



**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: 10/21/18 to 7/31/19

1. Committee I.D. Number  
**C-2018-062**

2. Committee Name  
**Committee to Elect Bryan Johnson**

4. Candidate Last Name **Johnson** First Name **Bryan** M.I. **L**

4a. Office Sought Including District # or Community Served (If applicable)  
**Ann Arbor Public School Board**

4b. County of Residence

5. Committee's Mailing Address  
**3020 Aspen Lane  
Ann Arbor, MI 48108**

Area Code and Phone (917) 841-6334  
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.

6. Treasurer's Name & Residential Address  
**Michael Lippert  
3023 Aspen Lane  
Ann Arbor, MI 48108**

Area Code & Phone (917) 841-6334

7. Treasurer's Business Address  
**700 E. University  
Ann Arbor, MI 48109**

Area Code and Phone \_\_\_\_\_

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

Area Code and Phone \_\_\_\_\_

9. TYPE OF STATEMENT

9a.  Pre-Election OR 9b.  Post-Election

Pre-Election or Post-Election Statement relates to:

Primary  
 General  
 Convention  
 Special  
 School  
 Caucus

Date of Election, Convention or Caucus \_\_\_\_\_

Required ONLY if candidate is not on the ballot for the current year:

July Quarterly  
 October Quarterly

9c.  Annual Statement (2019) Coverage Year

9d.  Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

9e. Dissolution of Candidate Committee

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 lates fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution \_\_\_\_\_

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

FILED  
WASHINGTON COUNTY, MI  
2019 AUG -1 P 10 31  
MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS  
UNIT: CLERK/REGISTRAR

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 Michael Lippert Signature [Signature] Date 8/1/2019

Candidate Bryan L. Johnson Signature [Signature] Date 8/1/2019



1. Committee I.D. Number C-2018-062

2. Committee Name Committee to elect Bryan Johnson

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>300.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$300.00</u>	(18.) \$ _____
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ _____	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ _____	(20.) \$ _____
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ _____	(21.) \$ _____
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,135.89</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ _____	(23.) \$ _____
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$1,933.56</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$300.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>\$2,233.56</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>\$1,135.89</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>\$1,097.67</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2018-062  
2. Committee Name Committee to elect Bryan Johnson

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.

3. Contribution # 1 PAC Receipt?  YES 4. Date of Receipt 10/24/18

Name & Address:  
John H. Jordan  
2967 Quail Hollow Ct  
Ann Arbor, MI 48106

6. Amount \$ 50.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 50.00

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 #2 PAC Receipt?  YES 4. Date of Receipt 10/14/18

Name & Address:  
Linda S. Carter  
1650 Franklin St.  
Ann Arbor, MI 48103"

6. Amount \$ 50.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 50.00

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 10/28/18

Name & Address:  
Isaac Lockhart  
4496 Lake Forest Drive  
Ann Arbor, MI 48108

6. Amount \$ 200.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 200.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Managing Partner Employer Marvel Cloud, Inc

Business Address 4496 Lake Forest Drive Ann Arbor, MI 48108

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 4 PAC Receipt?  YES 4. Date of Receipt \_\_\_\_\_

Name & Address \_\_\_\_\_

6. Amount \$ \_\_\_\_\_ 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

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 **\$300.00**  
Grand Total of All Schedules 1A (Complete on last page of Schedule) **\$300.00**

Enter this total on line 3a of Summary Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2018-062  
2. Committee Name Committee to elect Bryan Johnson

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Michigan Education Association</b>  Address <b>2805 S. Industrial Hwy #400 Ann Arbor, MI 48104</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing Services</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/19/19</u> Date	<u>\$ 760.89</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>Facebook</b>  Address   <input type="checkbox"/> Fund Raiser	Purpose: <u>Marketing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/04/18</u> Date	<u>\$ 244.48</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>Facebook</b>  Address   <input type="checkbox"/> Fund Raiser	Purpose: <u>Marketing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/05/19</u> Date	<u>\$ 5.52</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>Washtenaw County Clerk</b>  Address <b>200 N. Main Street Ste 120 Ann Arbor, MI 48107</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Late Fee</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/01/19</u> Date	<u>\$ 125.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name   Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$1,135.89**  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule)

Enter this total  
on line 8a of  
Summary Page