

## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

## ORIGINAL OR AMENDED

## STATEMENT OF ORGANIZATION FORM FOR CANDIDATE COMMITTEES

| 3. Full Name of Committee (must include Candidate's first and last name): COMMITTEE TO ELECT SUMANGALA KALLASAPTHY 4a. Candidate Full Name (Last, First, M.I.): KALLASAPATHY, SUMANGALA 4b. Political Party (if applicable): DEMOCRATIC 4c. County of Residence: WASHTENAW 4d. Office Sought (Check one):  Governor State Rep. State Bd. of Ed. Upfil Reg. WSU Trustee WSU Gov. Circuit Court Municipal Court Local or other pleases specify, ANN ARBOR CITY COUNCIL 4e. District/Circuit # or Jurisdiction:  5. Date Committee was Formed: 6a. Committee Phone #: (734) 769-5698  4b. Committee Fax #; 6c. Committee Fax #; 6c. Committee Fax Malla Address: 7a. Complete Comm. Mailing Address (May not be PO Box): 2530 MALLARD CT ANN ARBOR, MI 48105  7b. Complete Comm. Street Address: ALPA PARIKH ALPA PAR         | 1. Committee ID #: C - 2010 - 0 1 2  2. Type of Filing:  ☑ Original   | 10. REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election and checks this box, the filing requirement of pre, post and annual campaign statements is waived. The Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold. |
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| 4a. Candidate Full Name (Last, First, M.I.):  KAILASAPATHY, SUMANGALA 4b. Political Party (if applicable): DEMOCRATIC 4c. County of Residence: WASHTENAW 4d. Office Sought (Check one):  Governor State Rep. Sec. of State WSU Gov. Supreme Count Appeals Count Corroll Count Minicipal Count Monicipal Count Monicipal Count Local or other please specify: ANN ARBOR CITY COUNCIL Monicipal Count Local or other please specify: ANN ARBOR CITY COUNCIL Monititee Fax #:  6c. Committee Fax #:  6d. Committee E-mail Address:  7a. Complete Comm. Mailing Address (May not be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May not be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  7c. Complete Comm. Street Address:  ALPA PARIKH ALPA PARIKH ALPA PARIKH ALPA PARIKH ALPA PARIKH ALPA PARIKH B-mail Address:  (734) 717-2314  E-mail Address:  GMALLARD COMPLET (Table May be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  A. Treasurer Name and Complete Address:  SUMANGALA KAILASAPATHY 2530 MALLARD COMPLET (Table May be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  A. Treasurer Name and Complete Address:  SUMANGALA KAILASAPATHY 2530 MALLARD COUNTANN ARBOR (May be PO Box):  2530 MALLARD COMPLET (May be PO Box):  2530 MALLARD COMPLET (May be PO Box):  2530 MALLARD COMPLET (May be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  A. Treasurer Name and Complete Address:  Committee State and spender or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically would receive in excess of \$20,000 and would like to file electronically would receive in excess of \$20,000 and would like to file electronically would receive in excess of \$20,000 and would like to file electronically would receive in excess of \$20,000 and would like to file electronically would receive in excess of \$20,000 and would like to file electronically would receive in excess of \$20,000 and would like to file electronically would receive in excess of \$20,000 and would like to file electronically would recei | T T T T T T T T T T T T T T T T T T T   | of committee funds. (Michigan Bank, Credit Union or Savings & Loan   |
| KAILASAPATHY, SUMANGALA 4b. Political Party (if applicable): DEMOCRATIC  4c. County of Residence: WASHTENAW  4d. Office Sought (Check one):    Governor  | '   | a. Official Depository   |
| Ab. Political Party (if applicable): DEMOCRATIC  4c. County of Residence: WASHTENAW  4d. Office Sought (Check one):  Governor  State Rep. Sec. of State Antorney Gen. State Bd. of Ed. WSU Gov. Supreme Court Municipal Court Municipal Court Local or other please specify. ANN ARBOR CITY COUNCIL Warth Local or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. ANN ARBOR CITY COUNCIL Countition or other please specify. Ann ARBOR CITY Countition or other burner that files with the Secretary of State and spends or receive that file with the County Clerk's office. Committee E-mail Address: Committee State file with the County Clerk's office. Committee spend or receive or expects to spend or receive in excess of \$20,000 and would like to file electronically. Committee spend or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically.  Committee spend or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically.        |   | COMERICA BANK, NA  |
