

**CAMPAIGN FINANCE  
LATE FILING FEE CREDIT**

**Committee Name: Manley for School Board**

**Credit For: Late Pre-election statement**

**Amount Paid: \$175 Balance remaining: \$0**

**Date Paid: 11/04/2014**

**Received By:**

**Washtenaw County**

A handwritten signature in black ink, appearing to read "Ryan Callahan", is written over a horizontal line. The signature is fluid and cursive.



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: 4/4/14 to 10/19/14

1. Committee I.D. Number  
46-5291753

4. Candidate Last Name First Name M.I.  
MANLEY PATRICIA A

2. Committee Name

4a. Office Sought Including District # or Community Served (If applicable)  
TRUSTEE, ANN ARBOR SCHOOL BOARD

MANLEY FOR SCHOOL BOARD

4b. County of Residence WASHTENAW

5. Committee's Mailing Address

PO BOX 2951  
ANN ARBOR, MI 48106

6. Treasurer's Name & Residential Address

PATRICIA A. BERRY  
1081 GREEN ROAD  
ANN ARBOR, MI 48105

Area Code and Phone 734-645-2832

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.

Area Code & Phone 734-665-8175

7. Treasurer's Business Address NONE

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

CAROL McTERRIN  
3123 POTOMAC CT.  
ANN ARBOR, MI 48106

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

Area Code and Phone 734-677-0801

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

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

- ☐ July Quarterly  
☐ October Quarterly

9c. ☐ Annual Statement (\_\_\_\_\_) Coverage Year

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

Date of Election, Convention or Caucus

11/04/2014

9e. Dissolution of Candidate Committee

☐ By checking this item, I certify that 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.

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.

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 PATRICIA A BERRY  
Type or Print Name

Signature

Date

11/4/14

Candidate

PATRICIA A MANLEY  
Type or Print Name

Signature

Date

11/4/14



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 46-5291753

2. Committee Name MANLEY FOR SCHOOL BOARD

**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>10,925.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>10,925.00</u>	(18.) \$ <u>11,345.00</u>
4. Other Receipts (Schedule 1A-1, Column 6)	(4.) \$	<u>- 0 -</u>	(19.) \$ <u>- 0 -</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>10,925.00</u>	(20.) \$ <u>11,345.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
6. In-Kind Contributions (Schedule 1-IK, Column 6)	(6.) \$	<u>617.94</u>	(21.) \$ <u>617.94</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>- 0 -</u>	(22.) \$ <u>- 0 -</u>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>7,384.05</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>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>7,384.05</u>	(23.) \$ _____
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>N/A</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>N/A</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>N/A</u>	(24.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>- 0 -</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>- 0 -</u>	
<b>BALANCE STATEMENT</b>			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>10,925.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>10,925.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>7,384.05</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>3,445.95</u>	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/4/2014</u>	
Name & Address: <u>MANLEY PATRICIA &amp; LAMONT (CANDIDATE - PATRICIA)</u> <u>2645 POWELL AVE</u> <u>ANN ARBOR, MI 48104</u>		<u>\$1,200.00</u>	<u>\$1,200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____		Click Here for Memo Itemization	
Business Address <u>2645 POWELL AVE, ANN ARBOR, MI 48104</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/4/2014</u>	
Name & Address: <u>MCQUISTON FREDERICK &amp; NORMA</u> <u>1398 WOLVERHAMPTON</u> <u>ANN ARBOR MI 48105</u>		<u>\$200.00</u>	<u>\$200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____		Click Here for Memo Itemization	
Business Address <u>1398 WOLVERHAMPTON, ANN ARBOR, MI 48105</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/16/2014</u>	
Name & Address: <u>JORDAN ELAINE</u> <u>2181 HEMLOCK DR.</u> <u>ANN ARBOR, MI 48108</u>		<u>\$100.00</u>	<u>\$100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____		Click Here for Memo Itemization	
Business Address <u>2181 HEMLOCK DR., ANN ARBOR, MI 48108</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/16/2014</u>	
Name & Address: <u>ERVIN CHERYL P.</u> <u>1500 PINE VALLEY</u> <u>ANN ARBOR, MI 48104</u>		<u>\$100.00</u>	<u>\$100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address <u>1500 PINE VALLEY, ANN ARBOR, MI 48104</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal \$1,600.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/17/2014</u>	
Name & Address: <u>KING, ISADORE J.</u> <u>4370 WESTPARK CT.</u> <u>ANN ARBOR MI 48108</u>		<u>\$100.00</u>	<u>\$100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT/CEO</u> Employer <u>SYNERGY PARTNERS, LLC</u> Business Address <u>3031 W. GRAND BLVD., DETROIT, MI 48202</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/17/2014</u>	
Name & Address: <u>JOHNSON, ELBINNE &amp; CLAUDE</u> <u>1881 INDEPENDENCE BLVD.</u> <u>ANN ARBOR MI 48104-6373</u>		<u>\$25.00</u>	<u>\$25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/17/2014</u>	
Name & Address: <u>MOORE JAMES &amp; ANNIE</u> <u>2115 STEEPLECHASE</u> <u>ANN ARBOR MI 48103</u>		<u>\$50.00</u>	<u>\$50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/17/2014</u>	
Name & Address: <u>DEREN JOYCE &amp; MICHAEL</u> <u>2640 POWELL</u> <u>ANN ARBOR MI 48104</u>		<u>\$100.00</u>	<u>\$100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MUSICIAN</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>2640 POWELL, ANN ARBOR MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$275.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5891753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/17/2014</u> Name & Address: <u>TELMO, ROBERT B.</u> <u>3254 ALPINE DR.</u> <u>ANN ARBOR, MI 48108-1766</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address <u>3254 ALPINE DR., ANN ARBOR, MI 48108-1766</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/17/2014</u> Name & Address: <u>BERRY, JOHN &amp; PATRICIA</u> <u>1081 GREEN ROAD</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address <u>1081 GREEN ROAD, ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/2014</u> Name & Address: <u>PARKER, WALTER &amp; HENRI</u> <u>3626 DEERFIELD PL.</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/2014</u> Name & Address: <u>THUN MELISSA</u> <u>2114 FRIEZE AVE.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address <u>2114 FRIEZE AVE., ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$ 475.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 4/23/2014

