

CANDIDATE COMMITTEE COVER PAGE

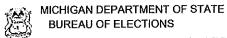
FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink an the treasurer (or designated record keeper) and	nd signed by	3. This Statement covers Fro	om: 07/00/00		
Committee I.D. Number	candidate.	Candidate Last Name	07120120	to 08/24/20	
C-2011-039		Lumm	Jane	irst Name	M.I.
		4a. Office Sought Including D		nity Served (If applicat	B hle)
2. Committee Name		Board Member - Loca		my ocived (ii applicat	р.е <i>)</i> Г
Jane Lumm for City Co	ouncil	4b. County of Residence W /	ASHTENAW		شأ
5. Committee's Mailing Address		6. Treasurer's Name & Resid			
3075 Overridge Drive Ann Arbor MI 48104		Jack Cederquist			
7 mm 7 m 20 1 Wm 40 10 4		2145 Ardenne Drive Ann Arbor MI 4810	=		
		Ann Albor Wil 46 lot	J		
Area Code and Phone (734) 972-5846			•	3C	- 101
If the address in this box is different from the commailing address on the Statement of Organization,	nittee				/AS
be sent to this address by the filing official.	maii may	Area Code & Phone (734)	665-2282	至	WASHTE
7. Treasurer's Business Address		8. Designated Record Keeper	er's Name and Addre	ess (If the committee t	has ara
N/A		Designated Record Keeper) John Lumm		三	
		3075 Overridge Driv	/e		ED TRUUDY MI
		Ann Arbor MI 48104		O 65	
					<u>:</u> ≺
				## %	
Area Code and Phone		Area Code and Phone (734	4) 645-2441		
9. TYPE OF STATEMENT	Booutrad Ot	11 V if tist-1	9e. Dissolution	of Candidate Comm	ittee
9a. Pre-Election OR 9b. Post-Election	is not on the	ILY if candidate ballot for the	By checking	this item I/We certify a	anv outstanding debt
Pre-Election or Post-Election Statement relates to:	current year:		by the committee	to the candidate or his	s or her spouse is her
X Primary	July Quart	erly	the committee. The	he committee has no d s or has any oustandin	oustanding assets.
General	October Q	uarterly	Further if the dies	olution cannot be gran	admin of the state to 1
Convention			considered a requi	est for the Reporting V	ited, that this be Naiver.
Special	9c. 🗀 .				
School	L_JAnnua	Statement () Coverage Year	Effective	e date of dissolution	
Caucus	9d. Amend	dment to Campaign Statement			
	(Comp	lete Item 9a, 9b, 9c or 9e to e which Statement is being	Note: The disposit	tion of residual funds n	must be reported on
	amend		Schedule 1B and	the Summary Page,	ildat be reported on
Date of Election, Convention or Caucus					
08/04/20					
Verification: I\We certify that all reasonable dilige ny\our knowledge and belief the contents are true, a	ence was used in occurate and con	n the preparation of this statement inplete.	ent and attached sc	hedules (if any) and to	the best of
Furrent Treasurer or John Lumm Designated Record keeper		John W.	aff	8/3	31/20
Type or Print Name		9ignature /		—Date	
Candidate Jane Lumm		, Am B. W	mpr	Bate8/3	31/20
Type or Print Name		Signature			
COMPANY DESIDED HOGER P. A. 388 At 1076					

