



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 1/1/13 to 10/20/13

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 Council, First Ward

4b. County of Residence **Washtenaw**

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

Area Code and Phone **(734) 995-3518**

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) 769-0753**

7. Treasurer's Business Address
Same

Area Code and Phone **Same**

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

Area Code and Phone _____

FILED
 WASH
 TENAW COUNTY, MI
 2013 OCT 25 A 11:35
 LAWRENCE KESTENBAUM
 COUNTY CLERK/REGISTER

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
11/5/13

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** Signature *David Cahill* Date **10/25/13**

Candidate **Sabra C. Briere** Signature *Sabra C. Briere* Date **10/25/13**

RECEIPTSColumn I
This PeriodColumn II
Cumulative this election cycle**3. Contributions**

a. Itemized (Schedule 1A - Column 6)

(3a.) \$ 11,800.00

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$ _____

(18.) \$ _____

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

(4.) \$ _____

(19.) \$ _____

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)(5.) \$ 11,800.00(20.) \$ 11,800.00**IN-KIND CONTRIBUTIONS & EXPENDITURES****6. In-Kind Contributions (Schedule 1-IK, Column 7)**(6.) \$ 77.86(21.) \$ 77.86**7. In-Kind Expenditures (Schedule 1B-IK, Column 6)**

(7.) \$ _____

(22.) \$ _____

EXPENDITURES**8. Expenditures**

a. Itemized (Schedule 1B, Column 6)

(8a.) \$ 6,864.16

b. Itemized Get-Out-the-Vote (Schedule 1B-G)

(8b.) \$ _____

c. Unitemized (less than \$50.01 each - no Schedule)

(8c.) \$ _____

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)(9.) \$ 6,864.16(23.) \$ 6,864.16**INCIDENTAL EXPENSE DISBURSEMENTS**
(Officeholders Only)**10. Disbursements**

a. Itemized (Schedule 1C, Column 6)

(10a.) \$ 483.48

b. Unitemized (less than \$50.01 each - no Schedule)

(10b.) \$ _____

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b)(11.) \$ 483.48(24.) \$ 483.48**DEBTS AND OBLIGATIONS****12. Debts and Obligations**

a. Owed by the Committee (Schedule 1E)

(12a.) \$ _____

b. Owed to the Committee (Schedule 1E)

(12b.) \$ _____

BALANCE STATEMENT**13. Ending Balance of last report filed**

(Enter zero if no previous reports have been filed.)

(13.) \$ 3,847.29**14. Amount received during reporting period**

(Line 5, Total Contributions & Other Receipts)

(14.) + \$ 11,800.00(15.) = \$ 15,647.29**15. SUBTOTAL Add lines 13 and 14****16. Amount expended during reporting period**
(Add lines 9 and 11)(16.) - \$ 7,347.64**17. ENDING BALANCE**

(Subtract line 16 from line 15)

(17.) \$ 8,299.65 *



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/1/13</u> Name & Address: <u>Dennis Dahlmann</u> <u>300 S. Thayer</u> <u>Ann Arbor, MI 48104</u>	500.00 \$ _____	500.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Dahlmann Properties</u> Click Here for Memo Itemization 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		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/11/13</u> Name & Address: <u>Hugh Sonk</u> <u>505 E. Huron, Suite 403</u> <u>Ann Arbor, MI 48104</u>	100.00 \$ _____	100.00 \$ _____
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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/14/13</u> Name & Address: <u>Lloyd E. Powell</u> <u>P. O. Box 7722</u> <u>Ann Arbor, MI 48107</u>	100.00 \$ _____	100.00 \$ _____
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 # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/15/13</u> Name & Address: <u>Steven Zarnowitz</u> <u>300 S. Thayer</u> <u>Ann Arbor, MI 48104</u>	250.00 \$ _____	250.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Dahlmann Properties</u> Click Here for Memo Itemization 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		