Name & Address:

FINN JOHN & JOAN  
431 RYAN ROAD  
ANN ARBOR, MI 48103

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED TEACHER Employer WASHTENAW COMMUNITY COLLEGE Click Here for Memo Itemization

Business Address 4800 EAST HURON RIVER DR, ANN ARBOR, MI 48105-4800

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 4/23/2014

Name & Address:

CARTER, STEFANI G.  
3360 PITTSTVIEW DR.  
ANN ARBOR MI 48108

\$ 50.00 \$ 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 4/27/2014

Name & Address:

McQUISTON, FREDERICK & NORMA  
1398 WOLVERHAMPTON DR.  
ANN ARBOR, MI 48105

\$ 100.00 \$ 300.00

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Retired Employer \_\_\_\_\_

Business Address 1398 WOLVERHAMPTON DR, ANN ARBOR, MI 48105

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 4/27/2014

Name & Address:

MUNRO, ANN  
14 RIDGEWAY  
ANN ARBOR, MI 48104

\$ 20.00 \$ 20.00

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

Page Subtotal 220.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291253  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

PHIL POT. LINNIE

910 DANIEL ST.

ANN ARBOR MI 48103-3214

\$ 25.00

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

SOMMERVILLE, LAVERNE

3847 CENTURY CT.

WILSON, MI 48197

\$ 20.00

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

POPOVSKI, VESNA; VLADIMIR

2120 INDEPENDENCE BLVD.

ANN ARBOR, MI 48104

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

HOWARD, CURTIS; LINDA

3389 CROMWELL RD.

ANN ARBOR MI 48105-4111

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

3 195.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/2014</u> Name & Address: <u>HUNTER LOYCE</u> <u>1676 COBURN DR.</u> <u>ANN ARBOR, MI 48108-9627</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/2014</u> Name & Address: <u>NEIBURDS, BONITA &amp; HAROLD</u> <u>9034 MCKENDRY DR.</u> <u>SALINE, MI 48176</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROF. DENTAL HEALTH</u> Employer <u>University of Michigan</u> Business Address <u>School of Dentistry ANN ARBOR, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/2014</u> Name & Address: <u>WOOTEN, DAVID &amp; LYNN</u> <u>2919 WHISTERING WOODS DR.</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASSOC. DEAN</u> Employer <u>UNIVERSITY OF MICHIGAN</u> Business Address <u>ROSS SCHOOL OF BUSINESS ANN ARBOR, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/2014</u> Name & Address: <u>BROWN, ROBERT K. &amp; SHARON</u> <u>2016 TURNBURY LANE</u> <u>ANN ARBOR MI 48108</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 7 250.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/2014</u> Name & Address: <u>WILLIAMS, HARRY &amp; PATRICIA</u> <u>10465 FELLOWS HILL DR</u> <u>PLYMOUTH MI 48170-6350</u>		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DENTIST</u> Employer <u>STATE OF MICHIGAN</u> Business Address <u>MICHIGAN DEPARTMENT OF CORRECTIONS</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/2014</u> Name & Address: <u>SIPP GREGORY &amp; ELMORA</u> <u>3520 BARRY KNOLL DR.</u> <u>ANN ARBOR MI 48108</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED ARTIST</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>3520 BARRY KNOLL DR, ANN ARBOR, MI 48108</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/2014</u> Name & Address: <u>HARRIS, SANBRA</u> <u>216 CHARLES ST.</u> <u>ANN ARBOR, MI 48103-2906</u>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/27/2014</u> Name & Address: <u>WOODS WENDY &amp; RONALD</u> <u>2034 LIBERTY HEIGHTS</u> <u>ANN ARBOR MI 48103</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROF - HISTORY</u> Employer <u>EASTERN MICHIGAN</u> Business Address <u>YPSILANTI, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$ 375.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 4/27/2014  
Name & Address: FREEMAN-BROOKS, DALEY  
242 TAFT STREET  
PSILANTI, MI 48197-4727

