

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR LOCAL CANDIDATE COMMITTEES FILED WITH A COUNTY CLERK

Information on this form is made public.			
1. Committee ID #: C-2011-039	*2. Type of Filing: Origi	inal: endment to items: 4b, 6a, 8	Eff. Date: 5/25/2020
*3. Full Name of Committee (must include Jane Lumm for City Council	Candidate's first and last na	me):	
*4a. Candidate Full Name: Last Name Lui	nm	First Name Jane	M.I. B
*4b. Political Party (if applicable): Democratic Party		*4c. County of Residence: WASHTENAW	
*4d. Office Sought: Board Member - Local		*4e. District or Jurisdiction:	Ann Arbor City
*5. Date Committee was Formed: 8/19/2011			
*6a. Committee Phone: 734-972-5846		6b. Committee Fax #: NA	
*6c. Committee Email Address: Lu	mm4Ward2@gmail.com	6d. Committee Website Address:	janelumm.org
*7a. Complete Committee Mailing Address (May be PO Box): 3075 Overridge Dr. Ann Arbor MI 48104			
*7b. Complete Committee Street Address (May not be PO Box): 3075 Overridge Dr. Ann Arbor Mi 48104			
*8. Treasurer Name and Complete Residential Address: Jack Cederquist 2145 Ardenn Drive Ann Arbor MI 48105			
Phone #: 734-665-2282 Email Address: john_cederquist@comcast.net			
9. Designated Record Keeper Name and Complete Address: John Lumm 3075 Overridge Drive Ann Arbor MI 48104			
Phone #: 734-645-2441	Email Add	ress: johnlumm@comcast,net	
*10. REPORTING WAIVER REQUEST: YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to receive or expect on excess of \$1,000.00 in an election. I/We understand that if the committee does not spend or received in excess of \$1,000.00 in an election, the committee does not one detailed campaign statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the \$1,000.00 threshold and all required campaign statements must be filed. A Reporting Waiver does not exempt a committee from filing Late Committee of Expending Reports. NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to receive expending excess of \$1,000.00 in an election. I/We understand that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of \$1,000.00 in an election. I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and the avoid paying late filing fees. Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.			
*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union Depositories of Loan Sociation) While this item must be completed, an account does not have to be opened until the first contribution is received. *Official Depository (name and address): Bank of Ann Arbor 125 S. Fifth Ave. Ann Arbor MI 48104 Secondary Depository (name and address):			
12. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)			
*Candidate: JM4 & Lum	Date: 5/24/20	*Current Treasurer M . C	Cymil Date: 5/24/20
*Designated Record Keeper (If Applicable)			

CFR101 CAN SO.doc REV 04/18: Authority granted under Act 388 of 1976, as amended * = Required Field on Originals