Page Subtotal **950.00**

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/14/13</u> Name & Address: <u>David A. Santacroce</u> <u>601 N. Fifth Ave.</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	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/15/13</u> Name & Address: <u>Grace M. Shackman</u> <u>515 Soule Blvd.</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	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/15/13</u> Name & Address: <u>Esther Floyd</u> <u>505 E. Huron Apt. 702</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	500.00 \$ _____	500.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/15/13</u> Name & Address: <u>Cindy Pomerleau</u> <u>637 N. Fourth Ave.</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	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **750.00**

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

Enter this total on
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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/15/13</u> Name & Address: <u>Ovide Pomerleau</u> <u>637 N. Fourth Ave.</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	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/16/13</u> Name & Address: <u>Miriam Meisler</u> <u>1203 Gardner Ave.</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	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/16/13</u> Name & Address: <u>Frances Wright</u> <u>455 Hilldale 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	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/16/13</u> Name & Address: <u>Bertie Bonnell</u> <u>1219 Wright St.</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	20.00 \$ _____	20.00 \$ _____ Click Here for Memo Itemization

Page Subtotal 270.00
 Grand Total of All Schedules 1A
 (Complete on last page of Schedule)

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/16/13</u> Name & Address: Joseph McConnell 1855 Joseph St. Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ 50.00	\$ 50.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/17/13</u> Name & Address: K. & A. Constantinides 101 N. Main Apt. 1002 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ 25.00	\$ 25.00 Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/17/13</u> Name & Address: Thomas F. Wieder 2445 Newport Rd. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ 25.00	\$ 25.00 Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/17/13</u> Name & Address: Susan Wineberg 712 E. Ann Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ 50.00	\$ 50.00 Click Here for Memo Itemization

Page Subtotal **150.00**
 Grand Total of All Schedules 1A
 (Complete on last page of Schedule)

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CANDIDATE COMMITTEE**

C-2007-028

1. Committee I.D. Number _____
2. Committee Name Sabra Briere for City Council

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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/17/13</u> Name & Address: <u>Eric Sturgis</u> <u>2009 Pontiac Trail</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	25.00 \$ _____	25.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/17/13</u> Name & Address: <u>Vivienne Armentrout</u> <u>920 Vesper Rd.</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	40.00 \$ _____	40.00 \$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/18/13</u> Name & Address: <u>Leslie Morris</u> <u>1023 Young Pl.</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	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/19/13</u> Name & Address: <u>Peter Allen</u> <u>2224 Applewood Court</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	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **265.00**
 Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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C-2007-028

1. Committee I.D. Number _____
2. Committee Name Sabra Briere for City Council

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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/19/13</u> Name & Address: Norm & Ilene Tyler 126 N. Division St. Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	75.00 \$ _____	75.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/19/13</u> Name & Address: Ethel K. Potts 1014 Elder Blvd. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/19/13</u> Name & Address: Eunice Burns 1614 Harbal Ann Arbor, MI 48105 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	20.00 \$ _____	20.00 \$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/17/13</u> Name & Address: Joan D. Gussin 1021 Barton Drive, Apt. 203 Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **195.00**

Grand Total of All Schedules 1A
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C-2007-028

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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/20/13</u> Name & Address: <u>Mary & Ken Koral</u> <u>1643 Broadway</u> <u>Ann Arbor, MI 48105</u>	40.00 \$ _____	40.00 \$ _____
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>8/20/13</u> Name & Address: <u>Barbara Murphy</u> <u>507 Second St.</u> <u>Ann Arbor, MI 48103</u>	25.00 \$ _____	25.00 \$ _____
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>8/20/13</u> Name & Address: <u>Peter Eckstein</u> <u>2551 Londonderry</u> <u>Ann Arbor, MI 48104</u>	50.00 \$ _____	50.00 \$ _____
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>9/5/13</u> Name & Address: <u>Charles Gelman</u> <u>505 E. Huron</u> <u>Ann Arbor, MI 48104</u>	500.00 \$ _____	500.00 \$ _____
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Retired</u> 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 **615.00**