\$ 10.00 \$ 10.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 4/27/2014  
Name & Address: MONTAGUE PATRICIA CHRISTINA  
2734 MAITLAND DR.  
ANN ARBOR, MI 48105

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 4/27/2014  
Name & Address: RAY-TAYLOR, ROSS L.  
1840 MICHELLE CT.  
ANN ARBOR, MI 48105

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 4/27/2014  
Name & Address: MARTIN ALICE M.  
2901 NORTHBROOK PL., APT #502  
ANN ARBOR, MI 48103

\$ 20.00 \$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal

7 / 30.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 4/27/2014

Name & Address:

MAHON, JOSEPH D.  
401 OAKBROOK DR. APT #143  
ANN ARBOR, MI 48103

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 4/27/2014

Name & Address:

FITZ, MARY V.  
2757 FOSTER AVE  
ANN ARBOR, MI 48108-1320

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 4/27/2014

Name & Address:

BAKER, MARGARET  
3271 BOGOS CIR.  
ANN ARBOR, MI 48105

\$ 25.00 \$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 4/27/2014

Name & Address:

HAMPTON, ESTHER & WILLIAM  
1184 WENDY CT.  
ANN ARBOR, MI 48103

\$ 65.00 \$ 65.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 240

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

46-5291753

2. Committee Name

MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

WRAY-MCAFEE, SANDRA  
1807 CRANBERRY CT.  
ANN ARBOR, MI 48103-8919

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

OFFEN, ELLEN  
1911 BOULDER DR.  
ANN ARBOR MI 48104

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation

RETIRED

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

FLOWERS, LAURETTA  
504 BULL DOG DR.  
ANN ARBOR, MI 48103-2076

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

TYLER, BEVERLY & DAVID  
9239 PANAMA AVE.  
VIRILANTI, MICH 48108

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

\$ 250

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

465291753

2. Committee Name

MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

TURNER, DOLORES  
4190 HIGH RIDGE ROAD  
ANN ARBOR, MI 48105

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:



Direct



Loan from a person



Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

4/27/2014

Name & Address:

JACKSON, GRAY, EDNA & ROY  
4404 OAKENBATES DR  
YPSILANTI, MI 48197

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:



Direct



Loan from a person



Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

5/4/2014

Name & Address:

WILLIAMS, ALBERT KEVIN  
5119 SHATTUCK AVE  
OAKLAND, CA 94609-2008

\$ 30.00

\$ 30.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:



Direct



Loan from a person



Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

5/7/2014

Name & Address:

SMITH, ROBERT & MARY  
265 SUNSET RD  
ANN ARBOR, MI 48105

\$ 25.00

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:



Direct



Loan from a person



Fund Raiser

Page Subtotal

\$ 155.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 5/7/14

Name & Address:

MUNRO, ANN & DONALD  
14 RIDGEWAY  
ANN ARBOR, MI 48104

\$ 50.00 \$ 70.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 5/7/14

Name & Address:

EDWARDS G. J.  
1470 CRAWFORD LN  
ANN ARBOR, MI 48105

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 5/7/14

Name & Address:

HACKINS, JAMES & VIVIAN  
2144 COLLEENWOOD ST.  
YASILANTI, MI 48197

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 5/7/14

Name & Address:

BROCKWAY, CHARLES & RITA  
2630 POWELL AVE  
ANN ARBOR, MI 48104

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$250.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

46-5291753

2. Committee Name

MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

5/7/14

Name & Address:

THOMAS LAURITA  
14 EASTBURY CT.  
ANN ARBOR MI 48105-1403

\$ 200.00

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation V.P. Human Resources

Employer University of Michigan

Click Here for Memo Itemization

Business Address

ANN ARBOR, MI

Type of Contribution:

☒ Direct

☐

Loan from a person

☒

Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

5/7/14

Name & Address

WOODBURY, DAVID & MARGARET  
1215 ARBORDALE DR.  
ANN ARBOR MI 48103-4509

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐

Loan from a person

☒

Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

5/13/2014

Name & Address:

MERRITT, BRITTANY  
1870 BRIARIDGE DR.  
ANN ARBOR MI 48108

\$ 25.00

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐

Loan from a person

☐

Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

5/13/2014

Name & Address

MCCREIN, ROBIN  
27280 GOLDENGATE DR. W.  
LATHROP VILLAGE MI 48076

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐

Loan from a person

☐

Fund Raiser

Page Subtotal

4325.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

46-5291753

2. Committee Name

MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

5/19/2014

Name & Address:

MARTIN, LEE & NOVA  
3425 SUSSEX CT.  
ANN ARBOR, MI 48108

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

5/19/2014

Name & Address:

FLOWERS, JENNIE C. / INS. AGENCY, INC.  
8321 COOLEY LAKE ROAD  
COMMERCE TOWNSHIP, MI 48382

\$ 25.00

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

5/28/2014

Name & Address:

JONES CAPERS, HALLE  
1458 ASTOR AVE.  
ANN ARBOR, MI 48105

\$ 25.00

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

5/28/2014

Name & Address:

GIPSON, MARY A.W.  
800 WATERMAN ST.  
ANN ARBOR, MI 48105

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

Page Subtotal

\$ 200.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-529/753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 5/31/2014

Name & Address:

POWELL LLOYD E.  
P.O. Box 7722  
ANN ARBOR MI 48107-7722

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation ATTORNEY Employer SELF-EMPLOYED

[Click Here for Memo Itemization](#)

Business Address

445 ILANTI, MI

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 5/31/2014

Name & Address:

CALDWELL, CLEOPATRA  
305 BURR OAK DRIVE  
ANN ARBOR MI 48103

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation PROF. School of Soc. Work. Employer UNIVERSITY OF MICHIGAN

[Click Here for Memo Itemization](#)

Business Address ANN ARBOR

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 5/31/2014

Name & Address:

COLE-BROWN, CAROLYN  
4904 HICKORY POINTE BLVD.  
VASILANTI, MI 48197

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 5/31/2014

Name & Address:

EADDY-RICHARDSON, DENISE  
5961 COTTONWOOD DRIVE  
VASILANTI, MI 48197

\$ 25.00 \$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$375.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 6/3/2014

Name & Address:

WEIKLER, ANDREW & LUTIA  
1706 S. UNIVERSITY AVE.  
ANN ARBOR MI 48104

\$ 40.00 \$ 40.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6/3/2014

Name & Address:

LASSITER, MAGGIE  
1616 FLUMER ST.  
ANN ARBOR MI 48103-2453

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 6/16/2014

Name & Address:

LYMAN TRUST, FRANCES L.  
1134 MEADOWBROOK C.E.  
ANN ARBOR, MI 48103-5336

\$ 40.00 \$ 40.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 6/23/2014

Name & Address:

LOWE, SHIRLEY M.  
2868 DAYTON DR.  
ANN ARBOR, MI 48108

\$ 25.00 \$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$155.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 07/23/2014

Name & Address:

HOWLEY, BEVERLY & JOHN  
635 SWIFT ST.  
ANN ARBOR, MI 48105

\$ 40.00 \$ 40.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 7/23/2014

Name & Address:

JOHNSON, CHEMMIE L.  
2854 MARSHALL ST.  
ANN ARBOR MI 48108-1829

\$ 25.00 \$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 7/23/2014

Name & Address:

WESLEY, JAMES & OLLIE  
330 BARBER AVE  
ANN ARBOR, MI 48103-2720

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 7/23/2014

Name & Address:

WILLIAMS, DORIS M.  
1661 WEATHERSTONE DR.  
ANN ARBOR MI 48108

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$265.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt 7/23/14

Name & Address:

PAD BETT, TANYA & WILLIAM  
3773 MAPLE DR  
VPSILANTI, MI 48197-8623

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 7/29/2014

Name & Address:

MOYER, DAVID  
1319 CULVER ROAD  
ANN ARBOR, MI 48103

\$ 150.00 \$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt 8/20/2014

Name & Address:

WILLIAMS, RUTH  
41591 GLADE RD  
CANTON MI 48187-3779

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt 8/23/2014

Name & Address:

HARRIS, WILL & LINDA  
2861 EISENHOWER  
ANN ARBOR MI 48108

\$ 75.00 \$ 75.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

9375.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

46-5291753

2. Committee Name

MANLEY For School Board

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.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

8/27/2014

Name & Address:

BELL, Joanne  
1412 CAMBRIDGE Rd.  
ANN ARBOR, MI 48104

\$ 20.00

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

8/27/2014

Name & Address:

