



**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: 7/23/2018 to 8/27/2018

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)
Ann Arbor City Council Ward 4

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 SEP -6 A 11:37
 LAWRENCE KESTENBAUM
 COUNTY CLERK/REGISTER

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 lates 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 [Signature] Date 9/6/2018

Candidate Elizabeth Nelson Signature [Signature] Date 9/6/2018



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

2. Committee Name Committee To Elect Elizabeth Nelson

**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>1885.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>1885.00</u>	(18.) \$ <u>8384.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>15.62</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>1885.00</u>	(20.) \$ <u>8399.62</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>81.97</u>	(21.) \$ <u>1734.24</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>4869.01</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>4869.01</u>	(23.) \$ <u>8116.54</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>3500.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>3242.09</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>1885.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>5127.09</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>4869.01</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>258.08</u>	*



**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>7/23/2018</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 St 200 Grand Rapids MI 49512</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	1000 \$ _____	3500 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/23/2018</u> Name & Address: Jordan Siegel 322 E Liberty 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	25 \$ _____	25 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/24/2018</u> Name & Address: Omni Nickle 811 W Weed St Chicago, IL 60642 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 # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/24/2018</u> Name & Address: Andrew Thomas and Rina Miller 1425 W Stadium Blvd 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

Page Subtotal **\$1085**

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>8/2/2018</u> Name & Address: <u>Sierra Club Michigan Chapter Political Committee</u> <u>109 E Grand River Ave</u> <u>Lansing, MI 48906</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		
Click Here for Memo Itemization		
Occupation _____ Employer _____		
Business Address _____		
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>8/3/2018</u> Name & Address: <u>Irvin Mermelstein</u> <u>2099 Ascot St</u> <u>Ann Arbor, MI 48103</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		
Click Here for Memo Itemization		
Occupation _____ Employer _____		
Business Address _____		
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>8/23/2018</u> Name & Address: <u>Nancy Sudia</u> <u>2115 Nature Cove Ct #103</u> <u>Ann Arbor, MI 48104</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		
Click Here for Memo Itemization		
Occupation _____ Employer _____		
Business Address _____		
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>8/27/2018</u> Name & Address: <u>Elizabeth Nelson</u> <u>1319 Ardmoor Ave</u> <u>Ann Arbor, MI 48103</u>	\$ <u>500</u>	\$ <u>4000</u>
5. If over \$100.00 cumulative, please provide:		
Click Here for Memo Itemization		
Occupation <u>Teacher</u> Employer <u>EduStaff LLC</u>		
Business Address <u>4120 Brockton Dr SE St 200 Grand Rapids MI 49512</u>		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal	\$800
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$1885

Enter this total on line 3a 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: Employer Name & Business Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49512 <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>office supplies</u> 5. Date Of Receipt: <u>7/30/2018</u> 6. Vendor Name & Address: Staples 2601 Jackson St Ann Arbor, MI 48103 Click Here for Memo Itemization	\$ <u>11.97</u>	\$ <u>1639.08</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: Employer Name & Address: EduStaff LLC 4120 Brockton Dr SE Suite 200 Grand Rapids, MI 49512 <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>7/30/2018</u> 6. Vendor Name & Address: Ann Arbor Post Office 2075 W Stadium Blvd Ann Arbor MI 48103 Click Here for Memo Itemization	\$ <u>70.00</u>	\$ <u>1709.08</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <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 type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: Click Here for Memo Itemization	\$ _____	\$ _____

Page Subtotal **81.97** **1709.08**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **81.97**

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 Jonathan Awwad Address 616 Susan Dr Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>literature distribution</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/23/2018</u> Date	\$ <u>60.00</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>7/23/2018</u> Date	\$ <u>1282.60</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>7/23/2018</u> Date	\$ <u>1300.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name Jonathan Awwad Address 616 Susan Dr Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>literature distribution</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/29/2018</u> Date	\$ <u>70.00</u> Click Here for Memo Itemization Type
Expenditure #5 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>8/2/2018</u> Date	\$ <u>143.10</u> Click Here for Memo Itemization Type

Subtotal this page **2855.70**

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 Jonathan Awwad Address 616 Susan Dr Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>literature distribution</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/10/2018</u> Date	\$ <u>150.00</u> Click Here for Memo Itemization Type
Expenditure #2 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>8/25/2018</u> Date	\$ <u>150.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name PayPal Address 2211 North First Street San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: <u>transaction fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/27/2018</u> Date	\$ <u>4.23</u> Click Here for Memo Itemization Type
Expenditure #4 Name Elizabeth Nelson Address 1319 Ardmoor Ave Ann Arbor, MI 48108 <input type="checkbox"/> Fund Raiser	Purpose: <u>loan repayment</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/27/2018</u> Date	\$ <u>1709.08</u> Click Here for Memo Itemization Type
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	\$ _____ Click Here for Memo Itemization Type