Grand Total of All Schedules 1A
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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/20/13</u> Name & Address: <u>Dennis M. Hayes</u> <u>120 N. Fourth Ave.</u> <u>Ann Arbor, MI 48104</u>	100.00 \$ _____	100.00 \$ _____
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>8/20/13</u> Name & Address: <u>Raymond A. Detter</u> <u>120 N. Division St.</u> <u>Ann Arbor, MI 48104</u>	100.00 \$ _____	100.00 \$ _____
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>8/21/13</u> Name & Address: <u>Maurice & Linda Binkow</u> <u>505 E. Huron, Apt. 706</u> <u>Ann Arbor, MI 48104</u>	\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation <u>Attorney/housewife</u> Employer <u>Honigman Miller Schwartz & Co LLP</u>		
Business Address <u>660 Woodward #2290, Detroit, MI 48226</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 _____ Name & Address _____	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide:		
Occupation _____ Employer _____		
Business Address _____		
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization		

Page Subtotal **350.00**

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C-2007-028

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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>8/21/13</u> Name & Address: <u>Kim Easter</u> <u>610 N. Fifth Ave.</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>25.00</u>	\$ <u>25.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/22/13</u> Name & Address: <u>Amy D. Seetoo</u> <u>3111 Cedarbrook Rd.</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>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/22/13</u> Name & Address: <u>Warren Williams</u> <u>2708 Lowell Rd.</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>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/23/13</u> Name & Address: <u>Patricia O'Rorke & Roger Hewitt</u> <u>1411 Harbrooke Ave.</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>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization

Page Subtotal **325.00**

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/24/13</u> Name & Address: Robert G. Carter 1400 Broadway Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/24/13</u> Name & Address: Janis Bobrin & Michael Allemang 3465 Vintage Valley Rd. Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/24/13</u> Name & Address: Mitchell & Sheila Cumberworth 1008 W. Madison Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/26/13</u> Name & Address: John C. Floyd III 519 Sunset Blvd. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **250.00**
 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**

C-2007-028

1. Committee I.D. Number _____
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 all contributions regardless of amount.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/26/13

Name & Address:
Doug Scott
1525 Harding Blvd.
Ann Arbor, MI 48104

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

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/27/13

Name & Address:
Jeff & Christine Crockett
506 E. Kingsley
Ann Arbor, MI 48104

\$ 50.00 \$ 50.00

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 8/28/13

Name & Address:
Julie Dybdahl
1619 Harbal
Ann Arbor, MI 48105

\$ 30.00 \$ 30.00

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/28/13

Name & Address:
Kathleen Stroud
2271 Placid Way
Ann Arbor, MI 48105

\$ 20.00 \$ 20.00

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 200.00

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**

C-2007-028

1. Committee I.D. Number _____

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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/28/13</u> Name & Address: Kristin Mahler & Luis Vazquez 1442 Pontiac Trail Ann Arbor, MI 48105 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 #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/29/13</u> Name & Address: David Barber 1638 Broadway Ann Arbor, MI 48105 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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/29/13</u> Name & Address: Stan & Robin Mendenhall 1500 Cedar Bend Dr. Ann Arbor, MI 48105 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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/29/13</u> Name & Address: Eleanor Linn & Marc Gerstein 1321 Forest Ct. Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>25.00</u> Click Here for Memo Itemization

Page Subtotal 200.00

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**

C-2007-028

1. Committee I.D. Number _____

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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/30/13</u> Name & Address: Carole & Mitchell Rycus 2726 Winter Garden Ct. Ann Arbor, MI 48105 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>30.00</u>	\$ <u>30.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/30/13</u> Name & Address: Tom Stulberg 1202 Traver St. Ann Arbor, MI 48105 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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/30/13</u> Name & Address: Joe & Bethann Duffy 1426 Broadway Ann Arbor, MI 48105 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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/3/13</u> Name & Address: Margaret Charlene Bignall 1448 Broadway Ann Arbor, MI 48105 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 205.00