CEDERQUIST, JOHN N  
2146 ARDENNE DR.  
ANN ARBOR, MI 48106-1477

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

8/27/2014

Name & Address:

FELTEAU ANNA M  
127 PONDS VIEW DR.  
ANN ARBOR, MI 48103

\$ 25.00

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

8/27/2014

Name & Address:

MAGEE DALE  
621 SUNSET  
ANN ARBOR, MI 48103

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

7146

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 9/6/2014

Name & Address:

SAHSONER, SUSAN  
2531 JACKSON AVE #188  
ANN ARBOR, MI 48103

\$ 200.00 \$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation EARLIER GIRLS Employer GIRLS GROUP

[Click Here for Memo Itemization](#)

Business Address 2531 GROOP JACKSON AVE #188

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9/6/2014

Name & Address:

SUBOTIC, NIKOLA & ANNE  
1760 TRAVEL RD  
ANN ARBOR, MI 48105

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 9/6/2014

Name & Address:

CHADHA, JONATHAN, DDS  
2800 GOLFSIDE RD. STE #5  
ANN ARBOR, MI 48108

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation DENTIST Employer SELF-EMPLOYED

[Click Here for Memo Itemization](#)

Business Address 2900 GOLFSIDE, STE #5 ANN ARBOR, MI 48108

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 9/6/2014

Name & Address:

SCOTT, ROBERT & FAIRY CESENA HAYES  
2910 E. EISENHOWER PKY  
ANN ARBOR, MI 48108-3222

\$ 150.00 \$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$ 500.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

9/13/2014

Name & Address:

LIGHTFOOT, SIMONE  
2733 ARROWOOD  
ANN ARBOR, MI 48106

\$100.00

\$100.00

5. If over \$100.00 cumulative, please provide:

Occupation

Regional Rep.

Employer

NAACP - LANSING

[Click Here for Memo Itemization](#)

Business Address

SPINE ST LANSING

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

9/13/2014

Name & Address:

WADE, KAY D.  
2120 FULMER CT.  
ANN ARBOR

\$100.00

\$100.00

5. If over \$100.00 cumulative, please provide:

Occupation

TEACHER

Employer

ANN ARBOR Public Schools

[Click Here for Memo Itemization](#)

Business Address

SKYLINE H.S.

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

9/12/2014

Name & Address:

BURROUGHS, T.E.  
2133 CAROL DR.  
ANN ARBOR, MI 48103

\$25.00

\$25.00

5. If over \$100.00 cumulative, please provide:

Occupation

RETIRED

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

Name & Address

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☐ Fund Raiser

Page Subtotal

9225

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

9/19/2014

Name & Address:

TANDY, GWENDOLYN F.  
13700 WESTBROOK ROAD  
PLYMOUTH, MI 48170-2445

\$ 75.00

\$ 75.00

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

9/21/2014

Name & Address:

JONES MAURICE D.  
1052 WESTVIEW WAY  
ANN ARBOR, MI 48103

\$ 250.00

\$ 250.00

5. If over \$100.00 cumulative, please provide:

Occupation

Physician

Employer

St. Joseph Hospital

Click Here for Memo Itemization

Business Address

Ann Arbor, MI

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

9/21/2014

Name & Address:

WOODEN, DAVID B.  
2914 WHISPERING WOODS DR.  
ANN ARBOR, MI 48103

\$ 300.00

\$ 250.00

5. If over \$100.00 cumulative, please provide:

Occupation

Prof - Ross Bus. Sch.

Employer

UNIVERSITY OF MICHIGAN

Click Here for Memo Itemization

Business Address

Ann Arbor, MI Ross School of Business

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

9/21/2014

Name & Address:

ROGERS, TONI & BENJAMIN  
3125 WESTLOCH DR.  
SUPERIOR TWP. MI 48198-9655

\$ 200.00

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation

RESTAURANT OWNER

Employer

SELF-EMPLOYED

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

\$ 725.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

46-5291753

2. Committee Name

MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

9/21/2014

Name & Address:

WOODBURN, DAVID H. & MARGARET C.  
1915 ARBORDALE ST.  
ANN ARBOR, MI 48103

\$ 58.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation

RETIRED

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution: ☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

9/21/2014

Name & Address:

LOCKHART, ISAAC F.  
3150 ANDORA DR.  
SUPERIOR TWP, MI 48198

\$ 500.00 \$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation

CONSULTANT

Employer

SELF-EMPLOYED

Click Here for Memo Itemization

Business Address

Type of Contribution: ☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

9/21/2014

Name & Address:

MCDONALD, FREDERICK TAWNIA  
1717 JORDALE LN.  
ANN ARBOR, MI 48108

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation

EXC. V.P.