| Governor   Lt. Governor   State Renator   State Renator   State Red.   Attorney Gen.   State Bd. of Ed.   WSU Gov.   Gupreme Court   Appeals Court   Probate Court   Probate Court   Municipal Court   District Court   Probate Court   Municipal Cour         | l '   | 101 NORTH MAIN   |
| Governor State Bd. of Ed. Usuff Reg. WSU Gov. Circuit Count Municipal Court Local or other please specify: ANN ARBOR CITY COUNCIL Local or other please specify: ANN ARBOR CITY COUNCIL Can Committee Was Formed:  6a. Committee Phone #: (734) 769-5698  6b. Committee E-mail Address: 6c. Committee E-mail Address: 6d. Committee Website Address: 7a. Complete Comm. Mailing Address (May be PO Box): 2530 MALLARD CT ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May nof be PO Box): 2530 MALLARD CT ANN ARBOR, MI 48105  7c. Complete Comm. Street Address: Circuit Committee Address: Circuit Committee Street Address: Circuit Count Committee Street Address: Circuit Count Committee Street Address: Circuit Count Committee Street Address: Committee Fax #: Committee Website Address: Circuit Count Committee Street Address: Circuit Count Committee Street Address: Circuit Count Committee Street Address: Circuit Count Committee Website Address: Circuit Count Committee Street Address: Circuit Count Committee Website Address: Circuit Count Committee Street Address: Committee Website Address: Circuit Count Committee Street Address: Committee Website Address: Circuit Count Committee Street Str         | TENIOCRATIC   | ANN ARBOR, MI 48104  |
| Governor State Bd. of Ed. Usuff Reg. WSU Gov. Circuit Count Municipal Court Local or other please specify: ANN ARBOR CITY COUNCIL Local or other please specify: ANN ARBOR CITY COUNCIL Can Committee Was Formed:  6a. Committee Phone #: (734) 769-5698  6b. Committee E-mail Address: 6c. Committee E-mail Address: 6d. Committee Website Address: 7a. Complete Comm. Mailing Address (May be PO Box): 2530 MALLARD CT ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May nof be PO Box): 2530 MALLARD CT ANN ARBOR, MI 48105  7c. Complete Comm. Street Address: Circuit Committee Address: Circuit Committee Street Address: Circuit Count Committee Street Address: Circuit Count Committee Street Address: Circuit Count Committee Street Address: Committee Fax #: Committee Website Address: Circuit Count Committee Street Address: Circuit Count Committee Street Address: Circuit Count Committee Street Address: Circuit Count Committee Website Address: Circuit Count Committee Street Address: Circuit Count Committee Website Address: Circuit Count Committee Street Address: Committee Website Address: Circuit Count Committee Street Address: Committee Website Address: Circuit Count Committee Street Str         | 4c. County of Residence: WASHTENAW  | h Secondary Denository   |
| Governor   Lt. Governor   State Renator   State Renator   State Red.   Attorney Gen.   State Bd. of Ed.   WSU Gov.   Gupreme Court   Appeals Court   Probate Court   Probate Court   Municipal Court   District Court   Probate Court   Municipal Cour         | 4d. Office Sought (Check one):  | b. decondary bepository  |
| 4e. District/Circuit # or Jurisdiction:  5. Date Committee was Formed: 03/08/10  6a. Committee Phone #: (734) 769-5698  6b. Committee Fax #:   | State Rep. Sec. of State Attorney Gen. State Bd. of Ed. UofM Reg. MSU Trustee WSU Gov. Supreme Court Appeals Court Circuit Court District Court Probate Court Municipal Court | 12. This item applies only to Gubernatorial Candidate Committees: Check if this committee intends to seek qualifying contributions or make qualifying expenditures.  13. ELECTRONIC FILING: This item applies to committees that file with   |
| 5. Date Committee was Formed: 03/08/10  6a. Committee Phone #: (734) 769-5698  6b. Committee Fax #:  | l Wara l  |  |
| 6a. Committee Phone #: (734) 769-5698  6b. Committee Fax #:  |   |  |
| 6c. Committee Fax #:  6c. Committee E-mail Address:  6d. Committee Website Address:  7a. Complete Comm. Mailing Address (May be PO Box):  2530 MALLARD CT  ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May not be PO Box):  2530 MALLARD CT  ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May not be PO Box):  2530 MALLARD CT  ANN ARBOR, MI 48105  14. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are 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 completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing electronically by the committee and that the contents of each statement filed electronically to the committee. I/We certify that all reasonable diligence will be used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing electronically by this committee and that the contents of each statement electronically to the committee. I/We certify that all reasonable diligence will be used in the preparation of heach statement electronically by this committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically by this committee. I/We certify that all reasonable diligence will be used in the preparation of heach statement electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically by this committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically by the committee. I/We certify          |   | Secretary of State and spends or receives \$20,000 in the preceding calendar year OR expects to spend or receive \$20,000 in the current calendar year to  |
