



**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: 1/1/20 to 7/17/20

<p>1. Committee I.D. Number C-2010-13</p> <p>2. Committee Name John Eaton for Council</p>	<p>4. Candidate Last Name Eaton First Name John M.I. E</p> <p>4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local</p> <p>4b. County of Residence WASHTENAW</p>
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<p>5. Committee's Mailing Address John Eaton for Council 1606 Dicken Dr Ann Arbor MI 48103</p> <p>Area Code and Phone <u>734-662-6083</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 Cecile Lamb 16060 Dicken Dr Ann Arbor MI 48103</p> <p>Area Code & Phone <u>734-662-6083</u></p>
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<p>7. Treasurer's Business Address</p> <p>Area Code and Phone _____</p>	<p>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)</p> <p>Area Code and Phone _____</p>
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<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" 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>8/4/20</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 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.</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>
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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>Current Treasurer or Designated Record keeper <u>Cecile Lamb</u> Type or Print Name</p> <p>Candidate <u>John Eaton</u> Type or Print Name</p>	<p><u>C Lamb</u> Signature Date <u>7/24/20</u></p> <p><u>John Eaton</u> Signature Date <u>7/24/20</u></p>
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 WASHTENAW COUNTY, MI
 2020 JUL 24 P 2:24
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 COUNTY CLERK
 REGISTER



1. Committee I.D. Number C-2010-13

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name John Eaton

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>16,552</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>16,552</u>	(18.) \$ <u>16,552</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>16,552</u>	(20.) \$ <u>16,552</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>380.82</u>	(21.) \$ <u>380.82</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>15,595.23</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>15,595.23</u>	(23.) \$ <u>15,595.23</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>158.89</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>158.89</u>	(24.) \$ <u>158.89</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>10,000</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>16,552</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>16,552</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>15,754.12</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>797.88</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-13
2. Committee Name John Eaton

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>1/9/20</u>	
Name & Address: Leslie Morris 1023 Young Pl Ann Arbor MI 48103		100 \$ _____	100 \$ _____
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>5/9/20</u>	
Name & Address: Lynn Borset 322 Virginia Ave Ann Arbor MI 48103		100 \$ _____	100 \$ _____
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>6/1/20</u>	
Name & Address: John Eaton 1606 Dicken Dr Ann Arbor MI 48103		10,000 \$ _____	10,000 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input checked="" 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>6/2/20</u>	
Name & Address: William Hathaway 3424 Stowe St Ann Arbor MI 48103		200 \$ _____	200 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Property Manager</u> Business Address <u>3424 Stowe St Ann Arbor MI 48103</u> 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 **10,400**

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-2010-13
2. Committee Name John Eaton for Council

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.		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>6/13/20</u> Name & Address: Juliet Pressel 2625 Lillian Rd Ann Arbor MI 48104		250 \$ _____	250 \$ _____
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>6/14/20</u> Name & Address: Scott Newell 1621 Traver Rd Ann Arbor MI 48105		500 \$ _____	500 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Big City Small World Bakery</u> Business Address <u>500 Miller Ave 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		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>6/15/20</u> Name & Address: Karen Larson 1737 Tudor Dr Ann Arbor MI 48103		25 \$ _____	25 \$ _____
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>6/15/20</u> Name & Address: James Foulke 1606 Waltham Dr Ann Arbor MI 48103		200 \$ _____	200 \$ _____
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		Click Here for Memo Itemization	

Page Subtotal **975**

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-2010-13
2. Committee Name John Eaton for Council

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>6/15/20</u> Name & Address: Tom Stulberg 1202 Traver St 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 #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/18/20</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 type="checkbox"/> Fund Raiser	\$ <u>540</u>	\$ <u>540</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/26/20</u> Name & Address: Michael Morris 1023 Young Pl Ann Arbor MI 48106 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 <u>6/26/20</u> Name & Address: Kenneth Heinzman 1207 Franklin 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	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization

