

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION F	' comment of the comm
1. Committee ID #: C-Z009-077	10. REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election
2. Type of Filing:	and checks this box, the filing requirement of pre, post and annual
riginal	campaign statements is waived. The Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold.
Amendment to Items: Eff. Date:	11. Name and Address of Depositories or Intended Depositories
3. Full Name of Committee (must include Candidate's first	of committee funds. (Michigan Bank, Credit Union or Savings & Loar Association)
and last name): Vote 1/ LuAnne Bullington	
4a. Candidate Full Name (Last, First, M.I.):	TOV D 12
Bullington, Lu Anne	1CT Bank 2
4b. Political Party (if applicable): Democratic	Liberty/Division =
4c. County of Residence:	Liberty/Division Ann Arbor, MI
4c. County of Residence: Washtenaw 4d. Office Sought (Check one):	b. Secondary Depository
Governor Lt. Governor State Senator	
State Rep. Sec. of State Attorney Gen. State Bd. of Ed. UofM Reg. MSU Trustee	12. This item applies only to Gubernatorial Candidate
WSU Gov. Supreme Court Appeals Court	Committees: Check if this committee intends to seek qualifying
Circuit Court District Court Probate Court	contributions or make qualifying expenditures.
Municipal Court County Commissioner	13. ELECTRONIC FILING: This item applies to committees that file with the Michigan Department of State Bureau of Elections only and does not
4e. District/Circuit # or Jurisdiction: #//	apply to Candidate Committees that file with the County Clerk's office
5. Date Committee was Formed: $\frac{9/23/69}{366-66646}$	The Campaign Finance Act requires any committee that files with the Secretary of State and spends or receives \$20,000 in the preceding calendar
6a. Committee Phone #: 734-769-0949	year OR expects to spend or receive \$20,000 in the current calendar year to
6b. Committee Fax #:/V//-	file campaign statements electronically. MERTS Plus software is provided to you free of charge to assist you in meeting this requirement.
6c. Committee E-mail Address: /ugnneb@ccmcust.net	
6d. Committee Website Address:	Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.
7a. Complete Comm. Mailing Address (May be PO Box):	** OR **
	Committee did not spend or receive or does not expect to spend
Same	or receive in excess of \$20,000 and would like to file electronically voluntarily.
7b. Complete Comm. Street Address (May not be PO Box):	14. Verification: I/We certify that all reasonable diligence was used
1801 South Blud.	in the preparation of the above statement and that the contents are
Ann Arber, MI 48/04	true, accurate and complete to the best of my/our knowledge or belief. If filing electronically, we further agree that the signatures
	below shall serve as the signatures that verify the accuracy and
8. Treasurer Name and Complete Address:	completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the
Masser States Lu Aone Bullington Same Address	preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and
Same Haures	complete to the best of my/our knowledge or belief. (Sign Name
Phone # Same	and Date)
Thome #:	Sulme Bulling 7 923-09
E-mail Address: Saml	Candidate
Designated Record Keeper Name and Complete Address:	
	Connect Transport
I X	Current Treasurer
Phone #:	
E-mail Address:	Designated Record Keeper (Required only if filing electronically)
CFR101 CAN SO.doc REV 10/07: Authority granted under Act 388 of 1976, as	amended