

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

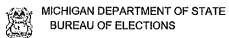
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	d signed by andidate.	3. This Statement covers From	^{n:} 10/22/20 to	11/26/20	
1. Committee I.D. Number		4. Candidate Last Name	First Name	9	M.I.
46-5291753		Manley	Patricia		A.
		4a. Office Sought Including Di	strict # or Community Serve	ed (If applicable)	
2. Committee Name		Trustee of AAPS Scho	ol Board		S.
Manley For School Boa	ard	4b. County of Residence WA	SHTENAW 🔽		
5. Committee's Mailing Address Manley For School Board PO Box 131158 Ann Arbor, MI Area Code and Phone (734) 395-8235 If the address in this box is different from the comm mailing address on the Statement of Organization, to be sent to this address by the filing official.		6. Treasurer's Name & Reside Patricia A. Berry 1081 Green Road Ann Arbor, MI 4810 Area Code & Phone (734) 6	5	JAMBERGERING de 230 NW	WASHTENAW C
7. Treasurer's Business Address None - Retired		8. Designated Record Keeper Designated Record Keeper) None		177	
Area Code and Phone	<u>.</u>	Area Code and Phone			_
9. TYPE OF STATEMENT			9e. Dissolution of Cand	lidate Committe	ie
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to: Primary General	Required ON is not on the current year: July Quart	erly	By checking this item by the committee to the committee and forgive the committee. The commowes no lates fees or has Further, if the dissolution of considered a request for the	andidate or his or en, and no longer nittee has no ous any oustanding o	r her spouse is her r collectible from standing assets, debt.
Convention Special School		I Statement () Coverage Year dment to Campaign Statement	Effective date of	. 0	1701.
Caucus Caucus	Comp	plete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The disposition of re Schedule 1B and the Sum		st be reported on
Date of Election, Convention or Caucus 11/06/18					
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a	nce was used i	in the preparation of this stateme	ent and attached schedules	(if any) and to th	ne best of
Current Treasurer or Designated Record keeper Type or Print Name		T Affects Signature	Muy	12/06/	2018
Candidate Patricia Ashford Manle Type or Print Name	у	1 Patricia d.	Manley Date	12/06/	/2018
Type or Print Name		Signature	· //	· · · · · · · · · · · · · · · · · · ·	

1. Committee I.D. Number 46-5291753

SUMMARY PAGE **CANDIDATE COMMITTEE**

2. Committee Name Manley For School Board

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column If
3. Contributions		Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 1,975.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$1,975.00	(18.) \$ \$1,975.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$1,975.00	(20.) \$ \$1,975.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		·
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$2,786.19	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$2,786.19	(23.) \$ \$2,786.19
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	#0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$ \phi \text{0.00} \	(24.) \$ \$0.00
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$0.00	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) 	### BALANCE STATEMENT (13.) \$ \$2,117.86 (14.) + \$ \$1,975.00 (15.) = \$ \$4,092.86 (16.) - \$ \$2,786.19 (17.) \$ \$1,306.67 **	



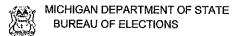
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 46-5291753

Page.

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 <u>all</u> 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 10/22/18 Name & Address:		
Kern, James A. 8452 New Haven Way		
Canton, MI 48187	_{\$} 100.00	_s 100.00
5. If over \$100.00 cumulative, please provide:	*	<u> </u>
Occupation Retired Employer	Click Here fo	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/22/18 Name & Address		
Holdaway-Hayes, Susan	00.00	
2605 Powell Ave. Ann Arbor, MI 48104-6469	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/22/18 Name & Address:		
Sipp, Gregory	400.00	
3520 Barryknoll Drive	_{\$} 100.00	_{\$} 100.00
Ann Arbor, MI 48108		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Artist Employer Self-Employed		
Business Address 3520 Barryknoll Dr., Ann Arbor, MI 48108		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/22/18 Name & Address		
Johnson, Joanna		
4520 Blossom Hill Trail	_{\$} 20.00	, 20.00
Ann Arbor, MI 48108	•	\$
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	\$240.00	· · · · · · · · · · · · · · · · · · ·
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	
Page of	line 3a of Summary Page.	



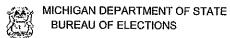
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number 46-5291753

CANDIDATE COMMITTEE

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 <u>all</u> 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 10/24/18 Name & Address: McDonald, Bettye 2657 Salisbury LN	00.00		
Ann Arbor, MI 48103	_{\$} 20.00	_{\$} 20.00	
5. If over \$100.00 cumulative, please provide:	Click Hara f	or Memo Itemization	
Occupation Employer	Click Here i	or werno itemization	
Business Address			
Type of Contribution: Direct Loan from a person Fund Raiser			
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/24/18 Name & Address			
Eisley, Karen 151 S. Dancer Dexter, MI 48130	\$80.00	\$80.00	
5. If over \$100.00 cumulative, please provide:	Click Here fo	or 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 10/24/18 Name & Address:		łu. <u>""", ", " " " " " " " " " " " " " " " " </u>	
Hill, Marysa 2493 Georgetown Blvd. Ann Arbor, MI 48105	\$20.00	_{\$} 20.00	
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization	
Occupation Employer			
Business Address			
Type of Contribution:			
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/24/18 Name & Address Jordan, Elaine 2181 Hemlock Dr. Ann Arbor, MI 48108	_{\$} 20.00	. 95.00	
5. If over \$100.00 cumulative, please provide:		Ψ	
Occupation Employer	Click Here for	Memo Itemization	
Business Address Type of Contribution:			
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 2 of 3	\$140.00 Enter this total on line 3a of Summary Page.		



