



**CANDIDATE COMMITTEE
COVER PAGE**

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 1/1/11 to 10/23/11 11:51

1. Committee I.D. Number
C-2007-028

2. Committee Name
Sabra Briere for City Council

4. Candidate Last Name Briere First Name Sabra M.I. C

4a. Office Sought Including District # or Community Served (If applicable)
Ann Arbor City First Ward City Council member

4b. County of Residence Washtenaw

5. Committee's Mailing Address
1418 Broadway
Ann Arbor, MI 48105

Area Code and Phone (734) 995-3578

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
David Cahill
1418 Broadway
Ann Arbor MI 48105

Area Code & Phone (734) 789-0553

7. Treasurer's Business Address
Same

Area Code and Phone _____

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

Area Code and Phone _____

9. TYPE OF STATEMENT

9a. Pre-Election OR 9b. Post-Election

Pre-Election or Post-Election Statement relates to:

Primary General
 Convention School
 Special Caucus

Date of Election, Convention or Caucus
11/2/11

9c. Annual Statement (_____ Coverage Year)

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

9e. Dissolution of Candidate Committee

Effective Date of Dissolution _____

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

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

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

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper David Cahill David Cahill Date 10/27/11
Type or Print Name Signature

Candidate Sabra C. Briere Sabra C. Briere Date 10/27/11
Type or Print Name Signature



1. Committee I.D. Number C-2007-028

2. Committee Name Sabra Brown for City Council

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>3640.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>3640.00</u>	(18.) \$ <u>3640.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)		
	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>3640.00</u>	(20.) \$ <u>3640.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-K, Column 7)		
	(6.) \$ <u>78.91</u>	(21.) \$ <u>78.91</u>
7. In-Kind Expenditures (Schedule 1B-1K, Column 6)		
	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1488.02</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>1488.02</u>	(23.) \$ <u>1488.02</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>315.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>---</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>315.00</u>	(24.) \$ <u>315.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>2850.61</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>3640.00</u>	
	(15.) = \$ <u>6490.61</u>	
15. SUBTOTAL Add lines 13 and 14		
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1803.02</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>4687.59</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2007-028
2. Committee Name Salina Brown 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>Vivienne Armentrout</u> <u>920 Urepar Rd.</u> <u>Ann Arbor, MI 48106</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>2/23/11</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>50.00</u>	\$ <u>50.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Dennis Dahlmann</u> <u>300 S. Thayer</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3/4/11</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Business owner</u> Employer <u>Self</u> Business Address <u>300 S. Thayer, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Gwen Nyctwon</u> <u>1016 Olinia</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6/11/11</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>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>J.D. Gasen</u> <u>1021 Bartan Dr.</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/15/11</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>50.00</u>	\$ <u>50.00</u>
		Click Here for Memo Itemization	

Page Subtotal 700.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2007-028
2. Committee Name Sabra Briere 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>Jeffrey D. Crockett</u> <u>506 E. Kingsley St.</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/18/11</u>	\$ <u>25.00</u>	\$ <u>25.00</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 #2 Name & Address: <u>Leslie Morris</u> <u>1023 Young Place</u> <u>Ann Arbor, MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/19/11</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>Norman R. Tyler</u> <u>126 N. Division St.</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/19/11</u>	\$ <u>30.00</u>	\$ <u>30.00</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>Grace Shackman</u> <u>515 Soule Blvd.</u> <u>Ann Arbor, MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/19/11</u>	\$ <u>25.00</u>	\$ <u>25.00</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	

Page Subtotal 180.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number _____

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/17/11</u>	
Name & Address: <u>Lloyd E. Powell</u> <u>P.O. Box 7722</u> <u>Ann Arbor, MI 48107-7722</u>		<u>\$ 100.00</u>	<u>\$ 100.00</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>8/20/11</u>	
Name & Address: <u>Hugh M. Sont</u> <u>505 E. Huron St., Apt. 403</u> <u>Ann Arbor, MI 48104</u>		<u>\$ 100.00</u>	<u>\$ 100.00</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>8/20/11</u>	
Name & Address: <u>Angelos G. Constantinder</u> <u>10PN - Main St. No. 1002</u> <u>Ann Arbor, MI 48104</u>		<u>\$ 25.00</u>	<u>\$ 25.00</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>8/20/11</u>	
Name & Address: <u>Judith P. Roche</u> <u>2309 Yost Rd.</u> <u>Ann Arbor, MI 48104</u>		<u>\$ 25.00</u>	<u>\$ 25.00</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 250.00

