



**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: 4/26/2018 to 7/22/2018

1. Committee I.D. Number
C-2018-029

2. Committee Name
Committee to Elect Elizabeth Nelson

4. Candidate Last Name **Nelson** First Name **Elizabeth** M.I. **A**

4a. Office Sought Including District # or Community Served (If applicable)

4b. County of Residence **WASHTENAW**

5. Committee's Mailing Address
**PO Box 2243
Ann Arbor, MI 48106-2243**

Area Code and Phone **(734)997-9688**

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
**Peter J Nelson
1319 Ardmoor Ave
Ann Arbor, MI 48103**

Area Code & Phone **(734)997-9688**

7. Treasurer's Business Address

Area Code and Phone _____

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

Area Code and Phone _____

FILED
 WASHTENAW COUNTY, MI
 2018 JUL 27 A 9:15
 LAURENCE A. STEDMAN
 COUNTY CLERK/REGISTRAR

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

Primary
 General
 Convention
 Special
 School
 Caucus

Date of Election, Convention or Caucus
8/7/2018

Required ONLY if candidate is not on the ballot for the current year:

July Quarterly
 October Quarterly

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

By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution _____

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

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 **Peter Nelson** Signature Date **7/27/2018**

Candidate **Elizabeth Nelson** Signature Date **7/27/2018**



C-2018-029

1. Committee I.D. Number _____

Committee To Elect Elizabeth Nelson

2. Committee Name _____

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>6499.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>6499.00</u>	(18.) \$ <u>6499.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>15.62</u>	(19.) \$ <u>15.62</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>6514.62</u>	(20.) \$ <u>6514.62</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1652.27</u>	(21.) \$ <u>1652.27</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>3247.53</u>	
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.) \$ <u>3247.53</u>	(23.) \$ <u>3247.53</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>3627.11</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>0</u>	
14. Amount received during reporting period - (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>6514.62</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>6514.62</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>3247.53</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>3267.09</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2018-029

1. Committee I.D. Number

2. Committee Name

Committee to Elect Elizabeth Nelson

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 <u>all</u> 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 <u>4/26/2018</u>	
Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>EduStaff LLC</u> Business Address <u>4120 Brockton Dr SE Suite 200 Grand Rapids, MI 495</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/27/2018</u>	
Name & Address: Peter Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103		\$ <u>5</u>	\$ <u>5</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/27/2018</u>	
Name & Address: Thomas J Powell 827 Asa Gray Drive #452 Ann Arbor MI 48105		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/29/2018</u>	
Name & Address: Amy D Seetoo 311 Cedarbrook Rd Ann Arbor, MI 48105		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$655.00**

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**

C-2018-029

1. Committee I.D. Number _____
2. Committee Name Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>4/29/2018</u> Name & Address: <u>William Hathaway</u> <u>3424 Stowe St</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/9/2018</u> Name & Address: <u>Cristina Moisa</u> <u>1324 Ardmoo Ave</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>99</u>	\$ <u>99</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/10/2018</u> Name & Address: <u>Roberta Picard</u> <u>4992 W Liberty</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/17/2018</u> Name & Address: <u>Margaret Yang</u> <u>1309 Arella</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>20</u> Click Here for Memo Itemization

Page Subtotal **\$319**

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**

C-2018-029

1. Committee I.D. Number _____
2. Committee Name Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>5/18/2018</u> Name & Address: <u>Molly Laritz</u> <u>1515 Avondale Ave</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20 \$ _____	20 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: <u>Committee to Elect Sumangala Kailasapathy</u> <u>2530 Mallard Ct</u> <u>Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100 \$ _____	100 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: <u>Ted Wilson</u> <u>1343 Ardmoor Ave</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50 \$ _____	50 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: <u>Elizabeth Hunter</u> <u>827 Bruce St</u> <u>Ann Arbor MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20 \$ _____	20 \$ _____ Click Here for Memo Itemization

Page Subtotal **\$190**

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**

C-2018-029

1. Committee I.D. Number

Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>5/20/2018</u> Name & Address: Charles Lewis 330 S 7th St Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: Chris Nordstrom 3118 Lexington Dr Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: Peter Eckstein 2551 Londonderry Rd Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>190</u>	\$ <u>190</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: Dawn Bizzell 1527 Packard St #2 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization

Page Subtotal **\$340**

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**

C-2018-029

1. Committee I.D. Number _____
2. Committee Name Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>5/20/2018</u> Name & Address: <u>Elena Haviland</u> <u>1201 Meadowbrook St</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u>
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: <u>Edward Steinman</u> <u>621 5th St</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ <u>200</u>
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: <u>Eric Lipson</u> <u>1319 Rosewood St</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u>
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: <u>Themis Joannides</u> <u>1361 Ardmoor Ave</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u>
Click Here for Memo Itemization		

Page Subtotal **\$450**

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**

C-2018-029

1. Committee I.D. Number

Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>5/20/2018</u> Name & Address: Stefanie Horvath 1312 Ardmoor Ave Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Communications Director</u> Employer <u>University of Michigan</u> Click Here for Memo Itemization Business Address <u>4251 Plymouth Rd, Ann Arbor, Mi 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	250 \$ _____	250 \$ _____
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/20/2018</u> Name & Address: Steve Kwasny 914 Dewey Ave Apt 2 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	30 \$ _____	30 \$ _____
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/22/2018</u> Name & Address: Sonja Page 1354 Ardmoor Ave Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50 \$ _____	50 \$ _____
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/22/2018</u> Name & Address: Anne Bannister 612 N Main Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100 \$ _____	100 \$ _____

Page Subtotal **\$430**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2018-029

1. Committee I.D. Number _____
2. Committee Name Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>5/22/2018</u> Name & Address: Kathy Boris 1726 Charlton Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50 \$ _____	50 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/28/2018</u> Name & Address: Kay Holsinger 2300 Kent St Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100 \$ _____	100 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/5/2018</u> Name & Address: Diane McCarthy 2831 Catalpa Circle Ann Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50 \$ _____	50 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/10/2018</u> Name & Address: Jason DeBord 326 Rolling Meadows Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20 \$ _____	20 \$ _____ Click Here for Memo Itemization

Page Subtotal **\$220**

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

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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2018-029

1. Committee I.D. Number _____
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3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/11/2018</u> Name & Address: <u>Vivienne Armentrout</u> <u>920 Vesper Rd</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/11/2018</u> Name & Address: <u>James Walker</u> <u>2050 Camelot Rd</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/12/2018</u> Name & Address: <u>Susan Perry</u> <u>1708 Fair Street</u> <u>Ann Arbor, MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Broker</u> Employer <u>Sue Perry Real Estate</u> Business Address <u>1708 Fair Street, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>300</u>	\$ <u>300</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/13/2018</u> Name & Address: <u>Peter Nabourney</u> <u>914 Lincoln Ave</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization

Page Subtotal **\$450**

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

C-2018-029

1. Committee I.D. Number _____
Committee To Elect Elizabeth Nelson
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 <u>all</u> 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 <u>6/15/2018</u> Name & Address: Walli Bellairs 2574 Packard St Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10 \$ _____	10 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/18/2018</u> Name & Address: Ann L Lund 1510 Jones Dr Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10 \$ _____	10 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/20/2018</u> Name & Address: Patricia Cahill 2931 Birch Hollow Dr Ann Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25 \$ _____	25 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/20/2018</u> Name & Address: Frances J Lyman 1134 Meadowbrook St Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	30 \$ _____	30 \$ _____ Click Here for Memo Itemization

Page Subtotal **\$75**

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**

C-2018-029

1. Committee I.D. Number

Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>6/20/2018</u>	
Name & Address: Glenn L Nelson 1323 Forest Ave Ann Arbor, MI 48104		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
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 <u>6/20/2018</u>	
Name & Address: Ulla Roth 1318 Franklin Blvd Ann Arbor, MI 48103		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
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 <u>6/21/2018</u>	
Name & Address: Teresa M Schumacher 2526 Londonderry Ann Arbor, MI 48104		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
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 <u>6/21/2018</u>	
Name & Address: J Bradley Cook 1481 Pine Valley Blvd Ann Arbor, MI 48104		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$300**