Subtotal this page	2013.31
Grand Total of all Schedules 1B (Complete on last page of Schedule)	4869.01

Enter this total on line 8a of Summary Page



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

C-2018-029

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 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	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</u> <input type="checkbox"/> FORGIVEN
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>4/16/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 47.70</u> <u>website fees</u>	8/27/2018 \$ <u>47.70</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>47.70</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>4/23/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 48.96</u> <u>website fees</u>	8/27/2018 \$ <u>48.96</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>48.96</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN

Page Subtotal (Outstanding debt) 2000

Grand Total of all Schedules 1E
(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.



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

C-2018-029

1. Committee I.D. Number _____

2. Committee Name Committee to Elect Elizabeth Nelson

This Schedule Itemizes:				
a. <input checked="" type="checkbox"/> Debts and obligations owed <u>by</u> or forgiven the committee OR b. <input type="checkbox"/> 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.)				
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	In Kind 4. Type: _____ 5. <u>Date Debt Was Incurred:</u> 4/24/2018 6. <u>Original Amount of Debt:</u> \$ 84.00	8/27/2018 \$ 84.00 _____ \$ _____ _____ \$ _____ _____	\$ 84.00	\$ 0 <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	In Kind 4. Type: _____ 5. <u>Date Debt Was Incurred:</u> 4/24/2018 6. <u>Original Amount of Debt:</u> \$ 33.75	8/27/2018 \$ 33.75 _____ \$ _____ _____ \$ _____ _____	\$ 33.75	\$ 0 <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: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103	In Kind 4. Type: _____ 5. <u>Date Debt Was Incurred:</u> 4/25/2018 6. <u>Original Amount of Debt:</u> \$ 35.00	8/27/2018 \$ 35.00 _____ \$ _____ _____ \$ _____ _____	\$ 35.00	\$ 0 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 0
Grand Total of all Schedules 1E _____
(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

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 endorsers 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>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>4/26/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 35.00</u>	8/27/2018 \$ <u>35.00</u> \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>35.00</u>	\$ <u>0</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</u> 5. <u>Date Debt Was Incurred:</u> <u>5/1/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 20.50</u>	8/27/2018 \$ <u>20.50</u> \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>20.50</u>	\$ <u>0</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: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>5/2/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 516.75</u>	8/27/2018 \$ <u>516.75</u> \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>516.75</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				<u>0</u>
Grand Total of all Schedules 1E (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

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 endorsers 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 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>5/4/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 430.36</u> <u>printing</u>	8/27/2018 \$ <u>430.36</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>430.36</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>5/18/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 229.95</u> <u>t-shirt printing</u>	8/27/2018 \$ <u>229.95</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>229.95</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>5/19/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 54.88</u> <u>food/utensils for kickoff</u>	8/27/2018 \$ <u>54.88</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>54.88</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN

Page Subtotal (Outstanding debt) 0

Grand Total of all Schedules 1E
(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

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 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>5/20/2018</u> 6. <u>Original Amount of Debt:</u> \$ <u>23.47</u> <u>beverages for kickoff</u>	8/27/2018 \$ <u>23.47</u> _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>23.47</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>5/20/2018</u> 6. <u>Original Amount of Debt:</u> \$ <u>31.79</u> <u>food for kickoff</u>	8/27/2018 \$ <u>31.79</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>31.79</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>5/23/2018</u> 6. <u>Original Amount of Debt:</u> \$ <u>35.00</u> <u>postage</u>	8/27/2018 \$ <u>35.00</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>35.00</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN

Page Subtotal (Outstanding debt) 0

Grand Total of all Schedules 1E
(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

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 endorsers 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>7/23/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1000</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>1000</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</u> 5. <u>Date Debt Was Incurred:</u> <u>7/30/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 11.97</u> <u>office supplies</u>	8/27/2018 \$ <u>11.97</u> \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>11.97</u>	\$ <u>0</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: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor, MI 48103	4. Type: <u>In Kind</u> 5. <u>Date Debt Was Incurred:</u> <u>7/30/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 70.00</u> <u>postage</u>	8/27/2018 \$ <u>70.00</u> \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>70.00</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)	1000
Grand Total of all Schedules 1E (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.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

C-2018-029

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 endorsers 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>8/27/2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 500</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>500</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:	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: \$ _____				
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) 500
 Grand Total of all Schedules 1E 3500
 (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

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