



**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.

<p>1. Committee I.D. Number 0130214</p> <p>2. Committee Name Brian L. Mackie for Prosecutor</p> <p>5. Committee's Mailing Address P.O. Box 7025 Ann Arbor, MI 48107</p> <p>Area Code and Phone _____ 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.</p> <p>7. Treasurer's Business Address Area Code and Phone _____</p>		<p>3. This Statement covers From: 10/21/20 to 1/29/21</p> <p>4. Candidate Last Name Mackie First Name Brian M.I. L</p> <p>4a. Office Sought Including District # or Community Served (If applicable) Prosecuting Attorney</p> <p>4b. County of Residence Washtenaw</p> <p>6. Treasurer's Name & Residential Address Eric Gutenberg 233 Crest Ave Ann Arbor, MI 48103</p> <p>Area Code & Phone _____</p> <p>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Area Code and Phone _____</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. Pre-Election OR 9b. Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p>Primary General Convention Special School Caucus</p> <p>Date of Election, Convention or Caucus _____</p>	<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p>July Quarterly October Quarterly</p> <p>9c. <input checked="" type="checkbox"/> Annual Statement (2020) Coverage Year</p> <p>9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	<p>9e. <input checked="" type="checkbox"/> Dissolution of Candidate Committee</p> <p>By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is hereby discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution 1/28/21</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>	
<p>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.</p>			
<p>Current Treasurer or Designated Record keeper Eric Gutenberg Type or Print Name</p>		<p>E. Gutenberg Signature</p>	
<p>Candidate BRIAN MACKIE Type or Print Name</p>		<p>Brian Mackie Signature</p>	
<p>Date 1/28/21</p>		<p>Date 1-28/21</p>	

FILED
WASHTENAW COUNTY, MI
2021 JAN 28 P 3:30
LARA RENEE KESTENBAUM
COUNTY CLERK/REGIS



1. Committee I.D. Number C130214

2. Committee Name Brian L Mackie for Professor

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>0</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>0</u>	(18.) \$ <u>0</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>11.61</u>	(19.) \$ <u>181.18</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>11.61</u>	(20.) \$ <u>181.18</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>22,922.50</u>	
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.) \$ <u>22,922.50</u>	(23.) \$ <u>23,436.50</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>22,910.89</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>11.61</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>22,922.50</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>22,922.50</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>0</u>	



**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1**

CANDIDATE COMMITTEE

1. Committee I.D. Number C130214
2. Committee Name Brian L Mackie For Prosecutor

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: <u>Bank of Ann Arbor</u> <u>125 S. Fifth Ave</u> <u>Ann Arbor, MI 48107</u>	Date of Receipt <u>10/20/20</u>	Loan from a Lending Institution <input checked="" type="checkbox"/> Interest Refund \Rebate Other (Specify) _____	\$ <u>1.10</u>
Receipt #2 Name & Address: <u>Bank of Ann Arbor</u> <u>125 S. Fifth Ave</u> <u>Ann Arbor, MI 48107</u>	Date of Receipt <u>11/17/20</u>	Loan from a Lending Institution <input checked="" type="checkbox"/> Interest Refund \Rebate Other (Specify) _____	\$ <u>.88</u>
Receipt #3 Name & Address: <u>Bank of Ann Arbor</u> <u>125 S. Fifth Ave</u> <u>Ann Arbor, MI 48107</u>	Date of Receipt <u>12/15/20</u>	Loan from a Lending Institution <input checked="" type="checkbox"/> Interest Refund \Rebate Other (Specify) _____	\$ <u>.68</u>
Receipt #4 Name & Address: <u>Bank of Ann Arbor</u> <u>125 S. Fifth Ave</u> <u>Ann Arbor, MI 48107</u>	Date of Receipt <u>1/19/21</u>	Loan from a Lending Institution <input checked="" type="checkbox"/> Interest Refund \Rebate Other (Specify) _____	\$ <u>.43</u>
Receipt #5 Name & Address: <u>Bank of Ann Arbor</u> <u>125 S. Fifth Ave</u> <u>Ann Arbor, MI 48107</u>	Date of Receipt <u>1/22/21</u>	Loan from a Lending Institution Interest Refund \Rebate Other (Specify) <u>Administrative credit at account closing</u>	\$ <u>8.52</u>
Receipt #6 Name & Address: _____	Date of Receipt _____	Loan from a Lending Institution Interest Refund \Rebate Other (Specify) _____	\$ _____
Receipt #7 Name & Address: _____	Date of Receipt _____	Loan from a Lending Institution Interest Refund \Rebate Other (Specify) _____	\$ _____
Page Subtotal			\$ <u>11.61</u>
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			\$ <u>11.61</u>

Enter this total on
line 4 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 0130214
2. Committee Name Brian L Mackie for Prosecutor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Community Action Network</u> Address <u>P.O. Box 130076</u> <u>Ann Arbor, MI 48113</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/17/20</u> Date	<u>\$ 11,456.00</u>
Expenditure #2 Name <u>Peace Neighborhood Center</u> Address <u>1111 N. Maple Road</u> <u>Ann Arbor, MI 48103</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/17/20</u> Date	<u>\$ 11,457.50</u>
Expenditure #3 Name <u>Bank of Ann Arbor</u> Address <u>125 S. Fifth Ave</u> <u>Ann Arbor, MI 48107</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Service charge</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1/19/21</u> Date	<u>\$ 9.00</u>
Expenditure #4 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	\$ _____
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	\$ _____

Subtotal this page 22,922.50
Grand Total of all Schedules 1B
(Complete on last page of Schedule) 22,922.50

Enter this total on line 8a of Summary Page