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**

C-2018-029

1. Committee I.D. Number _____
2. Committee Name Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>6/22/2018</u>	
Name & Address: <u>Jane Lumm</u> <u>3075 Override Dr</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6/24/2018</u>	
Name & Address: <u>Daniel Ketelaar</u> <u>225 S Ashley St</u> <u>Ann Arbor, MI 48104</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6/26/2018</u>	
Name & Address: <u>Sivana Heller</u> <u>128 W Hoover Ave</u> <u>Ann Arbor, MI 48103</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Research scientist</u> Employer <u>IBM Watson Health</u> Business Address <u>100 Phoenix Dr., Ann Arbor MI 48108</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6/26/2018</u>	
Name & Address: <u>Vincent and Rita Caruso</u> <u>556 Glendale Cir</u> <u>Ann Arbor, MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$450**

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**

C-2018-029

1. Committee I.D. Number

Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>6/26/2018</u> Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>EduStaff LLC</u> Business Address <u>4120 Brockton Dr SE Suite 200 Grand Rapids, MI 495</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	2000 \$	2500 \$ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/28/2018</u> Name & Address: Janette Jackson 1432 Ardmoor Ave Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50 \$	50 \$ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/29/2018</u> Name & Address: Mary Hathaway 1407 Wakefield Ave Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100 \$	100 \$ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/29/2018</u> Name & Address: Lynda Oswald and Brad Tomtishen 1910 Cambridge Rd Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100 \$	100 \$ Click Here for Memo Itemization

Page Subtotal **\$2250**

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**

C-2018-029

1. Committee I.D. Number

Committee To Elect Elizabeth Nelson

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 <u>all</u> 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 <u>7/1/2018</u> Name & Address: Margaret Yang 1309 Arella Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>40</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/13/2018</u> Name & Address: Agnes Reading 161 Laurin Ct Ann Arbor, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/21/2018</u> Name & Address: Peter Heydon 3562 W Huron River Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>250</u>	\$ <u>250</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization

Page Subtotal **\$370**

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

\$6499

Enter this total on
line 3a of Summary
Page.



**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1
CANDIDATE COMMITTEE**

C-2018-029

1. Committee I.D. Number _____

2. Committee Name Committee to Elect Elizabeth Nelsor

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: PayPal 2211 North First Street San Jose, California 95131	Date of Receipt <u>4/30/2018</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input checked="" type="checkbox"/> Other (Specify) <u>PayPal verification deposits</u>	\$ <u>0.38</u>
Receipt #2 Name & Address: Midwest Buttons 25735 Leach St Roseville, Michigan 48066	Date of Receipt <u>5/18/2018</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ <u>15.24</u>
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Page Subtotal			15.62
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			15.62

Enter this total on
line 4 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number C-2018-029

2. Committee Name Committee to Elect Elizabeth Nelson

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Business Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN website fees Description _____ 5. Date Of Receipt: <u>4/16/2018</u> 6. Vendor Name & Address: wix.com 2601 Mission Street San Francisco, CA 94110 Click Here for Memo Itemization	\$ <u>47.70</u>	\$ <u>47.70</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN website fees Description _____ 5. Date Of Receipt: <u>4/23/2018</u> 6. Vendor Name & Address: wix.com 2601 Mission Street San Francisco, CA 94110 Click Here for Memo Itemization	\$ <u>48.96</u>	\$ <u>98.66</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN website fees Description _____ 5. Date Of Receipt: <u>4/24/2018</u> 6. Vendor Name & Address: wix.com 2601 Mission Street San Francisco, CA 94110 Click Here for Memo Itemization	\$ <u>84.00</u>	\$ <u>180.66</u>

Page Subtotal **180.66** **180.66**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number C-2018-029

2. Committee Name Committee to Elect Elizabeth Nelson

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Business Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN website fees Description _____ 5. Date Of Receipt: <u>4/24/2018</u> 6. Vendor Name & Address: wix.com 2601 Mission Street San Francisco, CA 94110 Click Here for Memo Itemization	\$ 33.75	\$ 214.41
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN postage Description _____ 5. Date Of Receipt: <u>4/25/2018</u> 6. Vendor Name & Address: Ann Arbor Post Office 2075 W Stadium Blvd Ann Arbor MI 48103 Click Here for Memo Itemization	\$ 35.00	\$ 249.41
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN post office box rental Description _____ 5. Date Of Receipt: <u>4/26/2018</u> 6. Vendor Name & Address: Ann Arbor Post Office 2075 W Stadium Blvd Ann Arbor MI 48103 Click Here for Memo Itemization	\$ 35.00	\$ 284.41