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

SUMMARY PAGE CANDIDATE COMMITTEE

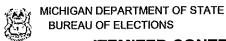
Column I This Period	Column II Cumulative this election cycle
	Carrialative and discussion system
(3a.) \$ 7,775.00	
(3b.) \$ NOT APPLICABLE	
(, -	(18.) \$ \$34,085.00
(4.) \$ \$0.00	(19.) \$ \$0.00
(5.) \$ \$7,775.00	(20.) \$ \$34,085.00
, ,	(21.) \$ \$961.98
(7.) \$ \$0.00	(22.) \$ \$0.00
να., ψ	
(8b.) \$ \$0.00	
(8c.) \$ \$0.00	
(9.) \$ \$8,590.99	(23.) \$ \$37,463.84
(10a.)\$ \$0.00	
(10b) \$ \$0.00	
	(24.) \$ \$0.00
	(27.) \$\psi\$
(12a.)\$_\$0.00	
(12b.)\$ \$0.00	
\$1,358.26 (14.) + \$ \$7,775.00 (15.) = \$ \$9,133.26 (16.) - \$ \$8,590.99 (17.) \$ \$542.27	*
	This Period (3a.) \$ 7,775.00 (3b.) \$ NOT APPLICABLE (3c.) \$ \$7,775.00 (4.) \$ \$0.00 (5.) \$ \$7,775.00 (6.) \$ \$224.48 (7.) \$ \$0.00 (8a.) \$ \$0.00 (8b.) \$ \$0.00 (8c.) \$ \$0.00 (9.) \$ \$8,590.99 (10a.) \$ \$0.00 (11.) \$ \$0.00 (12a.) \$ \$0.00 (12b.) \$



CANDIDATE COMMITTEE

Page.

Enter contributor's name and address. If contribution is from an individual, emiddle initial. Check box to indicate if contribution is from a Political Committe (PAC) Report all contributions regardless of amount.	nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Name & Address: Timothy Dickinson 2670 Geddes Ann Arbor MI 48104	07/22/20	_{\$} 500	_{\$} 500
5. If over \$100.00 cumulative, please provide: Occupation Attorney/Professor Employer University of	Michigan	Click Here fo	or Memo Itemization
Business Address Ann Arbor Michigan Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	07/22/20		
Walter Mayer 1000 Berkshire Rd Ann Arbor MI 48104		<u>\$ 100</u>	_{\$} 100
5. If over \$100.00 cumulative, please provide:		Click Here fo	r Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 3 PÁC Receipt? YES 4. Date of Receipt Name & Address:	ot 07/23/20		
Irma Majer 2809 Brackman Ann Arbor MI 48104		\$50	\$ 50
5. If over \$100.00 cumulative, please provide:		Click Here los	Memo Itemization
Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipte Address	ipt 07/23/20		i
Anne Bannister 612 N. Main Ann Arbor MI 48104		_{\$} 100	_{\$} _100
5. If over \$100.00 cumulative, please provide:		Click Here fo	r Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: V Direct Loan from a person	Fund Raiser	Φ7F0 00	
	Page Subtotal and Total of All Schedules 1A lete on last page of Schedule)	\$750.00 Enter this total on	
4		line 3a of Summary	1



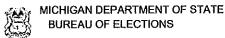
Page 2 of 7

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

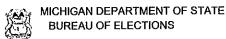
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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions 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 07/23/20 Name & Address: Joe O'Neal 1920 Scottwood Ave	300	300
Ann Arbor MI 48104	§ 300	^{\$} 300
5. If over \$100.00 cumulative, please provide: Occupation Principal Employer O'Neal Construction	Click Here fo	r Memo Itemization
Business Address 525 W.William St. Ann Arbor MI 48103		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/23/20 Name & Address		
Rita Mitchell 621 5th Street Ann Arbor MI 48103	<u>\$ 100</u>	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 07/23/20 Name & Address:		
Paul Valacak	_s 50	50
1815 Timber Trail	\$ 50	_{\$} 50
Ann Abor MI 48103	Click Here for	Memo Itemization 🕶
5. If over \$100.00 cumulative, please provide:		Command (col.)
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/23/20		
Name & Address		
Abe Karam	50	=0
5261 Village Rd. Saline MI 48176	_{\$} 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		
Page Subtotal	\$500.00	_
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(Complete on last page of Scriedule)	Enter this total on line 3a of Summary	,



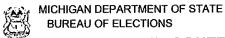
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	name, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/24/20 Name & Address: Essell Bailey III 2006 Day Street Ann Arbor MI 48104	_{\$} 100 _{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	Chek Here for Memo Resultation
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/26/20 Name & Address	
Chris McKenney 2130 Tuomy Rd Ann Arbor MI 48104	_{\$} 100 _{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	<u> </u>
Business Address	energetite
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/27/20 Name & Address: Jane Klingsten 3347 Elsinore Ct Ann Arbor MI 48105	§300 §300
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization ▼
Occupation Retired Employer	
Business Address	
Type of Contribution:	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/27/20 Name & Address Harrison Gilbert	
3395 Burbank Drive Ann Arbor MI 48105	_{\$} 20
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization ▼
Occupation Employer	Chick Field for Metho Remization
Business Address	
Type of Contribution: V Direct Loan from a person Fund Raiser	
Page	e Subtotal \$520.00
Grand Total of All Sche (Complete on last page of	
Page 3 of 7	line 3a of Summary Page.



