



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**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: <u>08/15/16</u> to <u>10/23/16</u>	
1. Committee I.D. Number C-2016-163	4. Candidate Last Name Mitchell First Name Harmony M.I. T 4a. Office Sought Including District # or Community Served (If applicable) Board Member - Ann Arbor School Board 4b. County of Residence WASHTENAW
2. Committee Name Committee to Elect Harmony Mitchell	6. Treasurer's Name & Residential Address Jacki Weisman 1010 Red Oak Road Ann Arbor, MI 48103 Area Code & Phone <u>(734) 330-4793</u>
5. Committee's Mailing Address Committee to Elect Harmony Mitchell 1010 Red Oak Road Ann Arbor, MI 48103 Area Code and Phone <u>(734) 330-4793</u> 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.	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Area Code and Phone _____
7. Treasurer's Business Address Truven Health Analytics 100 Phoenix Drive Ann Arbor, MI 48109 Area Code and Phone <u>(734) 913-3613</u>	9e. Dissolution of Candidate Committee <input type="checkbox"/> 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 late 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.
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>11/08/16</u>	Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)
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 Jacki Weisman Signature <u>Jacki Weisman</u> Date <u>10/27/16</u> Candidate Harmony Mitchell Signature <u>Harmony Mitchell</u> Date <u>10/27/16</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number C-2016-163

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Harmony Mitchell

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$		
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$		(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	\$0.00	(20.) \$0.00
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	\$1,361.12	(21.) \$1,361.12
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$		(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$		
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	\$0.00	(23.) \$0.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	\$0.00	(24.) \$0.00
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	\$0.00	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	\$1,361.12	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	\$1,361.12	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	\$0.00	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	\$1,361.12 *	



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number C2016163

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Harmony Mitchell

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? <input checked="" type="checkbox"/> Yes Name & Address: Ann Arbor Community for Education-Political Action Committee 1010 Red Oak Road Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Yard Signs</u> 5. Date Of Receipt: <u>08/25/16</u> 6. Vendor Name & Address: Sawicki & Son 1521 W. Lafayette Detroit, MI 48216	\$ <u>777.34</u>	\$ <u>812.67</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ann Arbor Community for Education-Political Action Committee 1010 Red Oak Road Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Postcards</u> 5. Date Of Receipt: <u>08/26/16</u> 6. Vendor Name & Address: On Demand Printing 4359 Jackson Road Ann Arbor, MI 48103	\$ <u>35.33</u>	\$ <u>812.67</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: AAEA-PAC/MEA-PAC 1216 Kendale Blvd, PO Box 2573 E. Lansing, MI 48826 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Postcards</u> 5. Date Of Receipt: <u>09/05/16</u> 6. Vendor Name & Address:	\$ <u>471.25</u>	\$ <u>471.25</u>
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$1,283.92

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C2016163

2. Committee Name Committee to Elect Harmony Mitchell

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 <u>all</u> 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)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Elmo Morales 404 E. Liberty Ann Arbor, MI 48103</p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer Name & Business Address: Elmo's T-Shirts & Gifts 404 E. Liberty Ann Arbor, MI 48103</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>T-Shirts</u></p> <p>5. Date Of Receipt: <u>09/09/16</u></p> <p>6. Vendor Name & Address: Elmo's T-Shirts & Gifts 404 E. Liberty Ann Arbor, MI 48103</p> <p>Click Here for Memo Itemization</p>	\$ 56.00	\$ 56.00
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Peter Ways 815 Mt. Pleasant Ave. Ann Arbor, MI 48103</p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>Teacher</u> Employer Name & Address: Ann Arbor Open School 920 Miller Avenue Ann Arbor, MI 48103</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>Postcards</u></p> <p>5. Date Of Receipt: <u>09/15/16</u></p> <p>6. Vendor Name & Address: Office Depot 3765 Washtenaw Ave Ann Arbor, MI 48104</p> <p>Click Here for Memo Itemization</p>	\$ 21.20	\$ 21.20
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address:</p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description _____</p> <p>5. Date Of Receipt: _____</p> <p>6. Vendor Name & Address:</p> <p>Click Here for Memo Itemization</p>	\$ _____	\$ _____

Page Subtotal **\$77.20**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **\$1,361.12**

Enter this total
on line 6 of Summary
Page