

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

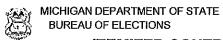
Report must be legible, typed or printed in ink ar the treasurer (or designated record keeper) and	nd signed by candidate.	3. This Statement covers Fro	^{m:} 10/23/17	to 11/27/17	
1. Committee I.D. Number		4. Candidate Last Name	First	Name	M.I.
C-2011-039		Lumm	Jane		В
2. Committee Name	·	4a. Office Sought Including D		Served (If applicable	e)
Jane Lumm for City Cou	uncil	4b. County of Residence W			
5. Committee's Mailing Address		6. Treasurer's Name & Resid			
3075 Overridge Drive		Patty Aldrich	ondar radioop		
Ann Arbor MI 48104		3075 Overridge Driv	ve		
,		Ann Arbor MI 48104			
Area Code and Phone (734) 677-4010	-201				
If the address in this box is different from the commailing address on the Statement of Organization, be sent to this address by the filing official.	nittee mail may	Area Code & Phone (734) 6	77-4010		
7, Treasurer's Business Address		Designated Record keepe Designated Record keeper)	r's Name and Mailing A	Address (If the comm	ittee has a
IN/A		John Lumm			<u> </u>
		3075 Overridge Driv		景語 2	
· ·		Ann Arbor MI 48104	1	SS TO	o O
·				<u> </u>	Y I MOC
		/70	A) 0.45 0.44		₹
Area Code and Phone		Area Code and Phone (734	4) 645-2441		
9. TYPE OF STATEMENT	Required ON	ILY if candidate	9e. Dissolution of	Candidate Committ	ee
9a. Pre-Election OR 9b. Post-Election	is not on the current year:	ballot for the	By checking this	s item I/We certify any	y outstanding debt or her spouse is here
Pre-Election or Post-Election Statement relates to:	ourrone your.		by discharged and for the committee. The	rgiven, and no longe	or ner spouse is nere r collectible from
Primary	July Quarte	erly	owes no lates fees or	committee has no ou has any oustanding	istanding assets, debt.
ズ General	October Q	uarterly	Eurthor if the discount	tion gonnot be seemt.	ad 46 - 4.45 - 5 -
Convention			Further, if the dissolutionsidered a request	for the Reporting Wa	aiver.
Special	9c. Annuai	l Statement ()			
School		Coverage Year	Effective da	ate of dissolution	
Caucus		dment to Campaign Statement lete Item 9a, 9b, 9c or 9e to			
	indicat	e which Statement is being	Note: The disposition Schedule 1B and the	of residual funds mu	ust be reported on
Date of Election, Convention or Caucus	amend	ea.)	Concade 12 and the	odiffinary r age.	
	<u> </u>				
11/07/17			1		
10. Verification: NWe certify that all reasonable dilige my/our knowledge and belief the contents are true, a	i ence was used in accurate and con	n the preparation of this statement	I ent and attached sched	fules (if any) and to t	he best of
Current Treasurer or John Lumm	,	Jehnald -	L	11/7	7/17
Designated Record keeper Type or Print Name		Signature		Date	1''
Jane Lumm		Thur by lan	is the	11/12	112
Candidate Type or Print Name		Signature	W . ** -	Date	[, ,[
7,7p0 01.7 mit (dino		Oignatule			

1. Committee i.D. Number <u>C-2011-039</u>

SUMMARY PAGE CANDIDATE COMMITTEE

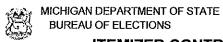
2. Committee Name Jane Lumm for City Council

CANDIDATE COMMITTEE	***	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ _1,275.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$1,275.00	(18.) \$ \$28,080.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$1,275.00	(20.) \$ \$28,080.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$50.00	(21.) \$ \$50.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$12,128.37	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$12,128.37	(23.) \$ \$24,660.14
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _\$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$_\$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
	BALANCE STATEMENT	
 Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 	(13.) \$ \$14,774.48	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$1,275.00	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15.) = \$_\$16,049.48	
(Add lines 9 and 11) 17. ENDING BALANCE	(16.) - \$ \$12,128.37	
(Subtract line 16 from line 15)	(17.) \$ \$3,921.11	*



