



**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.

1. Committee I.D. Number C-2018-029		3. This Statement covers From: 11/27/2018 to 12/31/2018	
2. Committee Name Committee to Elect Elizabeth Nelson		4. Candidate Last Name Nelson First Name Elizabeth M.I. A	
5. Committee's Mailing Address PO Box 2243 Ann Arbor, MI 48106-2243		4a. Office Sought Including District # or Community Served (If applicable) Ann Arbor City Council Ward 4	
Area Code and Phone (734) 997-9688		4b. County of Residence WASHTENAW	
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	
7. Treasurer's Business Address		Area Code & Phone (734) 997-9688	
Area Code and Phone _____		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)	
Area Code and Phone _____		Area Code and Phone _____	

FILED
WASHTENAW COUNTY, MI
2019 JAN 16 P 1:55
LAWRENCE KESTENBAUM
COUNTY CLERK/REGISTRAR

9. TYPE OF STATEMENT		9e. Dissolution of Candidate Committee	
9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election		<input type="checkbox"/> 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.	
Pre-Election or Post-Election Statement relates to:		Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.	
<input type="checkbox"/> Primary		Effective date of dissolution _____	
<input type="checkbox"/> General		Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
<input type="checkbox"/> Convention			
<input type="checkbox"/> Special			
<input type="checkbox"/> School			
<input type="checkbox"/> Caucus			
Date of Election, Convention or Caucus _____			
Required ONLY if candidate is not on the ballot for the current year:			
<input type="checkbox"/> July Quarterly			
<input type="checkbox"/> October Quarterly			
9c. <input checked="" type="checkbox"/> Annual Statement (2018) Coverage Year			
9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)			

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	1/14/2019
	Type or Print Name				
Candidate	Elizabeth Nelson	Signature		Date	1/14/2019
	Type or Print Name				



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>0</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>0</u>	(18.) \$ <u>0</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>0</u>	(20.) \$ <u>0</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0</u>	(21.) \$ <u>0</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>20.00</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>20.00</u>	(23.) \$ <u>20.00</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>1000.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u> </u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>349.79</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>0</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>349.79</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>20.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>329.79</u>	*



**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 Facebook Address 1 Hacker Way Menlo Park, CA 94025 <input type="checkbox"/> Fund Raiser	Purpose: advertising <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	11/30/2018 Date	\$ 20.00
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	20
Grand Total of all Schedules 1B (Complete on last page of Schedule)	20

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</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>2000</u> <input checked="" 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>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 #3 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 checked="" 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)	1000

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.