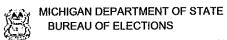
CANDIDATE COMMITTEE

Enter contributor's name and address. If o middle initial. Check box to indicate if con Committee (PAC) Report all contributions	tribution is from a Political Comm	enter last name, first name, ittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address: William Graves 2760 Provincial Ann Arbor MI 48104	YES 4. Date of Rece	pt 07/27/20	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please pro	ovide:		Click Here fo	or Memo Itemization ▼
Occupation	Employer	- AND		
Business Address Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Recei	pt <u>07/27/20</u>		
Sharon Wieland 1531 Packard Ann Arbor MI 48104			_{\$} 25	_{\$} 25
5. If over \$100.00 cumulative, please pro			Click Here fo	r Memo Itemization 🔻
Occupation	_ Employer	- representative de sidde Art -		
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: Janet and David Garabrant 3063 Geddes Ann Arbor MI 48104	YES 4. Date of Rece	o7/28/20	_{\$} 200	§ 200
5. If over \$100.00 cumulative, please pro	ovide:		Click Here for	r Memo Itemization ▼
Occupation Physician/Professor	Employer University o	f Michigan		
Business Address Ann Arbor MI				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Rec	eipt <u>07/30/20</u>		
Clark Richardson 215 Brookside Dr. Ann Arbor MI 48104			_{\$} 30	_{\$} _30
5. If over \$100.00 cumulative, please pr	ovide:		Click Here for	r Memo Itemization ▼
Occupation	Employer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
		Page Subtotal	\$305.00	
		rand Total of All Schedules 1A plete on last page of Schedule)	Enter this total on	
Page of			line 3a of Summary Page.	1



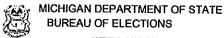
CANDIDATE COMMITTEE

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 <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 07/31/20 Name & Address: Larry Grace 2841 Provincial Ann Arbor MI 48104	_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization ▼
Occupation Retired Employer	Olick Field it	of Wellio Relinization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/01/20 Name & Address	-	
Peter Schweitzer 5 Highland Lane Ann Arbor MI 48104	<u>\$</u> 100	_{\$} 100
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		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 08/01/20 Name & Address: William Martin 420 Huntingdon Drive Ann Arbor MI 48104	_{\$} 100	§ 100
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization ▼
Occupation Employer		
Rusinoss Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/01/20 Name & Address		
Sally Kennedy 75 Laurin Drive Ann Arbor MI 48105	_{\$} 200	_{\$_} 200
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization ▼
Occupation Retired Employer	GIOR FIGIC IO	World Romization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		,
Page Subtota	\$650.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	1	
Page 5 of 7	line 3a of Summary Page.	,



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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/01/20 Name & Address: Leslie and Michael Morris 1023 Young Place Ann Arbor MI 48105	_{\$} 250	_{\$} 750
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization ▼
Occupation Researcher Employer Dr. Michael Morris Research Group	Onor Horo.	
Business Address Department of Chemistry - University of Michigan		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/02/20 Name & Address		
James Buhr 3105 Overridge Dr Ann Arbor MI 48104	_{\$} 150	<u>\$ 150</u>
5. If over \$100.00 cumulative, please provide:	Click Here for	or 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 08/03/20		
Name & Address: James Westerman 1573 Arlington Blvd Ann Arbor MI 48104	\$ 100	\$ 100
5. If over \$100.00 cumulative, please provide:	Click Here ic	r Memo Itemization 🔻
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/03/20 Name & Address	-	
Ed and Mary Cady 208 Orchard Hills Drive Ann Arbor MI 48104	_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization ▼
Occupation Retired Employer	Ollok Field Id	Works Romand
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtot	al \$750.00	
Grand Total of All Schedules 1/ (Complete on last page of Schedule		
Page 6 of 7	line 3a of Summar Page.	у