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2007-028
2. Committee Name Subra Bhatta 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>Stewart V. Nelson 2975 Hickory Lane Ann Arbor MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/23/11</u>	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance agent</u> Employer <u>Kapnick Insurance</u> Business Address <u>1201 Briarwood Cir, Ann Arbor MI 48108</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 #2 Name & Address: <u>Christine Hildebrand 2115 Devonshire Rd. Ann Arbor MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/23/11</u>	\$ <u>50.00</u>	\$ <u>50.00</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 #3 Name & Address: <u>Margaret C. Rygnell 1448 Broadway Ann Arbor MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/30/11</u>	\$ <u>50.00</u>	\$ <u>50.00</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>Robert E. Carter 1400 Broadway Ann Arbor MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/22/11</u>	\$ <u>35.00</u>	\$ <u>35.00</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	

Page Subtotal 335.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2007-028
2. Committee Name Sabatini 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>8/22/11</u>	
Name & Address: <u>Warren James Atterian</u> <u>3490 Gettysburg Rd.</u> <u>Ann Arbor, MI 48105</u>		\$ <u>25.00</u>	\$ <u>25.00</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 #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/23/11</u>	
Name & Address: <u>Diane D. W. Gay</u> <u>920 Mixwood St.</u> <u>Ann Arbor, MI 48103</u>		\$ <u>50.00</u>	\$ <u>50.00</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 #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/23/11</u>	
Name & Address: <u>Elizabeth W. Kaufman</u> <u>3855 E. Huron River Dr.</u> <u>Ann Arbor, MI 48105</u>		\$ <u>35.00</u>	\$ <u>35.00</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	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/23/11</u>	
Name & Address: <u>Emice L. Burns</u> <u>1614 Harbal</u> <u>Ann Arbor, MI 48105</u>		\$ <u>20.00</u>	\$ <u>20.00</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	

Page Subtotal 130.00

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <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>John E. Eaton</u> <u>1606 Dickson Dr.</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/25/11</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>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Mary L. Koral</u> <u>1643 Broadway</u> <u>Ann Arbor MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/25/11</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>20.00</u>	\$ <u>20.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Thomas F. Wiedler</u> <u>2445 Newport Rd.</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/1/11</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>50.00</u>	\$ <u>50.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Gavin Eadie</u> <u>507 Second St.</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/2/11</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>25.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	

Page Subtotal 195.00

Grand Total of All Schedules 1A
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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number _____

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <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>9/2/11</u>	
Name & Address: <u>Nelson K. Meade</u> <u>2484 Pinecrest Ave.</u> <u>Ann Arbor, MI 48104</u>		<u>\$ 25.00</u>	<u>\$ 25.00</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>9/5/11</u>	
Name & Address: <u>T J Pree</u> <u>Courthouse Square</u> <u>100 S. Fourth Ave -</u> <u>Ann Arbor, MI 48104</u>		<u>\$ 20.00</u>	<u>\$ 20.00</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>9/12/11</u>	
Name & Address: <u>Debra J. Axelrod</u> <u>1309 Broadway</u> <u>Ann Arbor, MI 48105</u>		<u>\$ 10.00</u>	<u>\$ 10.00</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>9/16/11</u>	
Name & Address: <u>Ethel K. Potts</u> <u>1014 Elder Blvd</u> <u>Ann Arbor, MI 48103</u>		<u>\$ 30.00</u>	<u>\$ 30.00</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 85.00

