



**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.

<p>1. Committee I.D. Number C-2014-004</p>		<p>3. This Statement covers: from <u>07/21/14</u> to <u>08/25/14</u></p>	
<p>2. Committee Name Sally Hart Petersen for Mayor</p>		<p>4. Candidate Last Name First Name M.I. Petersen Sally H</p> <p>4a. Office Sought Including District # or Community Served (If applicable) Mayor, Ann Arbor</p> <p>4b. County of Residence WASHTENAW</p>	
<p>5. Committee's Mailing Address 2976 Hickory Lane Ann Arbor, MI 48104</p> <p>Area Code and Phone <u>(734) 996-5569</u> 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.</p>		<p>6. Treasurer's Name & Residential Address Perry Zielak 3386 Columbus Lane Ann Arbor, MI 48103</p> <p>Area Code & Phone <u>(847) 736-9615</u></p>	
<p>7. Treasurer's Business Address N/A</p> <p>Area Code and Phone _____</p>		<p>8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) N/A</p> <p>Area Code and Phone _____</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>08/05/14</u></p>		<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	
		<p>9e. Dissolution of Candidate Committee</p> <p><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 hereby 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.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>	
<p>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.</p>			
<p>Current Treasurer or Designated Record Keeper <u>Perry Zielak</u> Type or Print Name</p>		<p><i>Perry Zielak</i> Signature Date <u>9/3/14</u></p>	
<p>Candidate <u>Sally Hart Petersen</u> Type or Print Name</p>		<p><i>Sally Hart Petersen</i> Signature Date <u>9/3/14</u></p>	

FILED
 WASHTEENAW COUNTY
 2014 SEP - 4
 LAWRENCE KESTER
 COUNTY CLERK



1. Committee I.D. Number C-2014-004

2. Committee Name Sally Hart Petersen for Mayor

**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>6,472.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>6,472.00</u>	(18.) \$ <u>50,967.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>8.08</u>	(19.) \$ <u>8.08</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>6,480.08</u>	(20.) \$ <u>50,975.08</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1,036.11</u>	(21.) \$ <u>4,707.09</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>10,504.87</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>10,504.87</u>	(23.) \$ <u>49,945.64</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>5,054.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>6,480.08</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>11,534.08</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>10,504.87</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1,029.21</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

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>07/23/14</u> Name & Address: <u>Janet Keller</u> <u>224 W. Summit 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>72.00</u>	\$ <u>72.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/23/14</u> Name & Address: <u>Tamara Seyhun</u> <u>2039 Valleyview Dr.</u> <u>Ann Arbor, MI 48105</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Manufacturing & Sales</u> Employer <u>Self</u> Business Address <u>2039 Valleyview Dr. 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	\$ <u>250</u>	\$ <u>250</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/24/14</u> Name & Address: <u>Sally Hart Petersen</u> <u>2976 Hickory Lane</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>City Council Member</u> Employer <u>City of Ann Arbor</u> Business Address <u>301 E. Huron St. Ann Arbor, MI 48107</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>5000</u>	\$ <u>16734.97</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/28/14</u> Name & Address: <u>Patty Ireland</u> <u>356 Ausable Pl.</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>100</u>	\$ <u>100</u> Click Here for Memo Itemization

Page Subtotal \$5,422.00

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**

1. Committee I.D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

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>07/28/14</u> Name & Address: <u>Pam Johann</u> <u>59 Roble Rd.</u> <u>Berkeley, CA 94705</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Self</u> Business Address <u>59 Roble Rd. Berkeley, CA 94705</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ <u>200</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/28/14</u> Name & Address: <u>Jeffery David</u> <u>1419 Kearney 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>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/30/14</u> Name & Address: <u>James Simpson</u> <u>PO Box 777</u> <u>Ann Arbor, MI 48107</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 # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/01/14</u> Name & Address: <u>Yawen Huang</u> <u>5688 Overbrook Ct.</u> <u>Ann Arbor, MI 48104</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Entrepreneur</u> Employer <u>Self</u> Business Address <u>5688 Overbrook Ct. Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ <u>200</u> Click Here for Memo Itemization

Page Subtotal \$550.00

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**

1. Committee I.D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/08/14

Name & Address:
Sally Hart Petersen
2976 Hickory Lane
Ann Arbor, MI 48104

6. Amount \$ 500 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 18271.08

5. If over \$100.00 cumulative, please provide:
Occupation City Council Member Employer City of Ann Arbor
Business Address 301 E. Huron St. Ann Arbor, MI 48107
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt _____

Name & Address _____

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt _____

Name & Address: _____

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt _____

Name & Address _____

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal	\$500.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$6,472.00

Enter this total on line 3a of Summary Page.



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

1. Committee I.D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: Unit Packaging & Mailing 119 Enterprise Dr. Ann Arbor, MI 48103	Date of Receipt <u>08/08/14</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ <u>8.08</u>
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	\$ _____
Page Subtotal			\$8.08
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			\$8.08

Enter this total on
line 4 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number C2014004