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/13</u> Name & Address: Leah Gunn 1308 E. Stadium Blvd. Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/13</u> Name & Address: Joan Lowenstein 502 Burson Pl. Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/5/13</u> Name & Address: Barbara Perkins 1316 King George Blvd. Ann Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00 \$ _____	25.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/5/13</u> Name & Address: Ellen Wilt 1328 Broadway Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **275.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2007-028

1. Committee I.D. Number _____
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	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/7/13</u>	
Name & Address: David DeVarti 1231 Baldwin Ann Arbor, MI 48104		\$ 25.00	\$ 25.00
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>9/7/13</u>	
Name & Address: Elizabeth Donoghue Colvin 1053 Maiden Lane Ann Arbor, MI 48105		\$ 35.00	\$ 35.00
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>9/9/13</u>	
Name & Address: Veronique M. Liem 2751 Byington Blvd. Ann Arbor, MI 48105		\$ 50.00	\$ 50.00
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>9/9/13</u>	
Name & Address: Ellen Ramsburgh 1503 Cambridge Rd. Ann Arbor, MI 48104		\$ 50.00	\$ 50.00
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 **160.00**

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/9/13</u> Name & Address: Judith Rose 2330 Twin Lakes Dr. Ypsilanti, MI 48197 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	35.00 \$ _____	35.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/10/13</u> Name & Address: Michael Martin 2106 Wallingford Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/11/13</u> Name & Address: Roberta W. Knox 1611 Broadway Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/11/13</u> Name & Address: Eleanor W. Pollack 515 Detroit St. Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **285.00**

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**

C-2007-028

1. Committee I.D. Number

Sabra Briere for City Council

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>9/7/13</u> Name & Address: Ken Klein & Colleen Crawley 1331 Culver Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>25.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/14/13</u> Name & Address: Melanie McLeod 3219 Featherstone Ct. Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation <u>Co-owner</u> Employer <u>Green Planet</u> Business Address <u>700 Tappan, 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>200.00</u>	\$ <u>200.00</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/17/13</u> Name & Address: Stewart & Jan Nelson 2975 Hickory Lane Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/24/13</u> Name & Address: Bob Davidow & Susan Grubb 975 Addington Lane Ann Arbor, MI 48108 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 **350.00**

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/24/13</u> Name & Address: Eric & Jo Ann Preissner 1925 Timber Trail Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/13</u> Name & Address: Sonia Schmerl 539 S. First St. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00 \$ _____	25.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/30/13</u> Name & Address: Kittie Morlock 1050 Wall Street #6F Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/3/13</u> Name & Address: Jeffrey G. Cifor 7502 Tuttle Hill Rd. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	500.00 \$ _____	500.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **675.00**

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**

C-2007-028

1. Committee I.D. Number _____
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	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/9/13</u>	
Name & Address: <u>Ruth Mohr</u> <u>2608 Traver Blvd.</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>10/10/13</u>	
Name & Address: <u>Darren McKinnon</u> <u>809 Daniel 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>10/10/13</u>	
Name & Address: <u>Leslie Morris</u> <u>1023 Young Pl.</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/13</u>	
Name & Address: <u>Kim Easter</u> <u>610 N. Fifth Ave.</u> <u>Ann Arbor, MI 48104</u>		\$ <u>25.00</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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 200.00