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

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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <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>9/5/11</u>
Name & Address: <u>Judith Ann Noeko</u> <u>1605 Waltham</u> <u>Ann Arbor, MI 48103</u>		\$ <u>25.00</u>	\$ <u>25.00</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 #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>9/8/11</u>
Name & Address: <u>J. D. Gussin</u> <u>1021 Barton Dr.</u> <u>Ann Arbor, MI 48105</u>		\$ <u>50.00</u>	\$ <u>100.00</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>9/16/11</u>
Name & Address: <u>Carole A. Rycus</u> <u>2726 Winter Garden Ct.</u> <u>Ann Arbor, MI 48105</u>		\$ <u>25.00</u>	\$ <u>25.00</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>9/16/11</u>
Name & Address: <u>Ann L. Lund</u> <u>1510 Jones Dr.</u> <u>Ann Arbor, MI 48105</u>		\$ <u>20.00</u>	\$ <u>20.00</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 120.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>9/20/11</u>
Name & Address: <u>Augustine Amaru</u> <u>375 Hazelwood Ave.</u> <u>Ann Arbor, MI 48103</u>		\$ <u>25.00</u>	\$ <u>25.00</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 #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>9/21/11</u>
Name & Address: <u>David Barber</u> <u>1638 Broadway</u> <u>Ann Arbor, MI 48105</u>		\$ <u>25.00</u>	\$ <u>25.00</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>9/22/11</u>
Name & Address: <u>Susan Wineberg</u> <u>712 E. Ann St.</u> <u>Ann Arbor, MI 48104</u>		\$ <u>25.00</u>	\$ <u>25.00</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>9/24/11</u>
Name & Address: <u>Robert M. Johnson</u> <u>1413 Culver Rd.</u> <u>Ann Arbor, MI 48103</u>		\$ <u>25.00</u>	\$ <u>25.00</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 100.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number _____
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

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

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/27/11
Name & Address: Rochell Pell
6619 Brookshut Dr.
Canton, MI 48187

\$ 500.00 \$ 500.00

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

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/4/11
Name & Address: Mark C. Passerini
4250 N. Marine Dr. Apt. 2011
Chicago, IL 60613

\$ 500.00 \$ 500.00

5. If over \$100.00 cumulative, please provide:
Occupation Business owner Employer OM of Medicine
Business Address 1125 Main Ann Arbor, MI 48104
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 10/14/11
Name & Address: Deanna Relyea
451 S. Fourth Ave.
Ann Arbor, MI 48104

\$ 150.00 \$ 150.00

5. If over \$100.00 cumulative, please provide:
Occupation Administrative Employer Kendown Concert House
Business Address 415 N. Fourth Ave Ann Arbor, MI 48104
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 10/17/11
Name & Address: Caura Strowe
1325 Broadway
Ann Arbor, MI 48105

\$ 20.00 \$ 20.00

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

[Click Here for Memo Itemization](#)

Page Subtotal 1170.00

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number _____
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/20/11

Name & Address:
Florence Kittie Mordock
1050 Wall St. Apt 6-F
Ann Arbor, MI 48105

\$ 25.00 \$ 25.00

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/21/11

Name & Address:
Barbara Perkins
1376 King George Blvd.
Ann Arbor, MI 48108

\$ 25.00 \$ 25.00

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/22/11

Name & Address:
Warren Williams
2508 Lowell Rd.
Ann Arbor, MI 48103

\$ 100.00 \$ 100.00

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/20/11

Name & Address:
Ellen L. Offen
1911 Boulder Dr.
Ann Arbor, MI 48104

\$ 25.00 \$ 25.00

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

175.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2007-028
2. Committee Name Subcommittee 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>Max A. Heinrich</u> <u>1640 Broadway</u> <u>Ann Arbor, MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/18/11</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>50.00</u>	\$ <u>50.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>H. M. Cumberworth</u> <u>1008 West Medicon</u> <u>Ann Arbor, MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/18/11</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>25.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Raymond A. Dettler</u> <u>120 N. Division, Apt. 1</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/17/11</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>25.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Dennis M. Hayes</u> <u>120 N. Fourth Ave.</u> <u>Ann Arbor, MI 48104</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/18/11</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>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	

Page Subtotal 200.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) 3640.00

Enter this total on
line 3a of Summary
Page.

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2007-028
2. Committee Name Sabra B. Brown 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>Office Max</u> Address <u>3765 Washtenaw</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Supplies for palm cards</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/12/11</u> Date	<u>\$ 157.37</u>
Expenditure #2 Name <u>Xerox Paper Store</u> Address <u>2815 Boardwalk</u> <u>Ann Arbor, MI 48108</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Paper envelopes</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/10/11</u> Date	<u>\$ 91.98</u>
Expenditure #3 Name <u>Office Max</u> Address <u>3765 Washtenaw</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Inland labels</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/13/11</u> Date	<u>\$ 95.88</u>
Expenditure #4 Name <u>Michaels</u> Address <u>3655 Washtenaw</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/13/11</u> Date	<u>\$ 20.06</u>
Expenditure #5 Name <u>US Postal Service</u> Address <u>Green Road Station</u> <u>Ann Arbor, MI 48105</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/15/11</u> Date	<u>\$ 88.00</u>

