

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE			
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 10/23/06 to 11/27/06 4. Condidate Last Name First Name M.I.		
1. Committee I.D. Number	4. Carindate Last Name		
C-2006-025	Kunselman Stephen 4a. Office Sought Including District # or Community Served (If applicable)		
2. Committee Name	City Council		
The Committee to Elect Stephen Kunselman for Council	4b. County of Residence Washtenaw		
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address		
2885 Butternut Street	Robert Cain		
Ann Arbor, Mi. 48108	1306 Fountain Street		
•	Ann Arbor, Mi. 48103		
Area Code and Phone (734) 975-4604 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.	Area Code & Phone (734) 761-4649		
7. Treasurer's Business Address	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)		
SAME	None		
	Area Code and Phone		
Area Code and Phone	F: W		
9. TYPE OF STATEMENT	70		
9a. Pre-Election OR 9b. Pos	t-Election 9c. Annual Statement (Coverage Year)		
Pre-Election or Post-Election Statement relates to:	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)		
Primary	9e. Dissolution of Candidate Committee		
	Effective Date of Dissolution		
Convention	hool		
Special	By checking this item, I/We certify that the committee has no assets or		
Date of Election, Convention or Caucus 11/07/06	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			
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: IVWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of mylour knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper	Date 12/6/06		
Type or Print Name	Signature		
Candidate Stephen Kunselman	Signature Date 12/6/06 Date 12/6/06		
Type or Print Name	Signature		



SUMMARY PAGE

1. Committee I.D. Number <u>C-2006-025</u>

2. Committee Name THE COMMITTEE TO ELECT STEPHEN KINSELTINGE CONCE

CANDIDATE COMMITTEE	0-11	Column II
RECEIPTS	Column I This Period	Cumulative this election cycle
3. Contributions	_	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	2 1111 00
c. Subtotal of "Contributions"	(3c.) \$	(18.)\$ <u>2,445,00</u> (19.)\$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$ (20.) \$ Z, 445, 00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$ _2, 743, 75 5
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	222776
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.)\$ 2,223.25
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.)\$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		l' EC
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	100 7 20
	BALANCE STATEMENT	THE STATE OF THE S
13. Ending Balance of last report filed	(13.) \$ 272.97	SS 44 44
(Enter zero if no previous reports have been filed.)		H 3 €
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	
	(15.) = \$	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15.) = \$ 272.97 (16.) - \$ 51.22	
(Add lines 9 and 11)	(17.) \$ 221.75	•
17. ENDING BALANCÉ (Subtract line 16 from line 15)	(17.)	