Employer

TRINITY HEALTH SYSTEM

Click Here for Memo Itemization

Business Address

Type of Contribution: ☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

9/21/2014

Name & Address:

HARGROVE-KING, LINDA  
4370 WESTPARK CT.  
ANN ARBOR, MI 48108

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation

ADMINISTRATOR

Employer

WASHTENAW COMMUNITY COLLEGE

Click Here for Memo Itemization

Business Address

Type of Contribution: ☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

\$ 750.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/21/2014</u>	
Name & Address: <u>WOODBURY, DAVID H. &amp; MARGARET C.</u> <u>1915 ARBORDALE ST.</u> <u>ANN ARBOR, MI 48103</u>		<u>\$ 50.00</u>	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/21/2014</u>	
Name & Address: <u>LOCKHART, ISAAC F.</u> <u>3150 ANDORA DR.</u> <u>SUPERIOR TWP, MI 48198</u>		<u>\$ 500.00</u>	<u>\$ 500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>SELF-EMPLOYED</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/21/2014</u>	
Name & Address: <u>MCDONALD, FREDERICK TAUHA</u> <u>1717 FORDALE LN.</u> <u>ANN ARBOR, MI 48108</u>		<u>\$ 100.00</u>	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXEC. V.P.</u> Employer <u>TRINITY HEALTH SYSTEM</u>		Click Here for Memo Itemization	
Business Address <u>LIVONIA, MICHIGAN</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/21/2014</u>	
Name & Address: <u>HARGROVE-KING, LINDA</u> <u>4370 WESTPARK CT.</u> <u>ANN ARBOR, MI 48108</u>		<u>\$ 100.00</u>	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR</u> Employer <u>WASHTENAW COMMUNITY COLLEGE</u>		Click Here for Memo Itemization	
Business Address <u>4800 E HURON RIVER DR., YPSILANTI, MI 48197</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$ 750.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753

2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt 9/21/2014

Name & Address:

THOMPSON, LEVI & MARIA  
3105 WESTLARK CIRCLE  
SUPERIOR TWP. MI 48198

\$ 600.00 \$ 600.00

5. If over \$100.00 cumulative, please provide:

Occupation PROF-Engineering Employer UNIVERSITY of Michigan

[Click Here for Memo Itemization](#)

Business Address ANN ARBOR

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 10/1/2014

Name & Address:

MCDONALD, BETTYE W.  
2657 SALISBURY LN.  
ANN ARBOR, MI 48103

\$ 30.00 \$ 30.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt 10/1/2014

Name & Address:

ANDREWS, ARNIE  
2125 NEEDHAM RD.  
ANN ARBOR, MI 48104-4905

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt 10/1/2014

Name & Address:

ANDREWS, CHARLOTTE K.  
2125 NEEDHAM RD.  
ANN ARBOR, MI 48104

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

820.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt

10/7/2014

Name & Address:

FINN, JOHN & JOAN  
431 RYAN RD.  
ANN ARBOR, MI 48103

\$ 100.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation

RETIRED/TEACHER Employer WASHTENAW COMM. College

[Click Here for Memo Itemization](#)

Business Address

4800 Huron River Dr.

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

10/7/2014

Name & Address:

CARTER, STEFANI, LD. PC.  
4007 CARPENTER RD #124  
PSILANTI, MI 48197

\$ 100.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation

ATTORNEY Employer SELF-EMPLOYED

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

10/07/14

Name & Address:

CHAMBERS, ALICE M. & AL  
2421 POWELL AVE.  
ANN ARBOR, MI 48104

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

10/07/14

Name & Address:

HOFFMAN, DEBRA B.  
1335 NOTTINGHAM Ct.  
ANN ARBOR, MI 48103

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

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)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

46-5291753

2. Committee Name

MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt?

☒ YES

4. Date of Receipt

10/07/14

Name & Address:

GULARY, MAYURACHAT ERDOGAN  
3886 PEMBERTON DRIVE  
ANN ARBOR, MI 48105

\$ 40.00

\$ 40.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

10/7/14

Name & Address:

LADLEY, JAMES G. CAROL A.  
3032 ANDORA DR.  
SUPERIOR TWP. MI 48198-9649

\$ 20.00

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt?

☐ YES

4. Date of Receipt

10/7/14

Name & Address:

WASHINGTON, DARRELL MONIQUE  
2810 EMBER WAY  
ANN ARBOR, MI 48104

\$ 20.00

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #4

PAC Receipt?