CANDIDATE COMMITTEE

2. Committee Name Sally Hart Petersen for Mayor

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: Sally Hart Petersen 2976 Hickory Lane Ann Arbor, MI 48104 If over \$100.00 cumulative, please provide: Occupation: City Council Member Employer Name & Business Address: City of Ann Arbor 301 E. Huron St. Ann Arbor, MI 48107 <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 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>Office goods</u> 5. Date Of Receipt: <u>07/25/14</u> 6. Vendor Name & Address: FedEx Office 2609 Plymouth Rd. Ann Arbor, MI 48105 Click Here for Memo Itemization	\$ <u>29.61</u>	\$ <u>16764.58</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Sally Hart Petersen 2976 Hickory Lane Ann Arbor, MI 48104 If over \$100.00 cumulative, please provide: Occupation: City Council Member Employer Name & Address: City of Ann Arbor 301 E. Huron St. Ann Arbor, MI 48107 <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 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>Election night event</u> 5. Date Of Receipt: <u>08/05/14</u> 6. Vendor Name & Address: Live 102 S. 1st St. Ann Arbor, MI 48104 Click Here for Memo Itemization	\$ <u>1006.50</u>	\$ <u>17771.08</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	\$1,036.11	\$34,535.66
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$1,036.11	

Enter this total on line 6 of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Metzgers Address 207 Arco Dr. Toledo, OH 43607 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postcard printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/22/14</u> Date	<u>\$ 857.79</u> Click Here for Memo Itemization Type
Expenditure #2 Name Unit Packaging & Mailing Address 119 Enterprise Dr. Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postcard mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/22/14</u> Date	<u>\$ 2808.91</u> Click Here for Memo Itemization Type
Expenditure #3 Name United States Postal Service Address 3000 Green Rd. Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/23/14</u> Date	<u>\$ 196</u> Click Here for Memo Itemization Type
Expenditure #4 Name Adams Outdoor Advertising Address 880 James L Hart Parkway Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Digital billboard Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/24/14</u> Date	<u>\$ 1600</u> Click Here for Memo Itemization Type
Expenditure #5 Name Adams Outdoor Advertising Address 880 James L Hart Parkway Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Banner</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/28/14</u> Date	<u>\$ 20.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$5,482.70**

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**

1. Committee I. D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FedEx Office Address 2609 Plymouth Rd. Ann Arbor, MI 48105 <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>07/28/14</u> Date	<u>\$ 219.42</u>
Expenditure #2 Name FedEx Office Address 2609 Plymouth Rd. Ann Arbor, MI 48105 <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>07/29/14</u> Date	<u>\$ 6.18</u>
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 United States Postal Service Address 3000 Green Rd. Ann Arbor, MI 48105 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/28/14</u> Date	<u>\$ 196</u>
Expenditure #5 Name Holiday's Restaurant Address 2080 Stadium Blvd. Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Food for event</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/25/14</u> Date	<u>\$ 69.07</u>
Subtotal this page			\$490.67
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**

1. Committee I. D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Unit Packaging & Mailing Address 119 Enterprise Dr. Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postcard mailing</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/14</u> Date	<u>\$ 640</u>
Expenditure #2 Name Metzgers Address 207 Arco Dr. Toledo, OH 43607 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postcard printing</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/14</u> Date	<u>\$ 668.91</u>
Expenditure #3 Name The Maggio Line Address 450 S. Main St. Suite 1 Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postcard design</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/14</u> Date	<u>\$ 260</u>
Expenditure #4 Name Fitzgerald Communication LLC Address 450 S. Main St. Suite 2 Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Copy editing</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/14</u> Date	<u>\$ 60</u>
Expenditure #5 Name Fitzgerald Communication LLC Address 450 S. Main St. Suite 2 Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Copy editing</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/14</u> Date	<u>\$ 210</u>

Subtotal this page **\$1,838.91**

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**

1. Committee I. D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name NGP VAN Address 1101 15th St. NW Suite 500 Washington DC 20005 <input type="checkbox"/> Fund Raiser	Purpose: <u>Online donation page</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/04/14</u> Date	<u>\$ 150</u>
Expenditure #2 Name Google Address 1600 Amphitheatre Parkway Mountain View, CA 94043 <input type="checkbox"/> Fund Raiser	Purpose: <u>Google Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/24/14</u> Date	<u>\$ 86.58</u>
Expenditure #3 Name Sage Payment Solutions Address 1750 Old Meadow Rd. #300 McLean, VA 22102 <input type="checkbox"/> Fund Raiser	Purpose: <u>Online processing fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/04/14</u> Date	<u>\$ 81.92</u>
Expenditure #4 Name Web Arch LLC Address 3802 14th St. N Arlington, VA 22201 <input type="checkbox"/> Fund Raiser	Purpose: <u>Website maintenance</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/08/14</u> Date	<u>\$ 600</u>
Expenditure #5 Name Google Address 1600 Amphitheatre Parkway Mountain View, CA 94043 <input type="checkbox"/> Fund Raiser	Purpose: <u>Google Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/25/14</u> Date	<u>\$ 64.77</u>

Subtotal this page **\$983.27**

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**

1. Committee I. D. Number C-2014-004
2. Committee Name Sally Hart Petersen for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Ted Lawrence Address 2972 Hickory Lane Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing Reimbursement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/14</u> Date	<u>\$ 513.32</u> Vendor: Dollar Bill Copying 611 Church St. A2 48104 Click Here for Memo Itemization Type
Expenditure #2 Name Jeanine DeLay Address 2972 Hickory Lane Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps Reimbursement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/14</u> Date	<u>\$ 196</u> Vendor: USPS 3000 Green Rd. Ann Arbor, MI 48105 Click Here for Memo Itemization Type
Expenditure #3 Name SMG Strategies Inc Address PO Box 1464 Holland, MI 49422 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign consultation fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/08/14</u> Date	<u>\$ 1000</u> Click Here for Memo Itemization Type
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	\$ _____ 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 **\$1,709.32**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$10,504.87**

Enter this total
on line 8a of
Summary Page