CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink an	d signed by	3. This Statement covers From	m: ol a second	
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.			01-01-11 to 01-20-19	
1. Committee I.D. Number		4. Candidate Last Name Mac Kid	First Name M.I. Brian L	
6130219			strict # or Community Served (If applicable)	
2. Committee Name				
Brian L. Mackie for Proseru	tor	ון שוניטונים	g Attorney	
		4b. County of Residence	ashfenan	
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ential Address	
P.O. Box 7025		6. Treasurer's Name & Residential Address Eric Gutenberg		
Ann Arbor, MZ 48107		233 Crest Ave.		
Area Code and Phone 734-769-6458 If the address in this box is different from the committee		Ann Arbon	7, MI 48103 REST D	
mailing address on the Statement of Organization, be sent to this address by the filing official.	mail may	Area Code & Phone 734-769-6458 5		
7. Treasurer's Business Address	2	8. Designated Record Keeper	r's Name and Address (If the committee has a	
P.O. BOX 8645		Designated Record Keeper)	72 -	
Ann Arbor, MI 4	8107	,- ,		
		*		
		×		
Area Code and Phone 734 - 222 - 6	620	Area Code and Phone	The state of the s	
9. TYPE OF STATEMENT		L	9e. Dissolution of Candidate Committee	
9a. Pre-Election OR 9b. Post-Election	Required ON is not on the current year:		By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here	
Pre-Election or Post-Election Statement relates to:			by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets,	
Primary	July Quarte	erly	owes no lates fees or has any oustanding debt.	
General	October Q	uarterly	Further, if the dissolution cannot be granted, that this be	
Convention			considered a request for the Reporting Waiver.	
Special	9c. Annual	l Statement ()		
School		Coverage Year	Effective date of dissolution	
Caucus	9d. Amend	dment to Campaign Statement lete Item 9a, 9b, 9c or 9e to		
	indicat	e which Statement is being	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
Data of Floring Committee	amend	eu.)	osnodalo 15 dia die odimilary i age.	
Date of Election, Convention or Caucus	. 1.711			
***			. · · · · · · · · · · · · · · · · · · ·	
10. Verification: I\We certify that all reasonable diligemy\our knowledge and belief the contents are true, a	ence was used in	n the preparation of this stateme	ent and attached schedules (if any) and to the best of	
	accurate and con	P With		
Current Treasurer or Designated Record keeper Eril Gufenbe	rg	, estent	Date 7/23/19	
Type or Print Name	J	Signature	242	
Candidate BRIAN MACKI	E	Brian M	1ahr Date 7-23-2019	
Type or Print Name		Signature		

1. Committee I.D. Number <u>C130214</u>

SUMMARY PAGE

2. Committee Name Brian L. Mackie For Projecutor

CANDIDATE COMMITTEE	2. Committee Hame Ville	(10, 10)/100/01
RECEIPTS 3. Contributions	Column This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ _ O	12
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	r - 1',
c. Subtotal of "Contributions"	(3c.) \$_ /	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ 46.40	(19.) \$ 139.39
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>46.40</u>	(20.) \$ 139.39
IN-KIND CONTRIBUTIONS & EXPENDITURES		in the statement of
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 134.00	CMCCCC A D CMCCCC
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	a sa
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 134.00	(23.) \$ 366.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		A
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _ O	
 b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 	(10b.) \$	
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <i>(</i>)	
	BALANCE STATEMENT	1
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) 	(13.) $\frac{23}{16.31}$ (14.) $+ \frac{46}{40}$ (15.) $= \frac{23}{162.71}$ (16.) $- \frac{134.00}{17.00}$ (17.) $\frac{23}{162.71}$	
	*	