Page Subtotal **103.75** **284.41**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number C-2018-029

Committee to Elect Elizabeth Nelson

CANDIDATE COMMITTEE

2. Committee Name

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Business Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Buttons</u> 5. Date Of Receipt: <u>5/1/2018</u> 6. Vendor Name & Address: Midwest Buttons 25735 Leach St Roseville, Michigan 48066 Click Here for Memo Itemization	\$ <u>20.00</u>	\$ <u>304.91</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Yard signs</u> 5. Date Of Receipt: <u>5/2/2018</u> 6. Vendor Name & Address: Sawiki and Sons 1521 W. Lafayette Detroit, MI 48216 Click Here for Memo Itemization	\$ <u>516.75</u>	\$ <u>821.66</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Printing</u> 5. Date Of Receipt: <u>5/4/2018</u> 6. Vendor Name & Address: City Printing Company, Inc 411 W Cross St Ypsilanti MI 48198 Click Here for Memo Itemization	\$ <u>430.36</u>	\$ <u>1252.02</u>

Page Subtotal

967.61

1252.02

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number C-2018-029
2. Committee Name Committee to Elect Elizabeth Nelson

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Business Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>T-shirt printing</u> 5. Date Of Receipt: <u>5/18/2018</u> 6. Vendor Name & Address: Heikkinen Productions 1410 W Michigan Ave Ypsilanti, MI 48198 Click Here for Memo Itemization	\$ <u>229.95</u>	\$ <u>1481.97</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Bitsy Lamb 1606 Dicken Dr Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>food/beverages for kickoff</u> 5. Date Of Receipt: <u>5/18/2018</u> 6. Vendor Name & Address: Kroger 400 S Maple Ann Arbor, MI 48103 Click Here for Memo Itemization	\$ <u>25.16</u>	\$ <u>25.16</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>food/utensils for kickoff</u> 5. Date Of Receipt: <u>5/19/2018</u> 6. Vendor Name & Address: Gordon Food Service Store 2151 W Liberty St Ann Arbor, MI 48103 Click Here for Memo Itemization	\$ <u>54.88</u>	\$ <u>1536.85</u>

Page Subtotal **309.99** **1562.01**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2018-029

Committee to Elect Elizabeth Nelson

2. Committee Name

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Business Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>beverages for kickoff</u> 5. Date Of Receipt: <u>5/20/2018</u> 6. Vendor Name & Address: Busch's Fresh Food Market 2240 S Main St Ann Arbor, MI 48103 Click Here for Memo Itemization	\$ <u>23.47</u>	\$ <u>1560.32</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>food for kickoff</u> 5. Date Of Receipt: <u>5/20/2018</u> 6. Vendor Name & Address: Costco 771 Airport Blvd Pittsfield, MI 48108 Click Here for Memo Itemization	\$ <u>31.79</u>	\$ <u>1592.11</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Teacher Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49152 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>postage</u> 5. Date Of Receipt: <u>5/23/2018</u> 6. Vendor Name & Address: Ann Arbor Post Office 2075 W Stadium Blvd Ann Arbor MI 48103 Click Here for Memo Itemization	\$ <u>35.00</u>	\$ <u>1627.11</u>

Page Subtotal **90.26** **1627.11**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **1652.27**

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

C-2018-029

1. Committee I. D. Number _____
2. Committee Name Committee to Elect Elizabeth Nelson

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Comerica Bank Address 1969 W Stadium Blvd Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Check printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/11/2018</u> Date	\$ <u>25.45</u> Click Here for Memo Itemization Type
Expenditure #2 Name Sawiki and Sons Address 1521 W. Lafayette Detroit, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/11/2018</u> Date	\$ <u>516.75</u> Click Here for Memo Itemization Type
Expenditure #3 Name Midwest Buttons Address 25735 Leach St Roseville, Michigan 48066 <input type="checkbox"/> Fund Raiser	Purpose: <u>Buttons</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/14/2018</u> Date	\$ <u>33.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name Ann Arbor Post Office Address 2075 W Stadium Blvd Ann Arbor MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Return postage to Midwest Buttons</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/16/2018</u> Date	\$ <u>15.24</u> Click Here for Memo Itemization Type
Expenditure #5 Name Pileated Brewing Address 2290 S Industrial Hwy Ann Arbor, MI 48104 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/20/2018</u> Date	\$ <u>140.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$730.44**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

