



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 7 24 06 to 9 28 06  
Mo Day Year Mo Day Year

|  |  |
|--|--|
| <p>1. Committee I.D. Number<br/><u>C-2006-025</u></p> <p>2. Committee Name<br/><u>THE COMMITTEE TO ELECT<br/>STEPHEN KUNSELMAN FOR COUNCIL</u></p>   | <p>4. Candidate Last Name First Name M.I.<br/><u>KUNSELMAN STEPHEN</u></p> <p>4a. Office Sought Including District # or Community Served (if applicable)<br/><u>CITY COUNCIL</u></p> <p>4b. County of Residence<br/><u>WASHTENAW</u></p> |
| <p>5. Committee's Mailing Address<br/><u>2885 BUTTERNUT ST.<br/>ANN ARBOR MI 48108</u></p> <p>Area Code and Phone <u>(734) 975-4604</u></p> <p>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.</p> | <p>6. Treasurer's Name &amp; Residential Address<br/><u>ROBERT CAIN<br/>1306 FOUNTAIN ST<br/>ANN ARBOR MI 48103</u></p> <p>Area Code &amp; Phone <u>(734) 761-4649</u></p>   |
| <p>7. Treasurer's Business Address<br/><u>SAME</u></p> <p>Area Code and Phone ( ) <u>SAME</u></p>  | <p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)<br/><u>NONE</u></p> <p>Area Code and Phone ( )</p>   |

|  |   |
|--|---|
| <p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Convention <input type="checkbox"/> School</p> <p><input type="checkbox"/> Special <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus<br/><u>8 8 06</u><br/>Month Day Year</p> | <p>9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year)</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)</p> <p>9e. <input type="checkbox"/> Dissolution of Candidate Committee</p> <p>Effective Date of Dissolution<br/>_____<br/>Month Day Year</p> <p>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.</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p> |
|--|---|

COUNTY CLERK/REGISTRAR  
 WASHINGTON COUNTY, MI  
 FILED  
 SEP - 17 P 3:24  
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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 ROBERT CAIN Signature [Signature] Date 9 6 06  
Type or Print Name Signature Mo Day Year

Candidate Stephen Kunselman Signature [Signature] Date 9 6 06  
Type or Print Name Signature Mo Day Year

Authority granted under P.A. 388 of 1976





MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number C-2006-025  
 THE COMMITTEE TO ELECT  
 2. Committee Name STEPHEN KUNSELMAN FOR COUNCIL

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

| RECEIPTS  | Column I<br>This Period        | Column II<br>Cumulative this election cycle |
|---|--------------------------------|---|
| 3. Contributions  |                                |   |
| a. Itemized (Schedule 1A - Column 6)  | (3a.) \$ <u>690.00</u>         |   |
| b. Unitemized (less than \$20.01 each - no Schedule)  | (3b.) \$ <u>NOT APPLICABLE</u> |   |
| c. Subtotal of "Contributions"  | (3c.) \$ <u>690.00</u>         | (18.) \$ <u>2245.00</u>                     |
| 4. Other Receipts (Schedule 1A -1, Column 6)  | (4.) \$ <u>-</u>               | (19.) \$ <u>-</u>                           |
| <b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b><br>(Add Line 3c + Line 4)                      | (5.) \$ <u>690.00</u>          | (20.) \$ <u>2245.00</u>                     |
| <b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>   |                                |   |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7)  | (6.) \$ <u>-</u>               | (21.) \$ <u>-</u>                           |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6)  | (7.) \$ <u>-</u>               | (22.) \$ <u>-</u>                           |
| <b>EXPENDITURES</b>   |                                |   |
| 8. Expenditures   |                                |   |
| a. Itemized (Schedule 1B, Column 6)   | (8a.) \$ <u>1699.88</u>        |   |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G)  | (8b.) \$ <u>-</u>              |   |
| c. Unitemized (less than \$50.01 each - no Schedule)  | (8c.) \$ <u>-</u>              |   |
| <b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)                                  | (9.) \$ <u>1699.88</u>         | (23.) \$ <u>2167.04</u>                     |
| <b>INCIDENTAL EXPENSE DISBURSEMENTS</b><br>(Officeholders Only)                                 |                                |   |
| 10. Disbursements   |                                |   |
| a. Itemized (Schedule 1C, Column 6)   | (10a.) \$ <u>-</u>             |   |
| b. Unitemized (less than \$50.01 each - no Schedule)  | (10b.) \$ <u>-</u>             |   |
| <b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b><br>(Add Line 10a + Line 10b)                  | (11.) \$ <u>-</u>              | (24.) \$ <u>-</u>                           |
| <b>DEBTS AND OBLIGATIONS</b>  |                                |   |
| 12. Debts and Obligations   |                                |   |
| a. Owed by the Committee (Schedule 1E)  | (12a.) \$ <u>-</u>             |   |
| b. Owed to the Committee (Schedule 1E)  | (12b.) \$ <u>-</u>             |   |
| <b>BALANCE STATEMENT</b>  |                                |   |
| 13. Ending Balance of last report filed<br>(Enter zero if no previous reports have been filed.) | (13.) \$ <u>1087.84</u>        |   |
| 14. Amount received during reporting period<br>(Line 5, Total Contributions & Other Receipts)   | (14.) + \$ <u>690.00</u>       |   |
| 15. SUBTOTAL Add lines 13 and 14  | (15.) = \$ <u>1777.84</u>      |   |
| 16. Amount expended during reporting period<br>(Add lines 9 and 11)                             | (16.) - \$ <u>1699.88</u>      |   |
| 17. ENDING BALANCE<br>(Subtract line 16 from line 15)   | (17.) \$ <u>77.96</u> *        |   |



