (15.) = \$ \$4,655.53  (16.) - \$ \$2,208.25  (17.) \$ \$2,447.28	



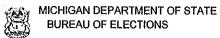
### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I. D. Number <u>c-2012-013</u>

2. Committee Name Committee To Elect Chuck Warpehoski

2	Software Name		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Unit Packaging		07/25/14	\$ 1242.80
Address	Purpose: postage and mailing	Date	
119 Enterprise Dr, Ann Arbor, MI 48103	Click I	Here for Memo	Itemization Type
	<del></del> ,		,,
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2		-	
Name City Printing		07/23/14	s 964.86
Address	Purpose: printing	Date	······
411 W. Cross St., Ypsilanti MI 48198	Click H	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			****
Name PayPal		07/31/14	<b>s</b> .59
Address	Purpose: credit card fees	Date	\$ .0 <del>9</del>
2211 North First Street, San Jose, CA 95131	i dipose.		
	Click H	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement	•	
Expenditure #4			
Name			<u> </u>
			s
Address	Purpose:	Date	· · · · · · · · · · · · · · · · · · ·
			,
	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5		· · · · · · · · · · · · · · · · · · ·	
Name			
•			¢
Address	Purpose:	Date	\$·
_	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subtot	al this page	\$2,208.25
•	Grand Total of all S	chedules 1B	\$2,208.25
	(Complete on last page		φ∠,∠υο.∠ວ

Enter this total on line 8a of Summary Page



### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

### **CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Chuck Warpehoski

Enter contributor's name and address. If o middle initial. Check box to indicate if con Committee (PAC) Report <u>all</u> contributions	tribution is from a Political Committee or	ast name, first name, an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt?  Name & Address:	YES 4. Date of Receipt 07	//30/14	,	
Gertrude Warkentin 550 5th St Ann Arbor, MI 48103			<sub>\$</sub> 20	<sub>\$</sub> 45
5. If over \$100.00 cumulative, please pro	•		Click Here fo	or Memo Itemization
Occupation	_ Employer			
Business Address  Type of Contribution:   Direct	Loan from a person Fund	1 Raiser		·
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Receipt 07/	31/14		
Veena Kulkarni 718 Peninsula Ct. Ann Arbor, MI 48105			<sub>\$</sub> 10	<sub>\$</sub> 50
5. If over \$100.00 cumulative, please pro	vide:		Click Here fo	r Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution:	Loan from a person Fur	nd Raiser		
3. Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of Receipt 07/	31/14		
Nicole Sefton 2491 Towner Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please pro	uida.		\$ 25 Click Here for	\$ 75  Memo Itemization
OccupationBusiness Address	Employer			
Type of Contribution:  Direct	Loan from a person Fur	nd Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Receipt			
E If over \$400.00 computation relation			\$	\$
5. If over \$100.00 cumulative, please pro			Click Here for	Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person Fund	Raiser		·
		Page Subtotal	\$55.00	
		al of All Schedules 1A	\$55.00	
Page 1 of 1	(Compete on	last page of Schedule) L	Enter this total on line 3a of Summary	