C-2018-029

1. Committee I. D. Number _____
Committee to Elect Elizabeth Nelson
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name City Printing Company, Inc Address 411 W Cross St Ypsilanti MI 48198 <input type="checkbox"/> Fund Raiser	Purpose: Printing <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5/25/2018 Date	\$ 83.95
Expenditure #2 Name Midwest Buttons Address 25735 Leach St Roseville, Michigan 48066 <input type="checkbox"/> Fund Raiser	Purpose: Buttons <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5/31/2018 Date	\$ 63.00
Expenditure #3 Name Ann Arbor Jaycees Address PO Box 1866 Ann Arbor, MI 48106-1866 <input type="checkbox"/> Fund Raiser	Purpose: Parade fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6/12/2018 Date	\$ 51.18
Expenditure #4 Name Comerica Bank Address 1969 W Stadium Blvd Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: Check endorsement stamp <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6/13/2018 Date	\$ 46.70
Expenditure #5 Name SweetServices.com Address 10319 Vans Drive Frankfort, IL 60423 <input type="checkbox"/> Fund Raiser	Purpose: Parade candy <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6/18/2018 Date	\$ 105.90

Subtotal this page **\$350.73**

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

C-2018-029

1. Committee I. D. Number _____
2. Committee Name Committee to Elect Elizabeth Nelson

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name City Printing Company, Inc Address 411 W Cross St Ypsilanti MI 48198 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/19/2018</u> Date	\$ <u>463.22</u> Click Here for Memo Itemization Type
Expenditure #2 Name City Printing Company, Inc Address 411 W Cross St Ypsilanti MI 48198 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/21/2018</u> Date	\$ <u>519.30</u> Click Here for Memo Itemization Type
Expenditure #3 Name Unit Packaging Address 119 Enterprise Dr Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/21/2018</u> Date	\$ <u>700.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name Rae Brigham Address 1330 Ardmoor Ave Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/26/2018</u> Date	\$ <u>400.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name Pioneer Tip Off Club Address 4024 Rolling Meadow Lane Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Golf Scramble Sponsorship</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/18/2018</u> Date	\$ <u>50.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$2132.62**

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

C-2018-029

1. Committee I. D. Number _____

Committee to Elect Elizabeth Nelson

2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name PayPal Address 2211 North First Street San Jose, California 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction fees <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	7/22/2018 Date	\$ 33.74
Expenditure #2 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	\$ _____
Expenditure #3 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	\$ _____
Expenditure #4 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	\$ _____
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	33.74
Grand Total of all Schedules 1B (Complete on last page of Schedule)	3247.53

Enter this total on line 8a of Summary Page



C-2018-029

**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____
2. Committee Name Committee to Elect Elizabeth Nelson

This Schedule itemizes:

a. Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. 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 endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103	4. Type: <u>Loan to committee</u> 5. <u>Date Debt Was Incurred:</u> <u>6/26/2018</u> 6. <u>Original Amount of Debt:</u> \$ <u>2000.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>2000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103	4. Type: <u>In Kind Donations</u> 5. <u>Date Debt Was Incurred:</u> <u>4/16/2018-5/23/2018</u> 6. <u>Original Amount of Debt:</u> \$ <u>1627.11</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>1627.11</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$3627.11**
Grand Total of all Schedules 1E **\$3627.11**
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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.



C-2018-029

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____

2. Committee Name Committee to Elect Elizabeth Nelson

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>5/20/2018</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>40</u>	5. Type of Fund Raising Activity <u>Reception</u>	6. Address and Name (If any) of the place where the activity was held. <u>Pileated Brewing</u> <u>2290 S Industrial Hwy,</u> <u>Ann Arbor, MI 48104</u> <input type="checkbox"/> Private Residence
--	---	--	--

7. Total Contributions \$1240.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$1240.00

10. Total Cost of Event \$275.30

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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.