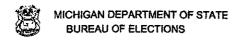
CANDIDATE COMMITTEE COVER PAGE

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: (0/29/1) to 12/8/11					
1. Committee I.D. Number	4. Candidate Last Name First Name M.I.					
C-2006-025	Kunselman Stephen					
a a service Name	4a. Office Sought Including District # or Community Served (If applicable)					
2. Committee Name The Committee to Bleat	Ann Arbor City Council					
Stephen Kunselman for Council	4b. County of Residence Washtenau					
5. Committee's Mailing Address 2885 Butternut St.	6. Treasurer's Name & Residential Address					
• • · · · · · · · · · · · · · · · · · ·	Robert Cain					
Ann Arbor, MI	1306 Fountain St.					
48(08	Ann Arber, M1 48103					
Area Code and Phone (734) 975 - 4604	ANN MODE, I'VE TOOLS					
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)					
	Designated Record Reeper)					
Same	none SHIER					
	None E E					
	Area Code and Phone					
Area Code and Phone						
9. TYPE OF STATEMENT						
9a. Pre-Election OR 9b. Post	-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 Ger	eral 9e. Dissolution of Candidate Committee					
	Effective Date of Dissolution					
Convention	00i					
Special Cau	cus					
<u></u>	By checking this item, IWVe certify that the committee has no assets or outstanding debts, including late filing fees. Further, IWVe request that if					
Date of Election, Convention or Caucus the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.						
118111	Note: The disposition of residual funds must be reported on Schedule					
A convenience that done not have a Paparting Mainer west file all to	1B and the Summary Page.					
Schedules. Direct contributions, in-kind contributions, loans, expe	quired Campaign Statements. The Campaign Statements must include all applicable additions, and outstanding debts count against the \$1,000 Reporting Waiver threshold.					
amendment to the Statement of Organization should accompany to	ed since the information was shown on the committee's Statement of Organization, an nis Campaign Statement. If a request for a Reporting Waiver is not received on or nat campaign statement cannot be waived.					
10. Verification: IWWe certify that all reasonable diffeence was used in the preparation of this statement and attached schedules (if any) and to the host of						
my our knowledge and belief the contents are true, accurate and co	mplete.					
Current Treasurer or Pasignated Record Record Political Cain	,					
Designated Record keeper						
Type of Francisco						
Candidate Steven Kuselman						



SUMMARY PAGE

1. Committee I.D. Number _	<u> </u>	20	06	-025	<u> </u>	
- i	1	-1	ì	10		

2. Committee Name Elect Stephen Kunshman **CANDIDATE COMMITTEE** RECEIPTS Column i Column II This Period Cumulative this election cycle 3. Contributions a. Itemized (Schedule 1A - Column 6) (3a.) \$ _____ b. Uniternized (less than \$20.01 each - no Schedule) (3b.) \$ NOT APPLICABLE (18.)\$ 4045.00 c. Subtotal of "Contributions" (3c.) \$ ____ 4. Other Receipts (Schedule 1A -1, Column 6) (4.) \$ _____ (19.)\$ 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (5.) \$ _____ (Add Line 3c + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) (6.) \$ ______ (7.) \$ _____ 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) (22.) \$ ___ EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) (8a.) \$ ____ b. Itemized Get-Out-the-Vote (Schedule 1B-G) (8b.) \$ _____ (8c.) \$ _____ c. Unitemized (less than \$50.01 each - no Schedule) (23.) \$ 3947,44 (9.) \$ _____ 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements (10a.) \$ ___ a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) (10b.) \$ _____ 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 40,99 (11.) \$ _____ (24.)\$ **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** 174.78 (13.) \$ 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (14.) + \$(Line 5. Total Contributions & Other Receipts) 124.78 (15.) = \$ ____ 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (16.) - \$ ___ (Add lines 9 and 11) (17.) \$ _ 124.78 17, ENDING BALANCE (Subtract line 16 from line 15)