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/13</u> Name & Address: Eunice Burns 1614 Harbal Dr. Ann Arbor, MI 48105	25.00 \$ _____	45.00 \$ _____
5. If over \$100.00 cumulative, please provide: <div style="display: flex; justify-content: space-between;"> Occupation _____ Employer _____ Click Here for Memo Itemization </div> Business Address _____ Type of Contribution: <input checked="" 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>10/10/13</u> Name & Address: Peter Eckstein 2551 Londonderry Rd. Ann Arbor, MI 48104	50.00 \$ _____	100.00 \$ _____
5. If over \$100.00 cumulative, please provide: <div style="display: flex; justify-content: space-between;"> Occupation _____ Employer _____ Click Here for Memo Itemization </div> Business Address _____ Type of Contribution: <input checked="" 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>10/10/13</u> Name & Address: Janis Bobrin 3465 Vintage Valley Ann Arbor, MI 48105	50.00 \$ _____	100.00 \$ _____
5. If over \$100.00 cumulative, please provide: <div style="display: flex; justify-content: space-between;"> Occupation _____ Employer _____ Click Here for Memo Itemization </div> Business Address _____ Type of Contribution: <input checked="" 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>10/10/13</u> Name & Address: Suzanne C. Stephan 2752 Holyoke Lane Ann Arbor, MI 48103	100.00 \$ _____	100.00 \$ _____
5. If over \$100.00 cumulative, please provide: <div style="display: flex; justify-content: space-between;"> Occupation _____ Employer _____ Click Here for Memo Itemization </div> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **225.00**

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/13</u> Name & Address: <u>Jane Michener</u> <u>2115 Devonshire</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 checked="" type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/13</u> Name & Address: <u>Peter Allen</u> <u>2224 Applewood Court</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Peter Allen & Associates</u> Business Address <u>944 N. Main, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/13</u> Name & Address: <u>Veronique Liem</u> <u>2751 Byington Blvd.</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 checked="" type="checkbox"/> Fund Raiser	50.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Michael McLeod</u> <u>3219 Fetherstone Ct.</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 checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **300.00**

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>John Parker</u> <u>1795 Lakesview Blvd.</u> <u>Oxford, MI 48371</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 checked="" type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Jeff Irwin</u> <u>2543 Bellwood Ave.</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 checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Amish Parikh</u> <u>14646 New York St.</u> <u>Romulus, MI 48174</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 checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Kathleen Wrona</u> <u>726 North York St.</u> <u>Dearborn, MI 48128</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 checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **350.00**
 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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Jonah Copi</u> <u>225 Briarcrest Dr. #206</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Ann Arbor Wellness Collective</u> <u>321 E. Liberty St., Ann Arbor, MI 48104</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	500.00 \$ _____	500.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Mark Hannan</u> <u>50077 Madison Dr.</u> <u>Macomb, MI 48044</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 checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Ronald Cayce</u> <u>3325 Riverside Dr.</u> <u>Canton, MI 48188</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	500.00 \$ _____	500.00 \$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Andrew Heward</u> <u>22 S. Willard</u> <u>New Buffalo, MI 49117</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 checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal 1200.00

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**

C-2007-028

1. Committee I.D. Number _____

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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Rhory Gould</u> <u>5537 Overbrook Dr.</u> <u>Ann Arbor, MI 48105</u>	500.00 \$ _____	500.00 \$ _____
5. If over \$100.00 cumulative, please provide:		
Occupation <u>Co-owner</u> Employer <u>Arborside</u>		
Business Address <u>1818 Packard St., Ann Arbor, MI 48104</u>		
Type of Contribution: <input checked="" 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>10/12/13</u> Name & Address: <u>Veronique Liem</u> <u>2751 Byington Blvd.</u> <u>Ann Arbor, MI 48105</u>	30.00 \$ _____	130.00 \$ _____
5. If over \$100.00 cumulative, please provide:		
Occupation <u>Attorney</u> Employer <u>Smith Haughey Rice&Roegge</u>		
Business Address <u>213 S. Ashley St., Ann Arbor, MI 48104</u>		
Type of Contribution: <input checked="" 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>10/12/13</u> Name & Address: <u>Maureen McCurren</u> <u>1007 Arborview Blvd.</u> <u>Ann Arbor, MI 48103</u>	100.00 \$ _____	100.00 \$ _____
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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: <u>Alec Riffle</u> <u>15866 Norborne</u> <u>Redford, MI 48239</u>	500.00 \$ _____	500.00 \$ _____
5. If over \$100.00 cumulative, please provide:		
Occupation <u>Owner</u> Employer <u>Treecity Health Collective</u>		
Business Address <u>2730 Jackson Ave., Ann Arbor, MI 48103</u>		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 1130.00