CANDIDATE COMMITTEE

Enter this total on line 3a of Summary

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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 08/03/20 Name & Address: Florence Gerber 121 Perrin Street Ypsilanti MI 48197	_s 150	_s 300
5. If over \$100.00 cumulative, please provide: Occupation Retired Employer Business Address	Click Here	for Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/03/20 Name & Address		
Terry Foster 1207 Arlington Blvd Ann Arbor MI 48104	_{\$} 50	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here t	or 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 08/05/20		
John Loken 2740 Packard Ann Arbor MI 48108	<u>\$ 100</u>	<u>\$ 100</u>
5. if over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
B. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/07/20		
Jane Lumm 3075 Overridge Dr Ann Arbor MI 48104	_{\$} 4000	_{\$} 5000
5. If over \$100.00 cumulative, please provide:		
Occupation Council Member Employer City of Ann Arbor	Click Here fo	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$4,300.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$7,775.00	



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number <u>C201</u>1039

CANDIDATE COMMI	ПТ	E	-
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2. Committee Name Jane Lumm for City Council

CANDIDATE COM		1	1
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? Yes Name & Address: Niki Wardner 2921 Overridge Dr Ann Arbor MI 48104 If over \$100.00 cumulative, please provide: Occupation: Paraprofessional Employer Name & Business Address: Ann Arbor Public Schools Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Food for Election Night Event 5. Date Of Receipt: 08/04/20 6. Vendor Name & Address:	76.08 \$	218.39
Contribution #2 PAC Receipt? Yes Name & Address Niki Wardner 2921 Overridge Drive Ann Arbor MI 48104	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN	48.40 s	366.79
If over \$100.00 cumulative, please provide: Occupation: Paraprofessional Employer Name & Address: Ann Arbor Public Schools Fund Raiser Contribution	Description Food for Election Night Event 5. Date Of Receipt: 08/04/20 6. Vendor Name & Address: Jimmy Johns 3365 Washtenaw Ann Arbor MI 48104	ick Here for Memo Ito	emization
Contribution #3 PAC Receipt? Yes Name & Address:	4.	\$.	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	ick Here for Memo It	emization
Fund Raiser Contribution			
		\$224.48	1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4
	Grand Total of all Schedules 1-I	^K \$224.48	

Enter this total on line 6 of Summary Page

Page ______ of ____



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

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			1000000
Name Sawicki and Sons		07/27/20	\$ 394.85
Address	Purpose: Yard Signs	Date	
1521 W. Lafayette		k Here for Memo	Itemization Type
Detroit MI 48216	l <u> </u>		,
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	D T	
Expenditure #2			
Name Jewish Community Media		07/29/20	\$ 400.00
Address	Purpose: Advertising	Date	
2935 Birch Hollow		l. Lloro for Momo	Itamization Tuna
Ann Arbor MI 48108	Circi	k Here for Memo	nemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	of	
Expenditure #3			***************************************
Name Kolossos Printing		07/29/20	\$ 7356.64
Address	Purpose: Printing and Mailing	Date	
2055 W. Stadium	Click	Here for Memo	Itemization Type
Ann Arbor MI 48103	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name US Post Office		07/28/20	
OS FOSI Office		Date	\$ <u>359.50</u>
Address	Purpose: Stamps	Date	
	Click	k Here for Memo	Itemization Type
	Check box if this expenditure is payment		··
D ₅	debt or obligation reported on previous	J.	
Fund Raiser	statement		
Expenditure #5			
Name Michigan Chinese American News		08/07/20	\$80.00
Address	Purpose: Advertising	Date	
4979 Ridgeside Circle Ann Arbor MI 48105	Clic	k Here for Memo	Itemization Type
AIIII AIDUI IVII 40 103	Check box if this expenditure is payment	of	
Fund Raiser	debt or obligation reported on previous statement		
	Sul	ototal this page	\$8,590.99
		• =	ΨΟ.ΟΟΟ.ΟΟ

Grand Total of all Schedules 1B (Complete on last page of Schedule) \$8,590.99

Enter this total on line 8a of Summary Page