CANDIDATE COMMITTEE

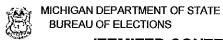
Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	me, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/24/17 Name & Address:		
Lucy Anderson 572 Trego Circle Ann Arbor MI 48103	_{\$} 25	_{\$} 25
5. If over \$100.00 cumulative, please provide:	Olivia I I a ve	- f14
Occupation Employer	— Click Here	e for Memo Itemization
Business Address	_	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/24/17 Name & Address		
Susan Black 2002 Wayne Street Ann Arbor MI 48104	_{\$_} 50	_{\$} 50
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 # 3 PAC Receipt? YES 4. Date of Receipt 10/24/17 Name & Address:		
William Wilson PO Box 536 St. Clair MI 48079	_{\$} 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	· 	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/24/17 Name & Address		
Thomas Ewing PO Box 7728 Ann Arbor MI 48107	_{\$} 200	_{\$} 200
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Principal Employer Ewing Investment Corp	— Olick Hele !	or wento itemization
Business Address Ann Arbor MI		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Sub	total \$375.00	
Grand Total of All Schedules (Complete on last page of Sched	s 1A dule) Enter this total on	
Pageof	line 3a of Summar Page.	у



CANDIDATE COMMITTEE

2. Committee Name Jane Lumm for City Council

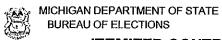
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/25/17	_	
Jane Miller 760 Watershed Dr. Ann Arbor MI 48105	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Horo	for Memo Itemization
Occupation Employer	Click nere	for Memo Remization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/25/17 Name & Address		
Wanita Forgacs 2465 Bunker Hill Rd Ann Arbor MI 48105	_{\$} 50	_{\$_} 50
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/27/17 Name & Address:		
William Milliken Jr. 100 Huron View Blvd. Ann Arbor MI 48103	_{\$} 50	_{_ \$} 50
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
OccupationEmployer		
Business Address Type-of-Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/28/17 Name & Address		
Gideon Hoffer 22 Haverhill Ct. Ann Arbor MI 48105	_{\$} 25	_{\$} 25
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 2 of 4	\$175.00 Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

2. Committee Name Jane Lumm for City 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 Name & Address:	4. Date of Re	ceipt 10/28/17		
Richard Yarmain 1625 Arlington Blvd Ann Arbor MI 48104			_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:			Click Here	for Memo Itemization
Occupation Employ	er			·
Business Address				
Type of Contribution: V Direct Loan	rom a person	Fund Raiser		
Contribution #2 PAC Receipt? YES Name & Address	4. Date of Red	ceipt 10/28/17		
Barbara Jones 3503 Burbank Ann Arbor M! 48105			_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:			Click Here f	or Memo Itemization
Occupation Employer				
Business Address				
Type of Contribution: ✓ Direct Loan fr	om a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES Name & Address:	4. Date of Re	ceipt 10/30/17		
Ann Munro 14 Ridgeway St. Ann Arbor MI 48104			<u>\$ 100</u>	_{\$} 100
5. If over \$100.00 cumulative, please provide:			Click Here fo	or Memo Itemization
Occupation Employe	Г			
Business Address Type of Contribution: Direct Loan fr	om a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES Name & Address	4. Date of Re	ceipt 11/01/17		
Tom Wieder 2445 Newport Rd Ann Arbor MI 48103			_§ 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:			Click Horo fo	r Memo Itemization
Occupation Emplo	oyer		Click Here to	i Memo itemization
Business Address				
Type of Contribution: V Direct Loan fr	om a person	Fund Raiser		
		Page Subtotal	\$350.00	
		orand Total of All Schedules 1A plete on last page of Schedule)	Enter this total on	
Page 3 of 4			line 3a of Summary Page.	



CANDIDATE COMMITTEE

line 3a of Summary

Page.

