



**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 7-9-20 to 9-3-20

<p>1. Committee I.D. Number <u>C-2010-13</u></p> <p>2. Committee Name <u>John Eaton For Council</u></p>	<p>4. Candidate Last Name <u>Eaton</u> First Name <u>John</u> M.I. <u>E</u></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <u>Board Member - Local</u></p> <p>4b. County of Residence <u>Washtenaw</u></p>
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<p>5. Committee's Mailing Address <u>John Eaton for Council 1606 Dicken Dr Ann Arbor MI 48103</u></p> <p>Area Code and Phone <u>734 662-6083</u></p> <p>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 &amp; Residential Address <u>Cecile Lamb 1606 Dicken Dr Ann Arbor MI 48103</u></p> <p>Area Code &amp; 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 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 checked="" type="checkbox"/> Primary</p> <p><input type="checkbox"/> General</p> <p><input type="checkbox"/> Convention</p> <p><input type="checkbox"/> Special</p> <p><input type="checkbox"/> School</p> <p><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</p> <p><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 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 Year.</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.

Current Treasurer or Designated Record keeper CECILE LAMB , C Lamb Date 9-3-20  
Type or Print Name Signature

Candidate John Eaton , John Eaton Date 9-3-20  
Type or Print Name Signature

WASHTEENAW COUNTY  
 LAWRENCE  
 2020 SEP 15  
 FILED  
 COUNTY: MI  
 4:50P



**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?  YES 4. Date of Receipt 7-27-20  
Name & Address:  
John Loken  
2740 Puckard St  
Ann Arbor MI 48106  
5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

\$ 100 \$ 100  
Click Here for Memo Itemization

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 7-28-20  
Name & Address:  
Patricia Simons  
1232 White St  
Ann Arbor MI 48104  
5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

\$ 100 \$ 100  
Click Here for Memo Itemization

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 7-18-20  
Name & Address:  
Ann Lund  
1510 Jones Dr  
Ann Arbor MI 48105  
5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

\$ 50.00 \$ 50.00  
Click Here for Memo Itemization

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt \_\_\_\_\_  
Name & Address:  
Anne Bennister  
612 N Main St  
Ann Arbor MI 48104  
5. If over \$100.00 cumulative, please provide:  
Occupation Director Employer Personal Finance Education Services  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

\$ 300 \$ 300  
Click Here for Memo Itemization

Page Subtotal 550  
Grand Total of All Schedules 1A (Complete on last page of Schedule) 1,400  
Enter this total on line 3a of Summary Page.



**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: <u>John Eaton</u> <u>1606 Diaken Dr</u> <u>Ann Arbor MI 48103</u>	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>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>10,000</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt) 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.