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: Nora Wright 112C S. Main St. Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: Denise Pollicella 657 Abbingdon Ct. Howell, MI 48843 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 checked="" type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: Randall Surline 1271 Millbrook Trail Ann Arbor, MI 48108 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 checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: Magdalena Cox 720 Davis St. Ypsilanti, MI 48198 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 checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **350.00**

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**

C-2007-028

1. Committee I.D. Number _____

Sabra Briere for City Council

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>10/12/13</u> Name & Address: Marcia Merola 485 Liberty Pointe Dr. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 50.00	\$ 50.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: Mark Passerini 502 Miller Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Om of Medicine</u> Business Address <u>112 S. Main St., Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: Parish Shah 371 E. Lewiston Ave. Ferndale, MI 48220 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 checked="" type="checkbox"/> Fund Raiser	\$ 100.00	\$ 100.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/13</u> Name & Address: Brad O'Conner 3127 Scenic Lake Dr. #10 Ann Arbor, MI 48108 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 checked="" type="checkbox"/> Fund Raiser	\$ 70.00	\$ 70.00 Click Here for Memo Itemization

Page Subtotal 720.00

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**

C-2007-028

1. Committee I.D. Number _____
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 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/16/13</u> Name & Address: <u>Stacie Printon</u> <u>2311 Lancashire #2A</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	25.00 \$ _____	25.00 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/17/13</u> Name & Address: <u>Thomas J. Heywood</u> <u>P. O. Box 177</u> <u>Dundee, MI 48131</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	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/18/13</u> Name & Address: <u>Peter N. Heydon</u> <u>3562 W. Huron River Dr.</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Heydon Properties</u> Business Address <u>324 E. Washington</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	500.00 \$ _____	500.00 \$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/18/13</u> Name & Address: <u>Anne L. Bannister</u> <u>612 N. Main St.</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	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemization

Page Subtotal 655.00

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**

C-2007-028

1. Committee I.D. Number

Sabra Briere for City Council

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>10/5/13</u> Name & Address: <u>John Briere</u> <u>15 S. Twelfth St.</u> <u>San Jose, CA 95112</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Software engineer</u> Employer <u>AppDynamics</u> <u>303 Second St. #450, San Francisco, CA 94107</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization

Page Subtotal **200.00**

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

11,800.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

C--2007-028

1. Committee I. D. Number _____
2. Committee Name Sabra Briere 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 US Postal Service Address Green Road Station Ann Arbor, MI 48105-9998 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/10/13</u> Date	\$ <u>110.40</u> Click Here for Memo Itemization Type
Expenditure #2 Name OfficeMax Address 3765 Washtenaw Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/10/13</u> Date	\$ <u>160.72</u> Click Here for Memo Itemization Type
Expenditure #3 Name Brad O'Conner Address 3127 Scenic Lake Dr. #10 Ann Arbor, MI 48108 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign mgr. fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/16/13</u> Date	\$ <u>1000.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name Sawicki & Son Address 1521 W. Lafayette Detroit, MI 48216 <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>8/26/13</u> Date	\$ <u>957.18</u> Click Here for Memo Itemization Type
Expenditure #5 Name Messenger Printing Service Address 20136 Ecorse Rd. Taylor, MI 48180 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/6/13</u> Date	\$ <u>345.03</u> Click Here for Memo Itemization Type