2. Committee Name Jane Lumm for City 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? YES 4. Date of Receipt 11/02/17 Name & Address: Paul Morel		
703 Berkshire	° 25	<u>.</u> 25
Ann Arbor MI 48104	<u>\$ 20</u>	<u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/03/17 Name & Address		
Adrienne Kaplan 18 Ridgeway St. Ann Arbor MI 48104	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here t	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		:
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 11/03/17		
Eleanor Kuhl 3955 Waldenwood Dr. Ann Arbor MI 48105	<u>\$ 100</u>	<u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund-Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/09/17 Name & Address		
Reno Maccardini 3940 Ridgmarr Sq. Ann Arbor MI 48105	_{\$} 200	_{\$} _200
5. If over \$100.00 cumulative, please provide:	Clieb Hans fo	- * A 1(* (*
Occupation Retired Employer	Click Here IO	r Memo Itemization
Business Address		
Type of Contribution:		
<u> </u>	\$375.00 \$1, 275_00 Enter this total on	



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

C-2011-039

2. Committee Name Jane Lumm for City Council 3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 5. Date 6. Amount Expenditure #1 Name Kolossos Printing 10/23/17 \$ 1722.76 Purpose: printing and mailing Address 2055 W. Stadium Click Here for Memo Itemization Type Ann Arbor MI 48103 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 Name Kolossos printing 10/25/17 \$ 611.58 Date Purpose: printing and mailing Address 2055 W. Stadium Click Here for Memo Itemization Type Ann Arbor MI 48103 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name US Post office \$ 50.15 Purpose: stamps Address 1214 S. University Click Here for Memo Itemization Type Ann Arbor MI 48104 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Kolossos Printing 10/30/17 \$ 6698.09 Date Purpose: printing and mailing Address 2055 W. Stadium Blvd Click Here for Memo Itemization Type Ann Arbor MI 48103

Subtotal this page

Click Here for Memo Itemization Type

\$11,112.58

\$2030.00

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

Check box if this expenditure is payment of

Check box if this expenditure is payment of

debt or obligation reported on previous

debt or obligation reported on previous

Purpose: advertising

statement

statement

Enter this total on line 8a of Summary Page

Page 1 of 2

__ Fund Raiser

MLive Media Group

Fund Raiser

Name MLive - Ann Arbor News

Expenditure #5

Address



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number C-2011-039

2. Committee Name	Jane Lumm	for	City	Council

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Dollar Tree Stores		11/04/17	\$ 20.14
Address	Purpose: election night event supplies	Date	
3590 Washtenaw	Click	Here for Mem	no Itemization Type
Ann Arbor MI 48104	Check box if this expenditure is payment of		7,7
Fund Raiser	debt or obligation reported on previous		
Expenditure #2	Catalinaria		
Name Kroger		11/04/17	s 12.72
Address	Purpose: election night event supplies	Date	N
3615 Washtenaw	Click	Here for Mem	o Itemization Type
Ann Arbor Mi 48104	 		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3		· · · · · · · · · · · · · · · · · · ·	
Name Paesano's Restaurant	,	11/07/17	, \$ 746.24
Address	Purpose: election night event	Date	140.24
3411 Washtenaw	Clink	loss faulti	. H
Ann Arbor MI 48104		tere for wemic	Itemization Type
Fund Raiser	L_Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
^{Name} Jewish News	i i	11/09/17	
Address	Purpose: advertising	Date	\$ <u>215.00</u>
2935 Birch Hollow			
Ann Arbor MI 48108		ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
^{Name} Trader Joes		11/07/47	
Address	election night event cumplion	11/07/17 Date	\$ 21.69
2398 E. Stadium	Purpose: Occupant ringin event supplies	Dute:	
Ann Arbor MI 48104	f	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subtota	al this page	\$1,015.79
	Grand Total of all S (Complete on last page		\$12,128.37
		· 1	

Enter this total on line 8a of Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number _____1039

CANDIDATE	COMMITTEE
CANDIDALE	COMMINITEE

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.	Type of In-Kind Contribution (Check applicable box) Date of Receipt 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? Yes Name & Address: Katherine Griswold 3565 Fox Hunt Drive Ann Arbor MI 48105 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description campaign phone 5. Date Of Receipt: 11/20/17 6. Vendor Name & Address:	50.00 \$	50.00
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description 5. Date Of Receipt:	\$	
Fund Raiser Contribution	6. Vendor Name & Address: Clic	k Here for Memo lter	nization
Contribution #3 PAC Receipt? Yes Name & Address:	4 Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated \$ Goods or Services Purchased by Candidate or Others	\$	
Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: Click	k Here for Memo Iten	nization
Fund Raiser Contribution			
	Page Subtotal	\$50.00	\$50.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$50.00	•
		Enter this total on line 6 of Summa	гу

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