| 6d. Committee Website Address:  7a. Complete Comm. Mailing Address (May be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May not be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May not be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  14. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are 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 completeness of each statement filed electronically filed by this committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement electronically filed by this committee accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)  Phone #: (734) 717-2314  E-mail Address: a psus@yahoo.com 9. Designated Record Keeper Name and Complete Address:  SUMANGALA KAILASAPATHY 2530 MALLARD COURT ANN ARBOR, MI 48105  Phone #: (734) 769-5698   | 6b. Committee Fax #:  |  |
| excess of \$20,000 and is required to file electronically.  7a. Complete Comm. Mailing Address (May be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May not be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  7b. Complete Comm. Street Address (May not be PO Box):  2530 MALLARD CT ANN ARBOR, MI 48105  8. Treasurer Name and Complete Address:  ALPA PARIKH  3225 ROCKRESS CT ANN ARBOR, MI 48103  Phone #: (734) 717-2314  E-mail Address: alpsus@yahoo.com  9. Designated Record Keeper Name and Complete Address:  SUMANGALA KAILASAPATHY  2530 MALLARD COURT ANN ARBOR, MI 48105  Phone #: (734) 769-5698   | 6c. Committee E-mail Address:   | Committee spent or received or expects to spend or receive in  |
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| 2530 MALLARD CT ANN ARBOR, MI 48105  8. Treasurer Name and Complete Address:  ALPA PARIKH 3225 ROCKRESS CT ANN ARBOR, MI 48103  Phone #: (734) 717-2314  E-mail Address: alpsus@yahoo.com  9. Designated Record Keeper Name and Complete Address:  SUMANGALA KAILASAPATHY 2530 MALLARD COURT ANN ARBOR, MI 48105  Phone #: (734) 769-5698  |   | or receive in excess of \$20,000 and would like to file electronically   |
| ANN ARBOR, MI 48105  8. Treasurer Name and Complete Address:  ALPA PARIKH 3225 ROCKRESS CT ANN ARBOR, MI 48103  Phone #:   | 7b. Complete Comm. Street Address (May not be PO Box):  | 14. Verification: I/We certify that all reasonable diligence was used  |
| ALPA PARIKH  3225 ROCKRESS CT  ANN ARBOR, MI 48103  Phone #: (734) 717-2314  E-mail Address: alpsus@yahoo.com  9. Designated Record Keeper Name and Complete Address:  SUMANGALA KAILASAPATHY  2530 MALLARD COURT  ANN ARBOR, MI 48105  Phone #: (734) 769-5698  |   | in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing electronically, we further agree that the signatures  |
| ALPA PARIKH 3225 ROCKRESS CT ANN ARBOR, MI 48103  Phone #: (734) 717-2314  E-mail Address: alpsus@yahoo.com 9. Designated Record Keeper Name and Complete Address: SUMANGALA KAILASAPATHY 2530 MALLARD COURT ANN ARBOR, MI 48105  Phone #: (734) 769-5698  | 8. Treasurer Name and Complete Address:   | completeness of each statement filed electronically by the committee.  |
| E-mail Address: alpsus@yahoo.com  9. Designated Record Keeper Name and Complete Address:  SUMANGALA KAILASAPATHY 2530 MALLARD COURT ANN ARBOR, MI 48105  Phone #: (734) 769-5698   | 3225 ROCKRESS CT  | preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name   |
| 9. Designated Record Keeper Name and Complete Address:  SUMANGALA KAILASAPATHY 2530 MALLARD COURT ANN ARBOR, MI 48105  Phone #:(734) 769-5698  | Phone #: (734) 717-2314   | and At stulie  |
| 9. Designated Record Keeper Name and Complete Address: SUMANGALA KAILASAPATHY 2530 MALLARD COURT ANN ARBOR, MI 48105  Phone #: (734) 769-5698  | E-mail Address: alpsus@vahoo.com  | LO., Kawasapalmy   |
| 2530 MALLARD COURT ANN ARBOR, MI 48105  Phone #:   |   | 100  |
| 1 HONG #1  | 2530 MALLARD COURT  | Current Treasurer 3/16/10  |
|  | Phone #:(734) 769-5698<br>E-mail Address:sumi4aa@gmail.com  | Designated Record Keeper (Required only if filing electronically)  |