Page Subtotal **990**

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-2010-13
2. Committee Name John Eaton for Council

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>6/28/20</u> Name & Address: David Heritier 1216 Clague Ave Ann Arbor MI 48103	50 \$ _____	50 \$ _____
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>6/29/20</u> Name & Address: Stephanie Hunter 1601 Dicken Dr Ann Arbor MI 48103	200 \$ _____	200 \$ _____
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	Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/29/20</u> Name & Address: Douglas Freeth 2128 Melrose Ave Ann Arbor MI 48104	50 \$ _____	50 \$ _____
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>7/2/20</u> Name & Address: Kathleen Clark 549 First St Ann Arbor MI 48103	200 \$ _____	200 \$ _____
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	Click Here for Memo Itemization	

Page Subtotal **500**
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-2010-13
2. Committee Name John Eaton for Council

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>7/2/20</u> Name & Address: Laura Strowe 1327 Broadway St Ann Arbor MI 48105		\$ 50	\$ 50
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>7/3/20</u> Name & Address: Edith Bletcher 834 Brown St Ann Arbor MI 48104		\$ 50	\$ 50
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>7/17/20</u> Name & Address: Elizabeth Nelson 1319 Ardmoor Ave Ann Arbor MI 48103		\$ 1,000	\$ 1,000
5. If over \$100.00 cumulative, please provide: Occupation <u>teacher</u> Employer <u>Trinity Lutheran Church</u> Business Address <u>1400 W. Stadium Blvd, 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		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/7/20</u> Name & Address: Peter Nagourney 914 Lincoln Ave Ann Arbor MI 48104		\$ 100	\$ 100
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 **1,200**

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-2010-13
2. Committee Name John Eaton for Council

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>6/12/20</u> Name & Address: Edward Steinman 621 5th St Ann Arbor MI 48103		2.00 \$ _____	2.00 \$ _____
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>6/14/20</u> Name & Address: Elizabeth Collins 3404 Porter Ave Ann Arbor MI 48103		40 \$ _____	40 \$ _____
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 _____ Name & Address: Kay Holsinger 2300 Kent St Ann Arbor MI 48103		200 \$ _____	200 \$ _____
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		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/19/20</u> Name & Address: Mary Yamamoto 1538 Waltham Dr. Ann Arbor MI 48103		50 \$ _____	50 \$ _____
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 **292**

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-2010-13
2. Committee Name John Eaton for Council

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>6/20/20</u>	
Name & Address: Sumangala Kailasapathy 2530 Mallard Ct Ann Arbor MI 48105		100 \$ _____	100 \$ _____
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>6/21/20</u>	
Name & Address: Vincent Caruso 556 Glendale Crl Ann Arbor MI 48103		70 \$ _____	70 \$ _____
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>6/21/20</u>	
Name & Address: Jeff Crockett 506 E Kingsley St Ann Arbor MI 48104		100 \$ _____	100 \$ _____
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>6/25/20</u>	
Name & Address: Rosemary Bogdan 3550 Terhune Rd Ann Arbor MI 48104		50 \$ _____	50 \$ _____
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 **320**

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-2010-13
2. Committee Name John Eaton

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>6/25/20</u> Name & Address: Robert Dascola 1815 Baldwin Ave 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
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/25/20</u> Name & Address: Deanna Williams 1530 King George Blvd 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	20 \$ _____	20 \$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/26/20</u> Name & Address: Maurita Holland 2701 Lowell Rd 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>6/28/20</u> Name & Address: Patricia Simmons 2039 Hall Ave 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 **320**

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**

1. Committee I.D. Number C-2010-13
2. Committee Name John Eaton for Council

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 6/29/20

Name & Address:
Judith Hanway
472 Colin Ct
Ann Arbor MI 48103

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

25 25
\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/29/20

Name & Address:
Priscilla Cheever
267 S Wagner Rd
Ann Arbor MI 48103

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

200 200
\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Retired Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 6/29/20

