

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the freesurer (or designated record keeper) and candidate.	3. This Statement	Looyers From:	7/23/2012 to	8/26/2012	
1. Gommillee f.D. Number C-2010-016	4. Candidale Le Smith	st Name	First Name Dan	B.(.	
2. Committee Name		t Including Distri missioner – Di	ct#or Community Served istrict 2	(it oppžicatale)	
Committee to elect Dan Smith	4b. County of Res	· eidence \	Washtenaw	· .	
6. Committee's Muliny Address	6. Treasurara Na		lal Address		
328 N. Pointe Dr.	Dan Smith			(C)	
Whitmore Lake, MI 48189	328 N. Point	te Dr.			
	Whitmore La	ake, MI 48189	€.		
Ann Tarks and Bhans (734) 449-2985	1.				
Area Code and Phone If the address in this box is different from the committee mailing address on the Statement of Organization, mall may be sent to this address by the filling official.	Area Gode & Pho		(734) 449-2985		
7. Treasurer's Business Address	8. Designated Ro	ecord keepers h	Yame and Malling Address	s (II Dia commiliae has a 💎	
•	Designated Reco	ora kopper)		O Principle of the prin	
	1	•			
			•		
] .			.,·⊒	
Area Code and Phone	Area Code and P	Phone			
9. TYPE OF STATEMENT					
9a. Pre-Election OR 9b. X pos	t-Election	9c. Annu	el Slolament (_Coverage Year)	
Pre-Election or Post-Election Statement relates to:		Şd. Amend ox Se (dment to Campaign States to Indicate which Statemes	ment (Complete Hem 9a, 9b, 9o nt le being amended)	
X Primary Ger	neral	9e. Dissol	lutlon of Cendidale Gomm		
Convention Set	hooi		Effocilyo Dato of Dis	solution	
Special Gau	rous	By aheaking th	es item. NWe certify that if	ne committee hee no nesets or es. Further, I/Wo request that if	
Date of Election, Convention or Caucus 8/7/2012		the dissolution the Reporting 1 Note: The disp 18 and the Se	cannet bu granled, that the water. Waiver. resilion of residual funds not assert the same of the same	nis be considered a request for nust be reported on Schedule	
A committee that does not have a Reporting Walver must like all required Compositin Statements. The Campositin Statements must include all applicable Schedules. Direct contributions, in-kind contributions, foans, expenditures, and outstanding debts count against the \$1,000 Reporting Walver Inteshold. If any of the Information Island in Rems 2, 4, 8, 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, an amendment to the Statement of Organization, and the statement of Organization and the organization					
to. Verification: NWe corlify that all reasonable differed was used in the proparation of this statement and attacked schodules (if any) and to the bost of myour knowledge and belief the contents are true, accurate and complete.					
Cunent Tressurer or Designated Record Respor Dan Smith	, 1.6	Y/	O Date	8/28/2012	
Type or Print Name	√ Signatue			,	
Gandidale Dan Smith	, .) (tiole (8/28/2012	
Type or Print Name	Signatule				

Authority granted under P.A. 388 of 1976



1. Committee I.D. Number ______ C-2010-016

CANDIDATE COMMITTEE

2. Committee Name _____ Committee to elect Dan Smith SUMMARY PAGE

CANDIDATE COMMITTEE			
RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions		Tilla Fellod	Cultidative tris election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ _	0.00	_
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	NOT APPLICABLE	_
c. Subtotal of "Contributions"	(3c.) \$	0.00	12504.97
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _	0.00	(20.) \$12504.97
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.) \$ _	0	_
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _		_
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _	\$0.00	_
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)		0	
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$_		_
b. Unitemized (less than \$50.01 each - no Schedule)	(40h.) \$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(100.) \$ _		
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$ _		(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _	7918.24	_
b. Owed to the Committee (Schedule 1E)	(12b.)\$_		
	BALA	NCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$	11500.27	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	0.00	
	(15.) = \$_	11500.27	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$	0	
(Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	11500.27	*



ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

CANDIDATE COMMITTEE

C-2010-016 1. Committee I.D. Number ___

2. Committee Name Committee to elect Dan Smith

Enter contributor's name middle initial. Check bo Committee (PAC) Repo	x to indicate if contri	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through		
Committee (PAC) Repo	rrall contributions R	egardless of amount.			date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date	of Receipt	-	
				\$	\$
5. If over \$100.00 cumu					
		Employer			
Business Address			5 10 1		
Type of Contribution:		Loan from a persor			
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date	of Receipt		
				\$	\$
5. If over \$100.00 cumu	lative please prov	ride:			
Business Address					
Type of Contribution:	Direct	Loan from a person			
3. Contribution #3	PAC Receipt?		of Receipt		
Name & Address:	PAC Receipt?	YES 4. Date	or Receipt	_	
				\$	\$
5. If over \$100.00 cumu	ılative, please prov	ride:			
Occupation		Employer			
Business Address	Dii				
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Dat	e of Receipt		
				¢	6
				<u> </u>	Đ
5. If over \$100.00 cumu	ulative, please prov	vide:			
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a persor	n Fund Raiser		
			Page Subtota	al \$ -	
			Grand Total of All Schedules 1A	\$0.00	

Page 1 of 1

Enter this total on line 3a of Summary

Page.



ITEMIZED EXPENDITURES SCHEDULE 1B

1. Committee I. D. Number ____

C-2010-016

CANDIDATE COMMITTEE 2. C	ct Dan Smith	<u> </u>	
3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name			\$
Address	Purpose:	Date	
☐ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			\$
Address	Purpose:	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name			\$
Address	Purpose:	Date	
☐ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Address	Purpose:	Date	\$
☐ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			ď.

Purpose: __

statement

Check box if this expenditure is payment of debt or obligation reported on previous

Subtotal this page \$ Grand Total of all Schedules 1B \$ (Complete on last page of Schedule)

Date

Enter this total on line 8a of Summary Page

Page ___1 of ____1

Address

Fund Raiser



DEBTS AND OBLIGATIONS SCHEDULE 1E

C-2010-016 Committee I.D. Number

$C\Delta$	ND	IΠΔ	TE	co	мим	ITTEE
\sim				\sim		

Committee to elect Dan Smith

CANDIDATE COMMITTEE	Cililitado i talific				
This Schedule itemizes:					
a. XDebts and obligations owed <u>by</u> or forgiven the committee OR b. Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. (Check either a or b. Use only for the purpose checked.)					
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	Type of Obligation (Description) Indicate date debt was incurred Indicate original amount of debt	Date and amount of each payment	Cumulative payment to date on debt	Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt #1 Corp? Yes Owed to or by:	4. Type:loan	\$			
Dan Smith 328 N. Pointe Dr. Whitmore Lake, MI 48189	5. <u>Date Debt Was Incurred</u> : 12/28/2011 6. <u>Original Amount of Debt</u> : \$7918.24	\$ \$ \$	\$	\$7,918 \$ FORGIVEN	
If bank loan, name of endorser or guarantor.		Amo	unt Endorsed: \$		
Debt #2 Corp? Yes Owed to or by:	4. Type:	s			
	5. Date Debt Was Incurred:	s			
	6. Original Amount of Debt	\$	\$	s	
	\$	\$		FORGIVEN	
If bank loan, name of endorser or guarantor.	T'	Am	ount Endorsed: \$		
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$			
	5. Date Debt Was Incurred:	\$			
	6. Original Amount of Debt	\$	s	\$	
	\$	\$		FORGIVEN	
		\$\$			
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_		
		Page Subtotal	(Outstanding debt)	\$7,918.24	
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)					
Ente on lir					

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

by" or line 12b "owed to" of the Summary Page

Page ____1 of __1__