



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

FILED  
WASHTENAW COUNTY, MI

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 P 12: 23  
7/21/08 to 9/4/08

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

2. Committee Name  
THE COMMITTEE TO ELECT  
STEPHEN KUNSELMAN FOR COUNCIL

4. Candidate Last Name KUNSELMAN First Name STEPHEN M.I.  
4a. Office Sought Including District # or Community Served (if applicable)  
CITY COUNCIL

4b. County of Residence WASHTENAW

5. Committee's Mailing Address  
2885 BUTTERNUT ST.  
ANN ARBOR 48108

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.

6. Treasurer's Name & Residential Address  
ROBERT CAIN  
1306 FOUNTAIN ST.  
ANN ARBOR MI: 48103

Area Code & Phone 734-761-4649

7. Treasurer's Business Address  
SAME

Area Code and Phone \_\_\_\_\_

8. Designated Record keeper's Name and Mailing Address (if the committee has a Designated Record keeper)  
NONE

Area Code and Phone \_\_\_\_\_

**9. TYPE OF STATEMENT**

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

Pre-Election or Post-Election Statement relates to:

Primary  General  
 Convention  School  
 Special  Caucus

Date of Election, Convention or Caucus  
8/5/08

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 ROBERT CAIN Signature [Signature] Date 9/4/08

Candidate Stephen Kunselman Signature [Signature] Date 9/4/08



**SUMMARY PAGE  
CANDIDATE COMMITTEE**

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

**RECEIPTS**

3. Contributions

- a. Itemized (Schedule 1A - Column 6)
- b. Unitemized (less than \$20.01 each - no Schedule)
- c. Subtotal of "Contributions"

(3a.) \$ 1040.00  
 (3b.) \$ NOT APPLICABLE  
 (3c.) \$ 1040.00

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

(4.) \$ \_\_\_\_\_

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS  
(Add Line 3c + Line 4)

(5.) \$ 1040.00

**IN-KIND CONTRIBUTIONS & EXPENDITURES**

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$ \_\_\_\_\_

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$ \_\_\_\_\_

**EXPENDITURES**

8. Expenditures

- a. Itemized (Schedule 1B, Column 6)
- b. Itemized Get-Out-the-Vote (Schedule 1B-G)
- c. Unitemized (less than \$50.01 each - no Schedule)

(8a.) \$ 2294.32  
 (8b.) \$ \_\_\_\_\_  
 (8c.) \$ \_\_\_\_\_

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)

(9.) \$ 2294.32

**INCIDENTAL EXPENSE DISBURSEMENTS  
(Officeholders Only)**

10. Disbursements

- a. Itemized (Schedule 1C, Column 6)
- b. Unitemized (less than \$50.01 each - no Schedule)

(10a.) \$ \_\_\_\_\_  
 (10b.) \$ \_\_\_\_\_

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS  
(Add Line 10a + Line 10b)

(11.) \$ \_\_\_\_\_

**DEBTS AND OBLIGATIONS**

12. Debts and Obligations

- a. Owed by the Committee (Schedule 1E)
- b. Owed to the Committee (Schedule 1E)

(12a.) \$ \_\_\_\_\_  
 (12b.) \$ \_\_\_\_\_

Column II Cumulative this election cycle	
(18.) \$	<u>2690.00</u>
(19.) \$	_____
(20.) \$	<u>2690.00</u>
(21.) \$	_____
(22.) \$	_____
(23.) \$	<u>2838.44</u>
(24.) \$	_____

**BALANCE STATEMENT**

13. Ending Balance of last report filed  
(Enter zero if no previous reports have been filed.) (13.) \$ 1327.63  
 14. Amount received during reporting period (14.) + \$ 1040.00  
(Line 5, Total Contributions & Other Receipts)  
 15. SUBTOTAL Add lines 13 and 14 (15.) = \$ 2367.63  
 16. Amount expended during reporting period (16.) - \$ 2294.32  
(Add lines 9 and 11)  
 17. ENDING BALANCE (17.) \$ 73.31  
(Subtract line 16 from line 15)



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

FILED  
WASHTENAW COUNTY MI

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 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	
Name & Address: TREES, ROBERT 1412 CAMBRIDGE RD. ANN ARBOR 48104		7/20/08	
5. If over \$100.00 cumulative, please provide:		\$ 90.00	\$ 90.00
Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
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	
Name & Address: EDWIN AMONSEN 3043 OVERRIDGE DR. ANN ARBOR, MI 48104		7/21/08	
5. If over \$100.00 cumulative, please provide:		\$ 500.00	\$ 500.00
Occupation <u>BUSINESS CONSULTANT</u> Employer <u>SELF-EMPLOYED</u>		<a href="#">Click Here for Memo Itemization</a>	
Business Address <u>SAME AS ABOVE</u>			
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	
Name & Address: LU ANN BULLINGTON 1801 SOUTH BLVD. ANN ARBOR MI 48104		7/22/08	
5. If over \$100.00 cumulative, please provide:		\$ 100.00	\$ 100.00
Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
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	
Name & Address: SIDNEY, KAREN 100 LONGMAN LANE ANN ARBOR 48103		7/22/08	
5. If over \$100.00 cumulative, please provide:		\$ 100.00	\$ 100.00
Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

790.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-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 regardless of amount.

6. Amount

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

3. Contribution # 1 PAC Receipt?  YES 4. Date of Receipt 7/23/08

Name & Address:

BANKA, ANDREW & WENDY  
3291 ROSEDALE  
ANN ARBOR 48108

\$ 75.00 \$ 75.00

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 # 2 PAC Receipt?  YES 4. Date of Receipt 7/24/08

Name & Address:

HERRELL, STEPHEN  
2896 SHARON DR  
ANN ARBOR 48108

\$ 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 7/25/08

Name & Address:

CARLBERG, JEAN  
1902 INDEPENDENCE  
ANN ARBOR 48104

\$ 25.00 \$ 25.00

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 7/26/08

Name & Address:

LUMM, JANE  
3075 OVERRIDGE DR.  
ANN ARBOR 48104

\$ 100.00 \$ 100.00

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 250.00

Grand Total of All Schedules 1A 1040.00  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**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 (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>PARTNERS PRESS</u> Address <u>1958 S. INDUSTRIAL HWY SUITE C ANN ARBOR 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>BROCHURES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/23/08</u> Date	<u>\$ 938.10</u>
Expenditure #2 Name <u>HURON VALLEY PRINTING &amp; IMAGING</u> Address <u>4557 WASHTEWAW ANN ARBOR MI 48108</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAILING SERVICES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/23/08</u> Date	<u>\$ 406.00</u>
Expenditure #3 Name <u>HURON VALLEY PRINTING &amp; IMAGING</u> Address <u>4557 WASHTEWAW ANN ARBOR MI 48108</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>BROCHURES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/25/08</u> Date	<u>\$ 700.06</u>
Expenditure #4 Name <u>PARTNER'S PRESS</u> Address <u>1958 S. INDUSTRIAL HWY SUITE C ANN ARBOR 48104</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>BROCHURES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/31/08</u> Date	<u>\$ 250.16</u>
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	Date _____	\$ _____

Subtotal this page 2294.32

Grand Total of all Schedules 1B (Complete on last page of Schedule) 2294.32

Enter this total on line 8a of Summary Page