Name & Address:
Kay Holsinger
2300 Kent St
Ann Arbor MI 48103

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

200 200
\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Retired Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/1/20

Name & Address:
Alan Goldsmith
2280 Amesbury Dr
Ann Arbor MI 48103

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

100 100
\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal	525
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-2010-13
2. Committee Name John Eaton for Council

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>7/3/20</u> Name & Address: Carl Smith 3573 Pheasant Run Cir #7 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	100 \$ _____	100 \$ _____ Click Here for Memo Itemization
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/4/20</u> Name & Address: Alan Goldberg 509 W Keech 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	15 \$ _____	15 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/9/20</u> Name & Address: Gwen Nystuen 1016 Olivia Ave 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 type="checkbox"/> Fund Raiser	300 \$ _____	300 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/12/20</u> Name & Address: Bernard Banet 838 Heather Way 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	75 \$ _____	75 \$ _____ Click Here for Memo Itemization

Page Subtotal **490**

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-2010-13
2. Committee Name John Eaton

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>7/13/20</u> Name & Address: Thomas Burroughs 2123 Carol 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	40 \$ _____	40 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/14/20</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	100 \$ _____	100 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/15/20</u> Name & Address: Wendy Carman 2340 Georgetown Blvd 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	100 \$ _____	100 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/4/20</u> Name & Address: Glenn Ziegler 514 Krause St 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	300 \$ _____	300 \$ _____ Click Here for Memo Itemization

Page Subtotal	540
Grand Total of All Schedules 1A (Complete on last page of Schedule)	16,552

Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number C-2010-1

CANDIDATE COMMITTEE

2. Committee Name John Eaton for Council

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: Edward Steinman 621 5th St Ann Arbor MI 48103 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business 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>Domain Names</u> 5. Date Of Receipt: <u>3/22/20</u> 6. Vendor Name & Address: Google Domains <u>https://domains.google</u>	\$ <u>36</u>	\$ <u>38</u>
<input type="checkbox"/> Fund Raiser Contribution Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Edward Steinman 621 5th St Ann Arbor MI 48103 If over \$100.00 cumulative, please provide: Occupation: <u>Retired</u> 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>G-Suite Premium Plan</u> 5. Date Of Receipt: <u>6/9/20</u> 6. Vendor Name & Address: Wix.com 40 Namal Tel Aviv, Israel 6350671	\$ <u>222</u>	\$ <u>260</u>
<input type="checkbox"/> Fund Raiser Contribution Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Edward Steinman 621 5th St Ann Arbor MI 48103 If over \$100.00 cumulative, please provide: Occupation: <u>Retired</u> 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>Pizza for meet and greet (no fund raising)</u> 5. Date Of Receipt: <u>7/1/20</u> 6. Vendor Name & Address: Cottage Inn 2301 W. Stadium Ann Arbor MI 48103	\$ <u>95.32</u>	\$ <u>355.32</u>

Page Subtotal	353.32	355.32
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Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

Enter this total
on line 6 of Summary
Page



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

1. Committee I.D. Number C-2018-008
2. Committee Name Jack Eaton for Council

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: John E Eaton 1606 Dicken Dr Ann Arbor MI 48103	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>7/31/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 6,000</u>	8/23/18 \$ 3000 \$ \$ \$ \$	\$ 3,000	\$ 3,000 <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: John E Eaton 1606 Dicken Dr Ann Arbor MI 48103	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8/21/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 269.23</u>	\$ \$ \$ \$ \$	\$	\$ 269.23 <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: John E Eaton 1606 Dicken Dr Ann Arbor MI 48103	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>9/3/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 150.00</u>	\$ \$ \$ \$ \$	\$	\$ 150.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **3,419.23**
Grand Total of all Schedules 1E **3,419.23**
(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.