Subtotal this page 453.29

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2007-028
2. Committee Name Sabra Brera 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>Office Max</u> Address <u>3765 Washtenaw Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Supplies and paper cutter</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/25/11</u> Date	<u>\$ 73.90</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Office Max</u> Address <u>3765 Washtenaw Ann Arbor, MI 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ink</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/1/11</u> Date	<u>\$ 69.38</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Sawicki & Son</u> Address <u>1521 W. Lafayette Detroit, MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/27/11</u> Date	<u>\$ 633.88</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>US Postal Service</u> Address <u>Liberty Station Ann Arbor, MI 48104</u> <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>10/5/11</u> Date	<u>\$ 44.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>FedEx Office</u> Address <u>2609 Plymouth Rd. Ann Arbor, MI 48105</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Labels</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/8/11</u> Date	<u>\$ 27.54</u> Click Here for Memo Itemization Type

Subtotal this page 848.70

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2007-028
2. Committee Name Colin B. Moore 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>Messenger Printing Services, Inc</u> Address <u>20136 Ecorse Rd Taylor, MI 48180-1957</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser invitations</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/17/11</u> Date	<u>\$ 186.03</u>
Expenditure #2 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 186.03

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 1488.02

Enter this total
on line 8a of
Summary Page



**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**
(For use by officeholders only)

1. Committee I. D. Number C12007-028

2. Committee Name Suburbaners 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: <u>Women's Center of Southeastern Michigan</u> <u>570 S. Maple Rd.</u> <u>Ann Arbor, MI 48103</u>	Purpose <u>Ticket for event for nonprofit organization</u> Disbursement Code _____ <input type="checkbox"/> Fund Raiser	<u>3/14/11</u> Date	<u>\$100.00</u> Click for Memo Itemization Type
Disbursement # 2 Name & Address: <u>Washtenaw County Democratic Party</u> <u>P.O. Box 3951</u> <u>Ann Arbor MI 48106</u>	Purpose <u>Tickets to Fundraiser</u> Disbursement Code _____ <input checked="" type="checkbox"/> Fund Raiser	<u>6/25/11</u> Date	<u>\$100.00</u> Click for Memo Itemization Type
Disbursement # 3 Name & Address: <u>Equality Michigan Pride PAC</u> <u>P.O. Box 10129</u> <u>Camden, MI 48101</u>	Purpose <u>Tickets to Fundraiser</u> Disbursement Code _____ <input checked="" type="checkbox"/> Fund Raiser	<u>10/4/11</u> Date	<u>\$40.00</u> Click for Memo Itemization Type
Disbursement # 4 Name & Address: <u>Azy Chamber</u> <u>115 W. Huron, 3rd floor</u> <u>Ann Arbor, MI 48104</u>	Purpose <u>Ticket to policy forum</u> Disbursement Code _____ <input type="checkbox"/> Fund Raiser	<u>10/15/11</u> Date	<u>\$75.00</u> Click for Memo Itemization Type

Subtotal this page 315.00

Grand Total of all Schedules 1C (Complete on last page of Schedule) 315.00

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



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2007-028
2. Committee Name Sabra Biersack City Council

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>12/20/11</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>20</u>	5. Type of Fund Raising Activity <u>Reception</u>	6. Address and Name (If any) of the place where the activity was held. <u>2411 Meadow Ridge Ct. Ann Arbor, MI 48105</u> <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions 50.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) 50.00

10. Total Cost of Event 264.94
(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.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2007-028
 2. Committee Name Salma Boreman 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)
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Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Andy and Megan LaBarre</u> <u>2411 Meadowridge Ct.</u> <u>Auburton, MI 48103</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Food for reception</u> 5. Date Of Receipt: <u>10/20/11</u> 6. Vendor Name & Address: <u>Kroger, 26411 Plymouth Rd, Auburn 48103</u> <u>Target, 3749 Carpenter Rd, Kalamazoo 48197</u> <u>Trader Joe's, 2398 E. Stadium, Auburn, MI, 48104</u>	\$ <u>78.91</u> \$ <u>78.91</u>	Click Here for Memo Itemization
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Fund Raiser Contribution

Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____ \$ _____	Click Here for Memo Itemization
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Fund Raiser Contribution

Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____ \$ _____	Click Here for Memo Itemization
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Fund Raiser Contribution

Page Subtotal 78.91

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 78.91

Enter this total
on line 6 of Summary
Page