Page _____ of ____

ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number <u>C130214</u>

	2. Co	ommittee Name <u>Brign L. Ma</u>	rckie for Prosecutor
3. Name & Address From Whom Receive	ed 4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address:	Date of Receipt 01 - 16 - 19	Loan from a Lending Institution	
Bank of Ann Albor		Interest	\$ 2.67
125 S. Fifth Ave.		Refund \Rebate C	lick for Memo Itemization Type
Ann Arbor, MI 48107	Fund Raiser	Other (Specify)	
Receipt #2 Name & Address:	Date of Receipt 02 - 19 - 19	Loan from a Lending Institution	on
Bank of Ann Arbor		Interest	¢ 7 76
125 S. Fifth Ave.		7	Click for Memo Itemization Type
Ann Arbor, MI 48107	Fund Raiser	Other (Specify)	,,
Receipt #3 Name & Address:	Date of Receipt 03-19-19	Loan from a Lending Institutio	n
Bank of Ann Arbor		Interest	\$ 6.17
125 S. Fifth Ave.		Refund \Rebate C	Click for Memo Itemization Type
Ann Arbor, MI 48107	Fund Raiser	Other (Specify)	
Receipt #4 Name & Address:	Date of Receipt <u>04-16-19</u>	Loan from a Lending Institutio	n
Bank of Ann Albor		Interest	\$ 6.18
125 S. Fifth Ave.		二	lick for Memo Itemization Type
Ann Arbor, MI 48107	Fund Raiser	Other (Specify)	,,
Receipt #5 Name & Address:	Date of Receipt <u>05 - 21 - 19</u>	Loan from a Lending Institution	1
Bank of Ann Alber		Interest	\$ 7.72
125 S. Fifth Ave.		Refund \Rebate C	lick for Memo Itemization Type
Ann Arbor, MI 48107	Fund Raiser	Other (Specify)	_
Receipt #6 Name & Address:	Date of Receipt 06 - 18 - 19	Loan from a Lending Institution	n 1.6
Bank of Ann Arbor		Interest	\$ 6.18
125 S. Fifth Ave.		Parcel .	ick for Memo Itemization Type
Ann Arbor, MI 48107	Fund Raiser	Other (Specify)	
Receipt #7 Name & Address:	Date of Receipt 07-16-19	Loan from a Lending Institutio	
Bank of Ann Arbor			\$ 6.18
125 S. Fifth Ave.		Interest	ials for Marca Harriantian Tu-
Ann Arbor, MI 48107		Refund \Rebate	ck for Memo Itemization Type
,	Fund Raiser	Other (Specify)	
			ge Subtotal \$ 42.86
		Grand Total of All Scheo (Complete on last page of	

Enter this total on line 4 of Summary

Page



ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number <u>C130214</u>

E		Committee Name Brian L. MacKi	for Prosecutor
3. Name & Address From Whom Received		5. Type of Receipt	6. Amount
Receipt #1 Name & Address:	Date of Receipt 7/16/19	Loan from a Lending Institution	\$ 3.54
Bank of Ann Arbor	Cadditional interest	Interest	\$ 5 1
125 S. Fifth Ave	(additional interest accrued in 2019)	Refund \Rebate Click fo	r Memo Itemization Type
Ann A-bor, MI 4810	Fund Raiser	Other (Specify)	
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending Institution	aspess contra ution".
		Interest	\$
		Refund \Rebate Click for	or Memo Itemization Type
* * *	Fund Raiser	Other (Specify)	
Receipt #3 Name & Address:	Date of Receipt	Loan from a Lending Institution	
		Interest	\$
na jednosti pika	• • •	Refund \Rebate Click fo	r Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #4 Name & Address:	Date of Receipt	Loan from a Lending Institution	-
		Interest	\$
		Refund \Rebate Click fo	r Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #5 Name & Address:	Date of Receipt	Loan from a Lending Institution	
		Interest	\$
		Refund \Rebate Click for	Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #6 Name & Address:	Date of Receipt	Loan from a Lending Institution	
		Interest	\$
		Refund \Rebate Click for	Memo Itemization Type
	Fund Raiser	Other (Specify)	*
Receipt #7 [Name & Address:	Date of Receipt	Loan from a Lending Institution	.
		Interest	\$
		Refund \Rebate Click for	Memo Itemization Type
	Fund Raiser	Other (Specify)	
		Page Sul	# 3. 3
		Grand Total of All Schedules 1 (Complete on last page of Sche	
			Cutanthia tatal an

Enter this total on line 4 of Summary Page

Page _____ of ____



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I. D. Number <u>C130214</u>

2. Committee Name Brian L. Mackie for Proserutor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	
	4. Purpose (Required information)	5. Date 6. Amount
Expenditure #1		
Name U.S. Postmuster	02	12/19 \$ 124 m
Address 200 E. Liberty St. Ann Arbor, MI 48104	Purpose: 4new P.O. Box	Date (159.00)
Ana Arbor, MI 48104	Click F	lere 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	Purpose:	Date
	Click H	ere for Memo Itemization Type
er or distributed for the first of the second of the secon	Property of the Control of the Contr	7
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous	
Expenditure #3	statement	
Name		
reamo	B A A A A A A A A A A A A A A A A A A A	
Address	Purpose:	Date \$
	Tulpose.	
	Click He	ere for Memo Itemization Type
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #4		
Name		
	_	\$
Address	Purpose:	Date
	promy	re for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #5		
Name		
Address	_	\$
Address	Purpose:	Date
	Click He	re for Memo Itemization Type
	Check box if this expenditure is payment of	71.
Fund Raiser	debt or obligation reported on previous statement	
	Subtotal	this page H 1211 00

Grand Total of all Schedules 1B (Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

Page _____ of ___