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025  
2. Committee Name THE COMMITTEE TO ELECT STEPHEN KUNSELMAN FOR 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 from committees 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>7-26-06</u><br>Name: <u>MORGAN, JOHN</u><br>Address: <u>27555 SUMPTER RD<br/>BELLEVILLE MI 48111</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser          | 100.00    | 100.00  |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-06</u><br>Name: <u>MORAY BOB &amp; JAN</u><br>Address: <u>517 N. OCCIDENTAL<br/>TECUMSEH, MI 49286</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser   | 20.00     | 20.00   |
| 3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-06</u><br>Name: <u>SPURR, MARGARET</u><br>Address: <u>3731 E. LOCH ALPINE DR.<br/>ANN ARBOR MI 48103</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 20.00     | 20.00   |
| 3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-06</u><br>Name: <u>WINDSOR, SHAWN &amp; ANNE</u><br>Address: <u>430 PARKWOOD<br/>ANN ARBOR, MI 48103</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 25.00     | 25.00   |
| Page Subtotal<br>Grand Total of All Schedules 1A<br>(Complete on last page of Schedule)   | 165.00    |   |

Enter this total on  
line 3 of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025

2. Committee Name THE COMMITTEE TO ELECT  
STEPHEN KUNSELMAN FOR 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 from committees 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>7-29-06</u><br>Name: <u>CROTHERS, BILL &amp; THERESA</u><br>Address: <u>7835 MAPLERIDGE<br/>NORTHVILLE MI 48167</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser   | 50.00     | 50.00   |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-2-06</u><br>Name: <u>YOUNG, ROBERT</u><br>Address: <u>400 MONROE, SUITE 480<br/>DETROIT MI 48226</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF-EMPLOYED</u><br>Business Address <u>400 MONROE, SUITE 480 DETROIT MI 48226</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 250.00    | 250.00  |
| 3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-2-06</u><br>Name: <u>TREES, ROBERT</u><br>Address: <u>1412 CAMBRIDGE RD.<br/>ANN ARBOR MI 48104</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser   | 100.00    | 100.00  |
| 3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-2-06</u><br>Name: <u>ANZICEK, MARK</u><br>Address: <u>2878 SHARON DR.<br/>ANN ARBOR MI 48108</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser  | 50.00     | 50.00   |
| Page Subtotal<br>Grand Total of All Schedules 1A<br>(Complete on last page of Schedule)   | 450.00    |   |

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line 3 of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2006-025  
2. Committee Name THE COMMITTEE TO ELECT  
STEPHEN KUNSELMAN FOR 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 from committees 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>8-3-06</u><br>Name: <u>MEADE, NELSON</u><br>Address: <u>2484 PINECREST AVE</u><br><u>ANN ARBOR MI 48104</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser  | 35.00     | 35.00   |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-4-06</u><br>Name: <u>KUNSELMAN, STEPHEN</u><br>Address: <u>2885 BUTTERNUT</u><br><u>ANN ARBOR MI 48108</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 20.00     | 20.00   |
| 3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-7-06</u><br>Name: <u>KUNSELMAN, STEPHEN</u><br>Address: <u>2885 BUTTERNUT</u><br><u>ANN ARBOR MI 48108</u><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 20.00     | 40.00   |
| 3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____<br>Name: _____<br>Address: _____<br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser   |           |   |