**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK**

1. Committee I. D. Number C-2010-1

CANDIDATE COMMITTEE

2. Committee Name John Eaton for Council

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: Trinity Lutheran Church 1400 W Stadium Blvd Ann Arbor MI 48103 <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>Postage</u> 5. Date Of Receipt: <u>7/1/20</u> 6. Vendor Name & Address: USPS 2075 W Stadium Blvd Ann Arbor MI 48103 Click Here for Memo Itemization	\$ <u>27.50</u>	\$ <u>1,027.50</u>
Contribution # 2 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	\$ _____	\$ _____
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 27.50 1,027.50

Grand Total of all Schedules 1-IK (Complete on last page of Schedule) 380.82

Enter this total on line 6 of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

C-2010-13

1. Committee I. D. Number _____
2. Committee Name John Eaton for Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Sawicki & Son 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>6/8/20</u> Date	<u>\$ 1,007</u>
Expenditure #2 Name Ann Arbor Observer Address 2390 Winewood Ave Ann Arbor MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/12/20</u> Date	<u>\$ 2,455.60</u>
Expenditure #3 Name City Printing Company, Inc Address 411 W Cross St Ypsilanti MI 48197 <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>6/19/20</u> Date	<u>\$ 1770.20</u>
Expenditure #4 Name Unit Packaging Address 119 Enterprise Dr Ann Arbor MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/22/20</u> Date	<u>\$ 2437.81</u>
Expenditure #5 Name City Printing Company, Inc Address 411 W Cross St Ypsilanti MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Door Hangers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/24/20</u> Date	<u>\$ 349</u>

Subtotal this page	8019.61
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-2010-13

1. Committee I. D. Number _____

2. Committee Name John Eaton for Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>City Printing Company, Inc</u> Address <u>411 W Cross St</u> <u>Ypsilanti MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Door Hangers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/3/20</u> Date	<u>\$ 624</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Ann Arbor Observer</u> Address <u>2390 Winewood Ave</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/8/20</u> Date	<u>\$ 2455.60</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>City Printing Company, Inc</u> Address <u>411 W Cross St</u> <u>Ypsilanti MI 48197</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postcard</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/9/20</u> Date	<u>\$ 1,810</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Unit Packaging</u> Address <u>119 Enterprise Dr</u> <u>Ann Arbor MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/9/20</u> Date	<u>\$ 2615.68</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>PayPal</u> Address <u>2211 N First St</u> <u>San Jose CA 95131</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>online contributions</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/16/20</u> Date	<u>\$ 70.34</u> Click Here for Memo Itemization Type

Subtotal this page **7,575.62**

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

15,595.23

Enter this total
on line 8a of
Summary Page



**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**
(For use by officeholders only)

1. Committee I. D. Number C-2010-13
2. Committee Name John Eaton for Council

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Zoom Video Communications, Inc. 55 Almaden Blvd 6th Floor San Jose CA 95113 <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose <u>Video meetings</u> Disbursement Code _____ <input type="checkbox"/> Fund Raiser	<u>5/20/20</u> Date Click for Memo Itemization Type	<u>\$ 158.89</u>
Disbursement # 2 Name & Address: <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose _____ Disbursement Code _____ <input type="checkbox"/> Fund Raiser	_____ Date Click for Memo Itemization Type	\$ _____
Disbursement # 3 Name & Address: <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose _____ Disbursement Code _____ <input type="checkbox"/> Fund Raiser	_____ Date Click for Memo Itemization Type	\$ _____
Disbursement # 4 Name & Address: <input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Purpose _____ Disbursement Code _____ <input type="checkbox"/> Fund Raiser	_____ Date Click for Memo Itemization Type	\$ _____
			Subtotal this page 158.89
			Grand Total of all Schedules 1C (Complete on last page of Schedule) 158.89

Enter this total on line 10a of Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES
Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2010-13
2. Committee Name John Eaton for Council

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: John Eaton 1606 Dicken Dr Ann Arbor MI 48103	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>6/1/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 10,000</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ 0	\$ 10,000 <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)	10,000
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)	10,000

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.