☐ YES

4. Date of Receipt

10/15/2014

Name & Address:

BOOKER, DEMARIS  
895 ADDINGTON LANE  
ANN ARBOR, MI 48108

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation

RETIRED

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

Page Subtotal

\$ 230.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

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.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 10/15/2014

Name & Address:

MULLICE, SHERI  
2113 VILLAGE CIRCLE  
ANN ARBOR, MI 48108

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation PROFESSIONAL

Employer Social Security Admin

[Click Here for Memo Itemization](#)

Business Address 3971 S. Research PK, ANN ARBOR

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 10/15/2014

Name & Address:

ROBINSON BARBARA A  
2712 HOLYOKE  
ANN ARBOR, MI 48108

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED

Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 10/15/2014

Name & Address:

HUGLE JARRED E. DIANA  
911 HILLSIDE DR.  
LONG BEACH CA 90815

\$ 500.00

\$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation MANAGER

Employer MARS INC.

[Click Here for Memo Itemization](#)

Business Address RANCHO DOMINIQUEZ, CA

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt \_\_\_\_\_

Name & Address

\$ \_\_\_\_\_

\$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$ 700.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

\$ 10,925.00

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number

46-5291753

2. Committee Name

MANLEY FOR SCHOOL BOARD

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? ☐ Yes

Name & Address:

McFERRIN CAROL  
3123 POTOMAC CT.  
ANN ARBOR, MI 48108

If over \$100.00 cumulative, please provide:

Occupation:

RETIRED

Employer Name & Business Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description: RENTAL OF P.O. BOX

5. Date Of Receipt: 3/20/2014

6. Vendor Name & Address:

ANN ARBOR MI POST OFFICE  
STADIUM BLVD.  
ANN ARBOR, MI 48103

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #2 PAC Receipt? ☐ Yes

Name & Address:

McFERRIN CAROL  
3123 POTOMAC CT.  
ANN ARBOR, MI 48108

If over \$100.00 cumulative, please provide:

Occupation:

RETIRED

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description: PURCHASE OF MAILING LABELS

5. Date Of Receipt: 4/01/2014

6. Vendor Name & Address:

OFFICE MAX  
3765 WASTENAW AVE.  
ANN ARBOR, MI 48104

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

BERRY PATRICIA  
1081 GREEN ROAD  
ANN ARBOR, MI 48105

If over \$100.00 cumulative, please provide:

Occupation:

RETIRED

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description: PURCHASE OF 2345 6 3/4" ENVELOPES

5. Date Of Receipt: 4/26/2014

6. Vendor Name & Address:

STAPLES  
3120 CARPENTER RD.  
YPSILANTI, MI 48197

Click Here for Memo Itemization

☒ Fund Raiser Contribution

Page Subtotal

\$ 83.64 \$ 339.64

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

Enter this total  
on line 6 of Summary  
Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number

46-5291753

2. Committee Name

MANLEY FOR SCHOOL BOARD

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? ☐ Yes

Name & Address:

McFERRIN CAROL  
3123 POTOMAC CT  
ANN ARBOR MI 48108

If over \$100.00 cumulative, please provide:  
Occupation:

RETIRED

Employer Name & Business Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description PURCHASE OF POSTAGE STAMPS

5. Date Of Receipt: 6/05/2014

6. Vendor Name & Address:

ANN ARBOR POST OFFICE  
STADIUM BLVD.  
ANN ARBOR, MI 48103

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #2 PAC Receipt? ☒ Yes

Name & Address:

MICHIGAN DEMOCRATIC  
STATE CENTRAL COMMITTEE  
606 TOWNSEND  
LANSING, MI 48933

If over \$100.00 cumulative, please provide:  
Occupation:

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☒ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description VOTER FILE ACCESS

5. Date Of Receipt: 10/01/2014

6. Vendor Name & Address:

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

McFERRIN CAROL  
3123 POTOMAC CT  
ANN ARBOR MI 48108

If over \$100.00 cumulative, please provide:

Occupation:

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description PURCHASE OF POSTAGE STAMPS

5. Date Of Receipt: 10/16/2014

6. Vendor Name & Address:

ANN ARBOR POST OFFICE  
STADIUM BLVD.  
ANN ARBOR, MI 48103

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Page Subtotal

\$ 534.30 1,039.68

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

\$ 617.94

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>TCF NATIONAL BANK</u> Address <u>P.O. Box 537980</u> <u>Livonia, MI 48153</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PURCHASE OF CHECKS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/04/14</u> Date	<u>\$ 21.95</u>
<b>Expenditure #2</b> Name <u>UNITED SONZ. INC.</u> Address <u>105 W. Michigan Ave.</u> <u>Ypsilanti, MI 48197</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING COSTS FOR BROCHURES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/05/14</u> Date	<u>\$ 424.00</u>
<b>Expenditure #3</b> Name <u>TCF NATIONAL BANK</u> Address <u>P.O. Box 537980</u> <u>Livonia, MI 48153</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>SERVICE CHARGE FOR OVERDRAFT</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/10/14</u> Date	<u>\$ 37.00</u>
<b>Expenditure #4</b> Name <u>WASTENAW COMMUNITY COLLEGE</u> Address <u>Morris Lawrence Bldg.</u> <u>4800 E. Huron River Drive</u> <u>Ann Arbor, MI 48105-4800</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>DEPOSIT FOR FUNDRAISER</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/14/14</u> Date	<u>\$ 250.00</u>
<b>Expenditure #5</b> Name <u>TCF NATIONAL BANK</u> Address <u>P.O. Box 537980</u> <u>Livonia, MI 48153</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>RETURN FEE FOR OVERDRAFT</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/18/14</u> Date	<u>\$ 25.00</u>