Subtotal this page **2573.33**

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**

C-2007-028

1. Committee I. D. Number _____
2. Committee Name Sabra Briere 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 Jim Toy Community Center Address 319 Braun Ct. Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Exhibitor fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/13</u> Date	\$ <u>75.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name OfficeMax Address 3765 Washtenaw Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/13</u> Date	\$ <u>129.28</u> Click Here for Memo Itemization Type
Expenditure #3 Name US Postal Service Address Green Road Station Ann Arbor, MI 48105-9998 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/13</u> Date	\$ <u>138.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name China Market Address 2789 Plymouth Rd. Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/13</u> Date	\$ <u>46.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name OfficeMax Address 3765 Washtenaw Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/13</u> Date	\$ <u>120.79</u> Click Here for Memo Itemization Type

Subtotal this page **509.07**

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**

C-2007-028

1. Committee I. D. Number _____

2. Committee Name Sabra Briere 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 PNC Bank Address 2901 Plymouth Rd. Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: <u>Checks</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/13</u> Date	\$ <u>13.50</u>
Expenditure #2 Name Staples Address 3120 Carpenter Rd. Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/13</u> Date	\$ <u>43.97</u>
Expenditure #3 Name OfficeMax Address 3765 Washtenaw Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/8/13</u> Date	\$ <u>41.31</u>
Expenditure #4 Name Sawicki & Son Address 1521 W. Lafayette Detroit, MI 48216 <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>10/9/13</u> Date	\$ <u>641.83</u>
Expenditure #5 Name Messenger Printing Service Address 20136 Ecorse Rd. Taylor, MI 48180 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing and mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/13</u> Date	\$ <u>1222.97</u>

Subtotal this page **1963.58**

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**

C-2007-028

1. Committee I. D. Number _____

Sabra Briere for City Council

2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name US Postal Service Address Green Road Station Ann Arbor, MI 48105-9998 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/8/13</u> Date	\$ <u>18.40</u>
Expenditure #2 Name George Bennett Trio Address <u>1801 Sunrise St.</u> <u>Ann Arbor, MI 48103</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Music</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/12/3</u> Date	\$ <u>300.00</u>
Expenditure #3 Name Kroger Address 2641 Plymouth Rd. Ann Arbor, MI 48105 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Refreshments</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/12/3</u> Date	\$ <u>66.83</u>
Expenditure #4 Name GFS Marketplace Address 3800 Carpenter Rd. Ypsilanti, MI 48197 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Refreshments</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/12/3</u> Date	\$ <u>47.45</u>
Expenditure #5 Name Messenger Printing Service Address 20136 Ecorse Rd. Taylor, MI 48180 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing and mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/3</u> Date	\$ <u>1222.97</u>

Subtotal this page **1655.65**

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**

C-2007-028

1. Committee I. D. Number _____

2. Committee Name Sabra Briere 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 Square, Inc. Address 1455 Market St., Unit 600 San Francisco, CA 94103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cr card process fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/3</u> Date	\$ <u>51.43</u> Click Here for Memo Itemization Type
Expenditure #2 Name OfficeMax Address 3765 Washtenaw Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/3</u> Date	\$ <u>84.77</u> Click Here for Memo Itemization Type
Expenditure #3 Name PayPal Address 211 N. First St. San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cr card process fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/31/13</u> Date	\$ <u>15.70</u> Click Here for Memo Itemization Type
Expenditure #4 Name PayPal Address 2211 N. First St. San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cr card process fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/30/13</u> Date	\$ <u>2.78</u> Click Here for Memo Itemization Type
Expenditure #5 Name PayPal Address 2211 N. First St. San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cr card process fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/3</u> Date	\$ <u>7.85</u> Click Here for Memo Itemization Type

Subtotal this page **162.53**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **6864.16**

Enter this total on line 8a of Summary Page



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

(For use by officeholders only)

