



**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 08/28/12 to 07/20/14

1. Committee I.D. Number  
**C-2010-012**

2. Committee Name  
**COMMITTEE TO ELECT SUMANGALA KAILASAPATHY**

4. Candidate Last Name **KAILASAPATHY** First Name **SUMANGALA** M.I.  
4a. Office Sought Including District # or Community Served (If applicable)  
**ANN ARBOR CITY COUNCIL MEMBER WARD 1**

4b. County of Residence **WASHTENAW**

5. Committee's Mailing Address  
**2530 MALLARD CT  
ANN ARBOR, MI 48105**

Area Code and Phone (734) 769-5698  
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.

6. Treasurer's Name & Residential Address  
**ALPA PARIKH  
3225 ROCKCRESS CT  
ANN ARBOR, MI 48103**

Area Code & Phone (734) 663-1507

7. Treasurer's Business Address  
**3225 ROCKCRESS CT  
ANN ARBOR, MI 48103**

Area Code and Phone (734) 663-1507

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

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

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

Date of Election, Convention or Caucus  
08/05/14

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.)

9e. Dissolution of Candidate Committee

By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven and no longer collectible from the committee. The committee has no outstanding assets, owes no lates 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 ALPA PARIKH Type or Print Name Alpa Parikh Signature Date 7/23/14

Candidate SUMANGALA KAILASAPATHY Type or Print Name S. Kailasapathy Signature Date 7/23/14



1. Committee I.D. Number C-2010-012

2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

**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>5,345.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>5,345.00</u>	(18.) \$ <u>5,345.00</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ _____	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>5,345.00</u>	(20.) \$ <u>5,345.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ _____	(21.) \$ <u>0.00</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ _____	(22.) \$ <u>0.00</u>
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>2,424.83</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>2,424.83</u>	(23.) \$ <u>2,424.83</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ <u>0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>632.00</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>5,345.00</u>	
<b>15. SUBTOTAL. Add lines 13 and 14</b>	(15.) = \$ <u>5,977.00</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>2,424.83</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>3,552.17</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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? <input type="checkbox"/> YES      4. Date of Receipt <u>04/28/14</u> Name & Address: <b>WINEBERG SUSAN</b> <b>712 E. ANN ST.</b> <b>ANN ARBOR, MI 48104</b>  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	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/28/14</u> Name & Address: <b>BORIS KATHRYN A.</b> <b>P.O.BOX 8117</b> <b>ANN ARBOR, MI 48107-8117</b>  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	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/28/14</u> Name & Address: <b>ZETLIN PETER</b> <b>803 DUNCAN STREET</b> <b>ANN ARBOR, MI 48103</b>  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	\$ <u>25.00</u>	\$ <u>25.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/28/14</u> Name & Address: <b>MITCHELL RITA L.</b> <b>621 5TH ST</b> <b>ANN ARBOR, MI 48103</b>  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	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$225.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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? <input type="checkbox"/> YES      4. Date of Receipt <u>04/28/14</u> Name & Address: <b>LUMM JANE</b> <b>3075 OVERRIDGE DR.</b> <b>ANN ARBOR, MI 48104</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>CITY COUNCIL MEMBER</u> Employer <u>CITY OF ANN ARBOR</u> Business Address <u>301 E. HURON ST, ANN ARBOR, MI 48107</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u>  Click Here for Memo Itemization
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/28/14</u> Name & Address: <b>ARMENTROUT VIVIENNE N.</b> <b>920 VESPER RD.</b> <b>ANN ARBOR, MI 48103</b>  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	\$ <u>100.00</u>	\$ <u>100.00</u>  Click Here for Memo Itemization
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/29/14</u> Name & Address: <b>TYLER NORMAN</b> <b>126 N. DIVISION ST.</b> <b>ANN ARBOR, MI 48104</b>  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	\$ <u>30.00</u>	\$ <u>30.00</u>  Click Here for Memo Itemization
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/29/14</u> Name & Address: <b>HATHAWAY MARY A.</b> <b>1407 WAKEFIELD AVE</b> <b>ANN ARBOR MI 48103-4630</b>  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	\$ <u>50.00</u>	\$ <u>50.00</u>  Click Here for Memo Itemization