Subtotal this page \$ 757.95

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>WASHTENAW COMMUNITY COLLEGE</u></p> <p>Address Morris Lawrence Bldg. 4800 E. Huron River Drive Ann Arbor, MI 48105-4800</p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>FUNDRAISER</u> <u>CATERING &amp; RM</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>5/5/14</u> Date</p>	<p>\$ <u>655.24</u></p>
<p>Expenditure #2</p> <p>Name <u>UNITED SONZ. INC.</u></p> <p>Address 105 W. Michigan Ave. Ypsilanti, MI 48197</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>STATIONARY LETTERHEAD</u> <u>ENVELOPES &amp; BUSINESS CARDS</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>5/5/14</u> Date</p>	<p>\$ <u>627.52</u></p>
<p>Expenditure #3</p> <p>Name <u>UNITED SONZ. INC.</u></p> <p>Address 105 W. Michigan Ave. Ypsilanti, MI 48197</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>PRINTING OF</u> <u>CAMPAIGN CARDS</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>6/4/14</u> Date</p>	<p>\$ <u>302.10</u></p>
<p>Expenditure #4</p> <p>Name <u>ANN ARBOR BRANCH OF NAACP</u></p> <p>Address <u>P.O. BOX 3399</u> <u>ANN ARBOR, MI 48106</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>PARTICIPATION IN</u> <u>SIXTEENTH Celebration - Fee</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>6/5/14</u> Date</p>	<p>\$ <u>25.00</u></p>
<p>Expenditure #5</p> <p>Name <u>ANN ARBOR JAYCEES</u></p> <p>Address <u>P.O. BOX 1866</u> <u>ANN ARBOR, MI 48106-1866</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>4th of July Parade</u> <u>PARTICIPATION FEE</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>6/25/14</u> Date</p>	<p>\$ <u>50.00</u></p>

Subtotal this page \$1,659.86

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>UNITED SONZ. INC.</u> Address 105 W. Michigan Ave. Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN BUTTONS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/3/14</u> Date	\$ <u>316.94</u>
Expenditure #2 Name <u>UNITED SONZ. INC.</u> Address 105 W. Michigan Ave. Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>MAILER &amp; YARD SIGNS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/14</u> Date	\$ <u>4315.40</u>
Expenditure #3 Name <u>UNITED SONZ INC.</u> Address 105 W. Michigan Ave. Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN BROCHURES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/8/14</u> Date	\$ <u>338.90</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 \$ 4,966.24

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) \$ 7,384.05

Enter this total  
on line 8a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>APRIL 27, 2014</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>48</u>	5. Type of Fund Raising Activity <u>INTRODUCE CANDIDATE TO COMMUNITY</u>	6. Address and Name (If any) of the place where the activity was held. <u>WASHTENAW COMMUNITY COLLEGE 4800 E HURON RIVER DR ANN ARBOR MI 48105</u> <input type="checkbox"/> Private Residence
---	---	---	--

7. Total Contributions \$2,160.00  
8. Other Receipts - 0 -  
9. Gross Receipts (Add lines 7 and 8) 2,160.00  
10. Total Cost of Event 1,329.00  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-K), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>AUG 24, 2014</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>7</u>	5. Type of Fund Raising Activity <u>MEET &amp; GREET</u>	6. Address and Name (If any) of the place where the activity was held. <input checked="" type="checkbox"/> Private Residence
---	--	---	--

7. Total Contributions \$240.00

8. Other Receipts - 0 -

9. Gross Receipts (Add lines 7 and 8) 240.00

10. Total Cost of Event - 0 -  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46-5291753  
2. Committee Name MANLEY FOR SCHOOL BOARD

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>SEPTEMBER 21, 2014</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>16</u>	5. Type of Fund Raising Activity <u>MEET &amp; GREET</u>	6. Address and Name (If any) of the place where the activity was held. <input checked="" type="checkbox"/> Private Residence
---	---	---	--

7. Total Contributions \$2,060

8. Other Receipts - 0 -

9. Gross Receipts (Add lines 7 and 8) \$2,060

10. Total Cost of Event  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)  
- 0 -

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.