CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

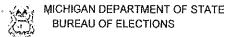
COVER PAGE		_			
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From		to 40/25/16	10/23/16
1. Committee I.D. Number	,	4. Candidate Last Name WESTPHAL	First No.	ame 12K	M.I.
2 2000		4a. Office Sought Including Dis		•	
2. Committee Name COMMITTEE TO ELE	ct	2ND WA	fau.	-OUNCIE	
KIRK WESTPHAL		4b. County of Residence	•	V_{\perp}	
5. Committee's Malling Address 3465 VINTAGE VALLE	N BD	6. Treasurer's Name & Reside			*"
i .		3465 / WT	AGE VAL	CEY RD	
ANN ARBOR, MILLS	<i>U3</i>	ANN AR	BOR, MI	48105	uran.
Area Code and Phone 734-995-09	147				
If the address in this box is different from the comm mailing address on the Statement of Organization, to be sent to this address by the filing official.	lliee	Area Code & Phone	4-995-0	1947	
7. Treasurer's Business Address		8. Designated Record keeper		dress (If the commit	tee has a
3465 VINTAGE VAL	CEYRO	Designated Record keeper)	•	2	WASHTE F
ANN ARBOR, MIG	18105			0 OCT	
				2	
Area Code and Phone 734-995-0	2947	Area Code and Phone			
9. TYPE OF STATEMENT	Required Of	NLY if candidate	9e.		-
9a. Pre-Election OR 9b. Post-Election		ballot for the	by the committee to the	item I/We certify any ne candidate or his or	r her spouse is here
Pre-Election or Post-Election Statement relates to:	July Quart	erly	by discharged and for the committee. The c owes no lates fees or	committee has no ous	standing assets,
Primary		•	owes no lates tees of	nas any oustanding c	iest.
General	October G	luarteny	Further, if the dissolut considered a request	ion cannot be granted for the Reporting Wa	d, that this be iver.
Convention			·		
Special	9c. Annua	al Statement () Coverage Year	Effective da	ite of dissolution	
School	9d. Amer	dment to Campaign Statement			
Caucus	(Com	plete Item 9a, 9b, 9c or 9e to te which Statement is being ted)	Note: The disposition Schedule 1B and the		st be reported on
Date of Election, Convention or Caucus					
11/8/2016					
10. Verification: I\We certify that all reasonable diligemy\our knowledge and belief the contents are true,			ent and attached sched	lules (if any) and to t	he best of
Current Treasurer or	accorate aria of	1/1 / 10)		4	1
Designated Record keeper MIKE TL Type or Print Name	LEMAN	g mure le	Ellion	Date 10/26	<u> </u>
		Signature	<u></u>	, .	
Candidate KIRK WESTPHAL		, Musputt		Date 10-26	16
Type or Print Name		Signature			

1. Committee I.D. Number ______

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee To Elect Kirk Westphal

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	1,525.00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	4 505 00
c. Subtotal of "Contributions"	(3c.) \$ 1,525.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$ 0
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$ 1,525.00
IN-KIND CONTRIBUTIONS & EXPENDITURES	2	_
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$ 0
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	83.00 (8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements	0	
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)	0	0
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	0	
	(12b.) \$BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 843.12	
(Enter zero if no previous reports have been filed.)	1 525 00	
14. Amount received during reporting period	(14.) + 3	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$	
16. Amount expended during reporting period	83.00	
(Add lines 9 and 11)	(16.) - \$	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 2,285.12	
•		



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C-2013-005

1. Committee I.D. Number

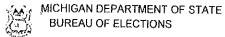
Committee To Elect Kirk Westphal 2. Committee Name

> Enter this total on line 3a of Summary

Page.

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

Enter contributor's name and address. If c middle initial. Check box to indicate if cont Committee (PAC) Report all contributions	ribution is from a Political C	dual, e ommitt	nter last name, first name ee or an Independent	9,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? Name & Address: BARBARA BANET 538 HBATHER WA ANN ARBOR, MI		Receip	1/17/16		s /00	s 100
5. If over \$100.00 cumulative, please pro					Cliak Hara fa	or Marsa Hamimatian
Occupation	Employer				Click mere it	or Memo Itemization
Business Address						
Type of Contribution: ✓ Direct	Loan from a person	~	Fund Raiser			
Contribution #2 PAC Receipt? Name & Address		Receipt	1/17/16		4.7.4.7	
JOHN MIRSKY 505 BURSON PL ANN ARBOR, M148	104			\$	50	s 50
5. If over \$100.00 cumulative, please pro					Click Here fo	r Memo Itemization
Occupation	Employer					
Business Address						
Type of Contribution:	Loan from a person	V	Fund Raiser			
3. Contribution #3 PAC Receipt? Name & Address: LINDA FELOT BPLER CT ANN ARBOR, MI 5. If over \$100.00 cumulative, please pro	48103	Receip	1/17/16	\$	<u> </u> 3つ Click Here for	\$ Memo Itemization
Occupation	Employer					
			F-5/1/			
Business Address Type of Contribution: Direct	Loan from a person	Y	Fund Raiser			
3. Contribution #4 PAC Receipt? Name & Address VINCENT CANATA 1522 PINE VALLEY ANN AR BOR, MI	YES 4. Date of 10 132 VD 4/5	Receip	1/17/16		100	s/00
5. If over \$100.00 cumulative, please pro					•	
Occupation	_ Employer				Click Here for	Memo Itemization
Business Address						
Type of Contribution: Direct	Loan from a person		Fund Raiser			
			Page Subto	otal	280	
	(0		d Total of All Schedules 1 te on last page of Schedu			•



ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

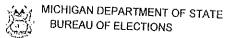
CANDIDATE COMMITTEE

C-2013-005

1. Committee I.D. Number

Committee To Elect Kirk Westphal

2. Odininge valle	······································	
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 1/17/16 Name & Address: CHRISTO PHER GRAHAM		
925 ABERDEEN ANN ARBOR, MI 48104 5. If over \$100.00 cumulative, please provide:	<u> 150</u>	\$ 150
Occupation OWNER Employer OAK ARBOR CO. LLC	Click Here f	or Memo Itemization
Business Address 925 ABERDEEN, ANN ARBOR, M, 48105		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 1/17/16 Name & Address		*
JUDITH COHEN		
2855 HEATHER WAY ANN ARBOR, MI 48104	s 100	· (00)
ANN ARBOR, MI 48104	<u> </u>	\$ /
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 1/17/16 Name & Address:	***************************************	
ANN MULHERN 2023 SENECA	100	
ANN ARBOR, MI 48104	\$ 100	s / 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 1/17/16		
Name & Address JOHN AUSTIN		
817 BERKSHIRE		
ANN ARBOR, MI 48104	s 50	.50
5. If over \$100.00 cumulative, please provide:		9
	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
Page Subtotal	400	
Grand Total of Alf Schedules 1A (Complete on last page of Schedule)	- All	
	Enter this total on	J.
Page 2 of 4	line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

C-2013-005

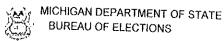
CANDIDATE COMMITTEE

2. Committee Name

Committee To Elect Kirk Westphal

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
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 1/17/16 Name & Address: JACK PANITCH ED BURSON PL	_	date of receipt)
501 BURSON PL ANN ARBOR, MI 48104 5. If over \$100.00 cumulative, please provide:	\$ 150	\$ 150
Occupation ATTORNEY Employer VARNUM LCP	Click Here	for Memo Itemization
Business Address 39500 HIGH POINT, NOVI, MI 48375 Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 1/17/16 Name & Address ANDY LABARRE		
2411 MAADOLORIDGE ANN ARBOR, MI 48105 5. If over \$100.00 cumulative, please provide:	s_20	\$ ZO
OccupationEmployer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 1/17/16 JASON MORGAN		
ANU ARBOR, MI 4810F	<u> 25</u>	s Z5
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		
. Contribution # 4 PAC Receipt? YES 4 Date of Receipt 1/17/16		
JOAN LOWENSTEIN 502 BURSON PL		
ANN ARBOR, AN I 48104 If over \$100,00 cumulative, please provide:	<u>\$ 200</u>	<u>s_200</u>
Occupation RETIRED Employer	Click Here for I	Memo Itemization
dusiness Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	395	
2	Enter this total on line 3a of Summary	

Page.



ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

CANDIDATE COMMITTEE

C-2013-005 1. Committee I.D. Number

line 3a of Summary

Page.

Committee To Elect Kirk Westphal

Enter contributed 2. Committee Name		
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
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 1/17/16 Name & Address: JANIS BEBRIN 3465 VINTAGE VALLEY		date of receipt)
5. If over \$100.00 cumulative, please provide:	<u> 250</u>	\$ 250
$V \sim V \sim$	Click Here fo	or Memo Itemization
Occupation F27/14 D Employer Business Address		or morno tterrilization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 1/17/16	- 	
Name & Address LEE GUNN 2115 NATURE COVE # 207 ANN ARBOR MI 48104 5. If over \$100.00 cumulative, please provide: Employer	\$	s (OO)
Business Address	•	
Type of Contribution: Upirect Loan from a person Fund Raiser		
A Contribution # 3 PAC Receipt? YES 4. Date of Receipt 1/17/16 YES 4. Date of Receipt 1/17/16	\$	\$ <u>/0</u> Memo Itemization
Contribution #4 PAC Receipt? YES 4. Date of Receipt 1/17/16		
If over \$100.00 cumulative, please provide: Decupation Employer Business Address Type of Contribution:	SClick Here for M	\$ Viemo Itemization
Page Subtotal	450	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,525 Enter this total on	



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

\sim	20	4	0	Λ	05	
U -	Z U		ა-	U	บอ	

1. Committee I. D. Number

Committee To Elect Kirk Westphal

2. Committee Name

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name WebFaction		Monthly	
Name VVEDFACTION	Web Hosting	Vionthly シーツ/22// Date	_{(\$} 83
Address 207 Regent St	Purpose:		
London W1B 3HH, UK	Click He	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name	_	<u>.</u>	\$
Address	Purpose:	Date	
	Click He	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name			\$
Address	Purpose:	Date	
	Click He	re for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name			
Address	Purpose:	Date	\$
		re for Memo II	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click He	re for Memo I	ternization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
		I this page	83
	Grand Total of all Sc (Complete on last page o		83,00

Enter this total on line 8a of Summary Page

Page ______ of ______

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number C-20(3-005

2. Committee Name COMMITTEE TO ELECT WESTAWA

- USE A SEPARATE SHEET FOR EACH EVENT -						
3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity RECEPTION	6. Address and Name (If any) of the place where the activity was held. 3 465 VINTAGE VALCE ANNARBOR, MI			
7. Total Contributions	\$1,525.	g 6				
8. Other Receipts	Name and American					
9. Gross Receipts (Add lines 7	and 8) \$1,525,0	©				
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions and All Expenditures	Made For the Event)				
11. Check if event was a jo	int fund raiser and complete the	following:				
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)			
			·			
<u></u>						

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

Page ____ of ___