AN DEPARTMENT OF STATE AU OF ELECTIONS

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LATE CONTRIBUTION REPORT

1. Your Committee ID#: C2011039			
2. Your Committee Name Jane Lumm for City Council			
3. Date Late Contribution(s) Received: 07/22/20 (Only one Date per	Sheet)	***************************************	
 Late Contribution Reports are required when a Candidate committee receives a single contribution or a cumulative contribution \$500.00 or more after the closing date of the last campaign statement require the candidate is participating. See Appendix G of the Campaign Finance Ma A committee other than a candidate committee (PAC, Ballot Question or Policontribution or a cumulative contribution from the same contributor of \$2,50 last campaign statement required and the 3rd day before an election. See Appendix Contributions are anything of monetary value including contributions of money, in-kin Late Contribution Reports are not waived by the Reporting Waiver. Late Contribution Reports that are filed late result in the committee receiving a late file per report. Paper filers may file the report by any written means (including fax) within 48 hour of Filing Official. Electronic Filers on the state level must file all Late Contribution Report electronically The Late Contribution must also be reported on the next Campaign Statement owed by 	d and the 3 rd inual. itical Party) r 0.00 or more endix G of the d and loans t ing fee. The	day before the composition of the composition of the composition of the composition of the contribution of	ore an election whe a single e closing date of the paign Finance Manu committee.
4. Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial and if the contributor is an individual, the Occupation, Employer and Business address of the contributor. Contributor Name and Address: Timothy Dickinson			5. Cumulative Amount during LCR Period.
2670 Geddes Ann Arbor MI 48104 (If Individual, also provide:) Occupation Attorney/Professor Employer / Business Address University of Michigan Contributor Name and Address:			\$500.00
(If Individual, also provide:) Occupation Employer / Business Address	COUNTY		MASHTE
Contributor Name and Address:	- 2	<u> </u>	ALL WANTED
If Individual, also provide;) Occupation Employer / Business Address Contributor Name and Address:	CLERK/REGISTER	24 A 10 24	AM COUNTY, MI
Contributor Name and Address:			ACTION AND AND AND AND AND AND AND AND AND AN
If Individual, also provide:) Occupation Employer / Business Address			
Authority Granted under PA 388 of 1976 7/12			

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