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

75.00  
690.00

Enter this total on  
line 3 of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2006-025  
THE COMMITTEE TO ELECT  
 2. Committee Name STEPHEN KUNSELMAN TO COUNCIL

| 3. Name and address of person or vendor to whom paid   | 4. Purpose (Describe specific purpose and you may assign an Expenditure Code)  | 5. Date                             | 6. Amount     |
|--|--|-------------------------------------|---------------|
| Expenditure #1<br>Name <u>PARTNERS PRESS</u><br><u>1958 S. INDUSTRIAL Hwy</u><br>Address <u>ANN ARBOR MI: 48104</u><br><br><input type="checkbox"/> Fund Raiser    | Purpose: <u>PAINT 3000 FLYERS</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement  | <u>7-27-06</u>                      | <u>683.70</u> |
| Expenditure #2<br>Name <u>FEDEx KINKO'S</u><br><u>530 E. LIBERTY</u><br>Address <u>ANN ARBOR MI 48104</u><br><br><input type="checkbox"/> Fund Raiser              | Purpose: <u>20 COPIES</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement  | <u>7-28-06</u>                      | <u>1.70</u>   |
| Expenditure #3<br>Name <u>HURON VALLEY PRINTING</u><br><u>4557 WASHTENAW AVE</u><br>Address <u>ANN ARBOR MI; 48108</u><br><br><input type="checkbox"/> Fund Raiser | Purpose: <u>DESIGN &amp; MAILING POSTCARDS</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement                             | <del>7/11/06</del><br><u>8/1/06</u> | <u>468.24</u> |
| Expenditure #4<br>Name <u>HURON VALLEY PRINTING</u><br><u>4557 WASHTENAW AVE</u><br>Address <u>ANN ARBOR MI: 48108</u><br><br><input type="checkbox"/> Fund Raiser | Purpose: <u>DESIGN &amp; MAILING POSTCARDS</u><br><u>(BALANCE IN FULL)</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>8/3/06</u>                       | <u>503.59</u> |
| Expenditure #5<br>Name <u>FEDEx KINKO'S</u><br><u>530 E. LIBERTY</u><br>Address <u>ANN ARBOR MI: 48104</u><br><br><input type="checkbox"/> Fund Raiser             | Purpose: <u>202 COPIES</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement   | <u>8/5/06</u>                       | <u>17.13</u>  |

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

1674.36

Enter this total  
on line 8a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2006-025  
 2. Committee Name THE COMMITTEE TO ELECT  
STEPHEN KUNSELMAN FOR COUNCIL

| 3. Name and address of person or vendor to whom paid  | 4. Purpose (Describe specific purpose and you may assign an Expenditure Code)  | 5. Date       | 6. Amount    |
|---|--|---------------|--------------|
| Expenditure #1<br>Name <u>FEDEx Kinko's</u><br>Address <u>2800 S. STATE</u><br><u>ANN ARBOR MI: 48104</u><br><input type="checkbox"/> Fund Raiser | Purpose: <u>201 COPIES</u><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>8/7/06</u> | <u>17.04</u> |
| Expenditure #2<br>Name <u>FEDEx Kinko's</u><br>Address <u>2800 S. STATE</u><br><u>ANN ARBOR MI: 48104</u><br><input type="checkbox"/> Fund Raiser | Purpose: <u>100 COPIES</u><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>8/8/06</u> | <u>8.48</u>  |
| Expenditure #3<br>Name _____<br>Address _____<br><input type="checkbox"/> Fund Raiser   | Purpose: _____<br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement             |               |              |
| Expenditure #4<br>Name _____<br>Address _____<br><input type="checkbox"/> Fund Raiser   | Purpose: _____<br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement             |               |              |
| Expenditure #5<br>Name _____<br>Address _____<br><input type="checkbox"/> Fund Raiser   | Purpose: _____<br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement             |               |              |

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

25.52  
1699.88

Enter this total  
on line 8a of  
Summary Page