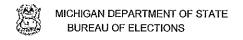


### CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

COVERFAGE					
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and or	d signed by candidate.	3. This Statement covers From	m: 11-29-16 to 7-20-17	7	
1. Committee I.D. Number (130214)		4. Candidate Last Name Mack	First Name	M.I.	
· ·			istrict # or Community Served (If applicable)		
2. Committee Name Brian L MacKie For Prosecuto	No.	Proseco	uting Attorney		
Brian L Macked of 11 - second	,	4b. County of Residence	loshtenaw		
5. Committee's Mailing Address		6. Treasurer's Name & Reside			
P.O. BOX 7025		Eric Guten			
Ann Arbor, MI 48107		233 Cres	t Ave		
Area Code and Phone 734 - 769 - 645	*/D	Ann Arbor,	MI 48103		
If the address in this box is different from the comm mailing address on the Statement of Organization,	nittee	Area Code & Phone 734	1-769-6459	•	
be sent to this address by the filing official.  7. Treasurer's Business Address			r's Name and Mailing Address (If the committee ha		
	ļ	Designated Record keeper)	5 Maine and Maining Address in the Continues in	sa	
4.0. 80x 8675	P.O. Box 8645 Ann Arbor, MIZ 48107			F.	
THA THOU IN T					
	!		min N		
Area Code and Phone 734-222-	6620	Area Code and Phone			
9. TYPE OF STATEMENT		<u></u>	9e. Dissolution of Candidate Committee	2	
9a. Pre-Election OR 9b. Post-Election	Required ON is not on the current year:		By checking this item I/We certify any outsta	pouse is here	
Pre-Election or Post-Election Statement relates to:	July Quarterly		by discharged and forgiven, and no longer collectible from the committee. The committee has no obstanding assets,		
Primary		·	owes no lates fees or has any ouslanding debt.		
General	October Q	uarterly	Further, if the dissolution cannot be granted, that this be iconsidered a request for the Reporting Waiver.		
Convention			constant a request for the reporting frame.		
Special	9c. Annual	ıl Statement ()	Effective date of dissolution		
School		Coverage Year	Enouge and or discounting		
Caucus	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
Date of Election, Convention or Caucus					
10. Verification: I/We certify that all reasonable dilig			ent and attached schedules (if any) and to the bes	t of	
my\our knowledge and belief the contents are true,	accurate and co	mplete.			
Current Treasurer or Designated Record keeper Type or Print Name	<u>berg</u>	Signature	Date 7/24/17		
Candidate RR/AW MAC	KIE	1 Anny N Signature	1 arpis Date 7-24-	17	
Type or Print Name		Signature			



#### **SUMMARY PAGE** CANDIDATE COMMITTEE

1. Committee I.D. Number <u>C130214</u>
2. Committee Name <u>Brian L. Mackie for Projecutor</u>

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	_	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <i>O</i>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$ 0
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>15.58</u>	(19.)\$ 15.58
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ /5.58	(20.) \$ 15.58
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$
EXPENDITURES		
8. Expenditures	_	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 1/2.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 1/2.00	(23.) \$ 1/2.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ _ <i>[</i>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ 0	(24.) \$ _ Ø
DEBTS AND OBLIGATIONS 12. Debts and Obligations	·	(27.) 4
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <i>O</i>	
	BALANCE STATEMENT	<u> </u>
13. Ending Balance of last report filed	(13.) \$ <u>23, 255.32</u> (14.) + \$ <u>15.58</u>	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14)+\$ 15.58	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ 23, 270.90	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15.) = \$ L3, L10.	•
(Add lines 9 and 11)	(16.) - \$ <u>// 2.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(16.) - \$ <u>//2.00</u> (17.) \$ <u>23, /58.90</u>	
(canada me ye nem me ye,		



## ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

#### CANDIDATE COMMITTEE

1. Committee I.D. Number <u>C130214</u>
2. Committee Name Brian L. Markie for Prosecutor

3. Name & Address From Whom Received 4. Date of Receipt	5. Type of Receipt 6. Amount
Receipt #1 Date of Receipt 12/20/16	Loan from a Lending Institution
Name & Address:	\$ 2.23
Bank of Ana Arbor	Interest
125 S. Fifth Ave	Refund \Rebate Click for Memo Itemization Type
Ann Arbor, M2 48107 Fund Raiser	Other (Specify)
Receipt #2 Date of Receipt 1/17/17 Name & Address:	Loan from a Lending Institution
Bankof Ana Arbor	Interest \$ /. 78
125 S. Fifth Ave	Refund \Rebate Click for Memo Itemization Type
Ann Arbor, MIL 48107	
Fund Raiser	Other (Specify)
Receipt #3 Name & Address:  Date of Receipt 2/2/1/17	Loan from a Lending Institution
Bank of Ann Arbor	Interest \$ 2.
125 S. Fifth Ave.	Refund \Rebate Click for Memo Itemization Type
Ann Arbor, MI 48107	Other (Specify)
Fund Raiser	
Receipt #4 Date of Receipt 3(21/17) Name & Address:	Loan from a Lending Institution
Bank of Ann Arbor	X  Interest
125 S-Fifth Ave	Refund \Rebate Click for Memo Itemization Type
Ann A-box, MI 48101	
Fund Raiser	Other (Specify)
Receipt #5 Date of Receipt 4/18/17 Name & Address:	Loan from a Lending Institution
Bank of Ann Arbor	Interest \$_/. 78
125 S. Fifth Ave.	Refund \Rebate Click for Memo Itemization Type
Ann Arbor, MI 48107	
Fund Raiser	Other (Specify)
Receipt #6 Date of Receipt 5/16/11	Loan from a Lending Institution
Bank of Ann Arbor	1. 78 s
125 S. Fifth Aue.	Refund \Rebate Click for Memo Itemization Type
Ann Alber, MI 48107	Other (Specify)
Fund Raiser  Receipt #7  Date of Receipt  1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
Name & Address:	Loan from a Lending Institution
Bank of Ann Arbor	\$ Z. ZZ
125 S. Fifth Ave.	Click for Memo Itemization Type
Ann Arbor, MI 48107	Refund \Rebate
Fund Raiser	Other (Specify)
	Page Subtotal 13.80
	Grand Total of All Schedules 1A -1
	(Complete on last page of Schedule)  Enter this total on
	2

Enter this total on line 4 of Summary Page

Page 1 of 2



## ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 2/30 214						
2. Committee Name_	Brian	L.	Mackie	For	Prosecuto	<i>_</i>

3. Name & Address From Whom Receiv		5. Type of Receipt	6. Amount
Receipt #1 Name & Address:	Date of Receipt 7/18/17	Loan from a Lending Insti	itution 18
Bank of Ann Arbor 125. S. Fifth Ave Ann Arbor, MI 48		Interest	\$ <u>/. "</u>
125. S. Fith 4ve	t a series	Refund \Rebate	Click for Memo Itemization Type
Ann Arbor, MI 981	Fund Raiser	Other (Specify)	
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending Inst	itution
		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #3 Name & Address:	Date of Receipt	Loan from a Lending Instit	tution
		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	····
Receipt #4 Name & Address:	Date of Receipt	Loan from a Lending Instit	fution
		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	•
Receipt #5	Date of Receipt	Loan from a Lending Institu	ution
Name & Address:		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
•		<u> </u>	
	Fund Raiser	Other (Specify)	
Receipt #6 Name & Address:	Date of Receipt	Loan from a Lending Instit	tution
		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	***************************************
Receipt #7 Name & Address:	Date of Receipt	Loan from a Lending Insti	itution
rano a radioss.			\$
		Interest	Click for Memo Itemization Type
		Refund \Rebate	
	Fund Raiser	Other (Specify)	Po Cultival I
		_	Page Subtotal 1.78
		Grand Total of All S (Complete on last pa	

Enter this total on line 4 of Summary Page

Page 2 of 2



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number <u>C130214</u>
2. Committee Name <u>Brian L. Mackie for Proserutor</u>

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name U.S. Postmaster  Address 200 E. Liberty  Ann Arbor, MI 48104	2	127/17	\$ 117 00
Address 200 E. Liberty	Purpose: Renew P.D. Box	Date	116.
Ann Arbor, MI 98104	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name			
			\$
Address	Durnage	Date	
Address	Purpose:		
	Click He	ere for Memo	Itemization Type
	Charle have if this averagiture is necessart of		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
			•
Name			
		Dete	\$
Address .	Purpose:	Date	
	OF LU		
	Click He	re for Memo I	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #4			
Name			
	_		\$
Address		Date	·
,	Purpose:		
	Click He	re for Memo i	temization Type
	Click He	I O IOL MENIO I	torneadon Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	. a.poso.		
	Click He	re for Memo I	temization Type
	Check box if this expenditure is payment of		,,
	debt or obligation reported on previous		
Fund Raiser	statement		
	Subtota	l this page	112.00
	Grand Total of all So		112.00
	(Complete on last page of	i ocnedule)	(10.

Enter this total on line 8a of Summary Page

Page \_\_\_\_\_ of \_\_\_\_