C-2007-028

1. Committee I. D. Number _____

Sabra Briere for City Council

2. Committee Name _____

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: Ann Arbor Democratic Party P. O. Box 7497 Ann Arbor, MI 48106 <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose Fundraiser tickets Disbursement Code _____ <input checked="" type="checkbox"/> Fund Raiser	2/6/13 Date	\$ 75.00 Click for Memo Itemization Type
Disbursement # 2 Name & Address: Ann Arbor District Library 343 S. Fifth Ave. Ann Arbor, MI 48105 <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose Meeting room rental Disbursement Code _____ <input type="checkbox"/> Fund Raiser	2/6/13 Date	\$ 125.00 Click for Memo Itemization Type
Disbursement # 3 Name & Address: Community Alliance 1851 Washtenaw Ypsilanti, MI 48197 <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose Donation Disbursement Code _____ <input type="checkbox"/> Fund Raiser	5/30/13 Date	\$ 50.00 Click for Memo Itemization Type
Disbursement # 4 Name & Address: Michigan Municipal League 1675 Green Road Ann Arbor, MI 48105 <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose Fee for planning conference Disbursement Code _____ <input type="checkbox"/> Fund Raiser	6/5/13 Date	\$ 25.00 Click for Memo Itemization Type

Subtotal this page 275.00

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



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

C-2007-028

1. Committee I. D. Number _____
2. Committee Name Sabra Briere 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: Allen Creek Greenway Conservancy 525 W. William St. Ann Arbor, MI 48103 <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose Donation Disbursement Code _____ <input type="checkbox"/> Fund Raiser	6/12/13 Date Click for Memo Itemization Type	\$ 100.00
Disbursement # 2 Name & Address: Peters for Michigan P. O. Box 15293 Washington, DC 20003 <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose Fundraiser tickets Disbursement Code _____ <input checked="" type="checkbox"/> Fund Raiser	9/22/13 Date Click for Memo Itemization Type	\$ 100.00
Disbursement # 3 Name & Address: Hiller's Market 3615 Washtenaw Ann Arbor, MI 48104 <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose Refreshments for meeting Disbursement Code _____ <input type="checkbox"/> Fund Raiser	10/1/13 Date Click for Memo Itemization Type	\$ 8.48
Disbursement # 4 Name & Address: <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose Disbursement Code _____ <input type="checkbox"/> Fund Raiser	_____ Date Click for Memo Itemization Type	\$ _____

Subtotal this page	208.48
Grand Total of all Schedules 1C (Complete on last page of Schedule)	483.48

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



C-2007-028

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____
2. Committee Name Sabra Briere for City Council

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/12/13</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>55</u>	5. Type of Fund Raising Activity <u>Party</u>	6. Address and Name (If any) of the place where the activity was held. <u>Om of Medicine</u> <u>112 S. Main</u> <input type="checkbox"/> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Private Residence
---	---	--	--

7. Total Contributions \$3850.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$3850.00

10. Total Cost of Event \$465.71
(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.



C-2007-028

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____
2. Committee Name Sabra Briere for City Council

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/10/13</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>20</u>	5. Type of Fund Raising Activity <u>Gathering in home</u>	6. Address and Name (If any) of the place where the activity was held. <u>2411 Meadowridge Ct</u> <u>Ann Arbor, MI 48105</u> <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions \$550.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$550.00

10. Total Cost of Event \$77.86

(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

C-2007-028

1. Committee I. D. Number _____
2. Committee Name Sabra Briere for City Council

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Andy LaBarre 2411 Meadowridge Ct. Ann Arbor, MI 48105 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>Refreshments</u> 5. Date Of Receipt: <u>10/10/13</u> 6. Vendor Name & Address: Trader Joe's 2398 E. Stadium Blvd. Ann Arbor, MI 48104	\$ <u>28.42</u>	\$ <u>28.42</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution	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>Refreshments</u> 5. Date Of Receipt: <u>10/10/13</u> 6. Vendor Name & Address: Costco Wholesale 771 Airport Blvd. Ann Arbor, MI 48108	\$ <u>49.44</u>	\$ <u>77.86</u>
<input type="checkbox"/> Fund Raiser Contribution	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](#)

[Click Here for Memo Itemization](#)

[Click Here for Memo Itemization](#)

Page Subtotal **77.86**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **77.86**

Enter this total
on line 6 of Summary
Page