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number _____46-5291753

CANDIDATE COMMITTEE

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 10/24/18 Name & Address: Willis, Beverly		T date of rescript?
3098 Chelsea Circle	00.00	00.00
Ann Arbor, MI 48108	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:	O" 1 11 6	
Occupation Employer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/24/18 Name & Address		
United Sonz		
105 W. Michigan Ave.	_s 1,500.00	_s 1,500.00
Ann Arbor, MĬ 48197	\$	\$ 1,000.00
5. If over \$100.00 cumulative, please provide:	Memo Itemiza	ation Below
Occupation Employer		
Business Address United Sonz - Printer		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/24/18 Name & Address:		
Memo Itemization United Sonz 105 W. Michigan Ave. Ann Arbor, MI 48197	_{\$} (1,500.00)	_{\$} (1,500.00)
Reimbursement for cancelled printing and mailing	Oliale I I Free	5.4 16 1 13
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address United Sonz - Printer		
Type of Contribution: Direct Loan from a person Fund Raiser	1	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/21/18 Name & Address		
Emmendorfer, Joann		
516 Gott St.	75.00,	, 75.00
Ann Arbor, MI 48102-3144	\$10.00	\$_70.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	Ollow Field for	Weno temzaton
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,595.00	
Grand Total of All Schedules 1A	\$1,975.00	
(Complete on last page of Schedule)	Enter this total on	

Page 3 of 3

line 3a 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	speed (todallod lillottiation)	J. Date	6. Amount
Name University Lithoprinters		10/24/18	
	Printing & Mailing Comission		\$ <u>1,674.74</u>
Address 4150 Varsity Drive	Purpose: Printing & Mailing Services	Date	
Ann Arbor, MI 48108	Click	(Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	of	
Expenditure #2			·
Name United Sonz		11/02/18	· #E00.00
Address	Purpose: Purchase of Yard Signs	Date	\$ <u>\$530.00</u>
105 W. Michigan Ave.		· Liona fou \$8	Non-to-the T
Ypsilanti, MI 48197			Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f	
Expenditure #3			
Name Patricia Ashford Manley		11/06/18	\$466.88
Address	Purpose: RoboCall, Postage, Champagne	Date	\$ <u>400.00</u>
2645 Powell	Maria	Marieria Del	
Ann Arbor, MI 48104	Check box if this expenditure is payment of debt or obligation reported on previous	temization Bek	ow 🔄
Expenditure #4	statement		
Name Memo Itemization		44100140	
Address RoboCall Time Purchase - \$283	Purpose: RoboCall, Postage, Champagne	11/06/18 Date	\$ (466.88)
Postage - \$150 Champagne - Election Day Celebration - \$33.88	Click H	tere for Memo It	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Norma McCuiston		11/06/18	
Address	Purpose: Reinbursement for Food Purchase	Date	\$ <u>114.57</u>
3975 Ridgmaar Square Ann Arbor, MI 48105	Memo	Itemization Belo	w 🕎
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	\$2,786.19
	Grand Total of all S (Complete on last page	Schedules 1B	
	(· L.	Enter this total

on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 46-5291753

Manual San Call And San Call An

CANDIDATE COMMITTEE 2	IDIDATE COMMITTEE 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 Memo Itemization		11/06/18	\$ (114.57)	
Address Norma McCuiston	Purpose: Election Day Celebration	Date		
Marco's Pizza - \$43.91 Kroger - \$23.38 Happy's Pizza - \$26.78	Click	Here for Mem	o Itemization Type	
Busch's -\$20.50	Check box if this expenditure is payment of			
Fund Raiser	debt or obligation reported on previous statement			
Expenditure #2				
Name				
		Date	\$	
Address	Purpose:			
	Click	Here for Memo	Itemization Type	
	Check box if this expenditure is payment of			
Fund Raiser	debt or obligation reported on previous statement			
Expenditure #3			· · · · · · · · · · · · · · · · · · ·	
Name				
Address		Date	\$	
Address	Purpose:	Duto		
	Click F	lere for Memo	Itemization Type	
	Check box if this expenditure is payment of			
Fund Raiser	debt or obligation reported on previous statement			
Expenditure #4				
Name				
Address		Date	\$	
	Purpose:		•	
	Click H	ere for Memo	itemization Type	
	Check box if this expenditure is payment of			
Fund Raiser	debt or obligation reported on previous statement			
Expenditure #5				
Name				
Address		Date	\$	
,	Purpose:	Date		
	1 1	ere for Memo	Itemization Type	
¬	Check box if this expenditure is payment of debt or obligation reported on previous			
Fund Raiser	statement			
	Subtot	al this page	\$0.00	

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

\$2,786.19

Enter this total on line 8a of Summary Page