



CANDIDATE COMMITTEE COVER PAGE

Committee ID	C-2010-13		
Committee Name	John Eaton for Council		
Coverage Period	01/01/2011 - 12/31/2011		
Candidate Name	John Eaton		
Office/District Sought	City Council, Ward 4		
County of Residence	Washtenaw		
Address Information			
Committee Mailing	26261 Evergreen Rd., Suite 110 Southfield MI 48076		
Phone	(248) 355-2150		
Treasurer Name	Mark Cousens		
Treasurer Residential	4833 Fairway Ridge Circle West Bloomfield MI 48323		
Phone	(248) 737-8707		
Treasurer Business			
Phone			
Recordkeeper Name			
Recordkeeper Mailing			
Phone			
Statement Type	Annual		
Relates To			
Election Date	//		
Dissolution Date (effective)	//		
Annual Statement Coverage Year	2011		
Treasurer/Recordkeeper Signed	Mark Cousens	Date	01/27/2012
Candidate Signed	John Eaton	Date	01/27/2012

FILED  
 WASHTENAW COUNTY, MI  
 2012 JAN 31 A 9:51  
 CLERK/REGISTRAR

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in the items above has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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:

(Type or Print) Name: MARK H. COUSENS Signature: [Signature] Date: 1-27-12

Candidate:

(Type or Print) Name: John E Eaton Signature: [Signature] Date: 1-27-12

CANDIDATE COMMITTEE SUMMARY PAGE

Committee ID		C-2010-13	
Committee Name		John Eaton for Council	
Document Name		Annual	
RECEIPTS		This Period	Cumulative
<b>3. Contributions</b>			
a. Itemized Contributions	(3a.)	0.00	
b. Unitemized	(3b.)	0.00	
c. Subtotal of Contributions	(3c.)	0.00	(18.) 0.00
<b>4. Other Receipts</b>			
	(4.)	0.00	(19.) 0.00
<b>5. Total Contributions and Other Receipts</b>		(5.)	0.00 (20.) 0.00
<b>IN-KIND CONTRIBUTIONS AND EXPENDITURES</b>			
<b>6. In-Kind Contributions</b>			
	(6.)	0.00	(21.) 0.00
<b>7. In-Kind Expenditures</b>			
	(7.)	0.00	(22.) 0.00
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized	(8a.)	0.00	
b. Itemized GOTV	(8b.)	0.00	
c. Unitemized (less than \$50.01 each)	(8c.)	0.00	
<b>9. Total Expenditures</b>		(9.)	0.00 (23.) 280.67
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b>			
<b>10. Disbursements</b>			
a. Itemized	(10a.)	206.00	
b. Unitemized	(10b.)	0.00	
<b>11. Total Incidental Expense Disbursements</b>		(11.)	206.00 (24.) 206.00
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee	(12a.)	0.00	
b. Owed to the Committee	(12b.)	0.00	
<b>BALANCE STATEMENT</b>			
<b>13. Ending Balance of last report filed</b>		(13.)	834.43
<b>14. Amount received during reporting Period</b>		(14.)	0.00
<b>15. Subtotal</b>		(15.)	834.43
<b>16. Amount Expended during reporting Period</b>		(16.)	206.00
<b>17. ENDING BALANCE</b>		(17.)	628.43

OFFICE EXPENDITURES (1C) CANDIDATE COMMITTEE

<b>Committee ID</b>	C-2010-13
<b>Committee Name</b>	John Eaton for Council
<b>Document Name</b>	Annual

# 4238- -Add

Date: 03/15/2011 Disbursement Code: OO Amt: 66.00  
Name: Bank of America Payment on Debt/Obligation reported on previous statement:  
Address:  
City: Southfield State: MI  
Zip: 48076  
Fund Raiser: Purpose: Bank Service Fees

# 4240- -Add

Date: 06/12/2011 Disbursement Code: OO Amt: 56.00  
Name: Bank of America Payment on Debt/Obligation reported on previous statement:  
Address:  
City: Southfield State: MI  
Zip: 48076  
Fund Raiser: Purpose: Bank Service Fees

# 4241- -Add

Date: 09/12/2011 Disbursement Code: OO Amt: 42.00  
Name: Bank of America Payment on Debt/Obligation reported on previous statement:  
Address:  
City: Southfield State: MI  
Zip: 48076  
Fund Raiser: Purpose: Bank Service Fees

OFFICE EXPENDITURES (1C) CANDIDATE COMMITTEE

# 4243- -Add

Date: 12/11/2011

Disbursement Code: 00

Amt: 42.00

Name: Bank of America

Payment on Debt/Obligation reported on previous statement:

Address:

City: Southfield State: MI

Zip: 48076

Fund Raiser:

Purpose: Bank Service Fees

Schedule Total

\$ 206.00