

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

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LATE CONTRIBUTION REPORT

1. Your Committee ID#: <u>C - 2006 - 025</u>	
2. Your Committee Name: Stephen Kunselman For City Council	
3. Date Late Contribution(s) Received: 2015 (Only one Date per Sheet)	
 Late Contribution Reports are required when a Candidate committee receives a single contribution or a cumulative contribution from the same \$500.00 or more after the closing date of the last campaign statement required and the 3rd day be the candidate is participating. See <u>Appendix G</u> of the Campaign Finance Manual. A committee other than a candidate committee (PAC, Ballot Question or Political Party) receive contribution or a cumulative contribution from the same contributor of \$2,500.00 or more after last campaign statement required and the 3rd day before an election. See <u>Appendix G</u> of the Car Contributions are anything of monetary value including contributions of money, in-kind and loans to the Late Contribution Reports are not waived by the Reporting Waiver. Late Contribution Reports that are filed late result in the committee receiving a late filing fee. The maxin per report. Paper filers may file the report by any written means (including fax) within 48 hour of receipt of the cont Filing Official. Electronic Filers on the state level must file all Late Contribution Report <u>electronically</u>. The Late Contribution must also be reported on the next Campaign Statement owed by the committee. 	efore an election where es a single the closing date of the npaign Finance Manual committee. mum fee is \$2,000.00
4. Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial and if the contributor is an individual, the Occupation, Employer and Business address of the contributor.	5. Amount
Contributor Name and Address: PETEV HEYDEN 3562 Ll. HUNN Dr., ANN AVOCK MI 48103 (If Individual, alsoprovide:) Occupation Petroed Employer / Business Address	\$ 500
Contributor Name and Address:	
(If Individual, also provide:) Occupation Employer / Business Address Employer / Business	WASH 7005
Contributor Name and Address:	SHIEN F
(If Individual, also provide:) Occupation Employer / Business Address	AW COUNT
Contributor Name and Address:	. ¥ . ₹
(If Individual, also provide:) Occupation Employer / Business Address	