Page Subtotal **\$380.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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>04/29/14</u> Name & Address: <b>YORK CYNTHIA M.</b> <b>710 NORTHSIDE AVE.</b> <b>ANN ARBOR, MI 48105-1135</b>		\$ <u>100.00</u>	\$ <u>100.00</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/29/14</u> Name & Address: <b>MIKE ANGLIN FOR COUNCIL COMMITTEE</b> <b>803 DUNCAN ST</b> <b>ANN ARBOR, MI 48103</b>		\$ <u>100.00</u>	\$ <u>100.00</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/29/14</u> Name & Address: <b>ANNIS THEODORE C.</b> <b>414 SOUTH MAIN ST. #808</b> <b>ANN ARBOR, MI 48104</b>		\$ <u>250.00</u>	\$ <u>250.00</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>04/29/14</u> Name & Address: <b>STROWE LAURA</b> <b>1327 BROADWAY ST.</b> <b>ANN ARBOR, MI 48105</b>		\$ <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	

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.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
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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? <input type="checkbox"/> YES 4. Date of Receipt <u>05/01/14</u> Name & Address: <b>READING AGNES</b> <b>161 LAURIN COURT</b> <b>ANN ARBOR, MI 48105</b>  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	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/02/14</u> Name & Address: <b>FORMAN EVA</b> <b>1503 TRAVER ST</b> <b>ANN ARBOR, MI 48105</b>  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	\$ <u>35.00</u>	\$ <u>35.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/02/14</u> Name & Address: <b>NYSTUEN GWEN</b> <b>1016 OLIVIA</b> <b>ANN ARBOR, MI 48104</b>  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	\$ <u>200.00</u>	\$ <u>200.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/02/14</u> Name & Address: <b>POTTS ETHEL K.</b> <b>1014 ELDER BLVD</b> <b>ANN ARBOR, MI 48103</b>  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	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal \$385.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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.

3. Contribution # 1      PAC Receipt?  YES      4. Date of Receipt 05/03/14

Name & Address:  
**KAPLAN NANCY**  
3065 HUNTING VALLEY DR.  
ANN ARBOR, MI 48104-2842

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

\$ 75.00      \$ 75.00

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 # 2      PAC Receipt?  YES      4. Date of Receipt 05/06/14

Name & Address:  
**SCHRIBER ANN SNEED**  
2116 DORSET RD.  
ANN ARBOR, MI 48104

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

\$ 150.00      \$ 150.00

5. If over \$100.00 cumulative, please provide:      Click Here for Memo Itemization

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

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

Type of Contribution:  Direct       Loan from a person       Fund Raiser

3. Contribution # 3      PAC Receipt?  YES      4. Date of Receipt 05/06/14

Name & Address:  
**BRINKMAN MICHAEL**  
1038 BARTON DR  
ANN ARBOR, MI 48105

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

\$ 100.00      \$ 100.00

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 # 4      PAC Receipt?  YES      4. Date of Receipt 05/11/14

Name & Address:  
**LEWIS CHARLES D.**  
330 S 7TH ST.  
ANN ARBOR, MI 48103

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

\$ 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

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.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012

2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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? <input type="checkbox"/> YES 4. Date of Receipt <u>05/11/14</u> Name & Address: <b>ECKSTEIN PETER</b> 2551 LONDONDERRY RD. ANN ARBOR, MI 48104-4017		\$ <u>100.00</u>	\$ <u>100.00</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 #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/12/14</u> Name & Address: <b>CARUSO VINCENT P.</b> 556 GLENDALE CIR ANN ARBOR, MI 48103		\$ <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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/13/14</u> Name & Address: <b>SHAFFRAN EDWARD A.</b> 209 S FOURTH AVE., STE. 1C ANN ARBOR, MI 48104		\$ <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>05/14/14</u> Name & Address: <b>GOLDSMITH ALAN</b> 2280 AMESBURY DR ANN ARBOR, MI 48103		\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATIVE OFFICER</u> Employer <u>DEPT OF VETERANS AFFAIRS</u> Business Address <u>24 FRANK LLOYD WRIGHT DR., 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	

Page Subtotal \$325.00

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

Enter this total on  
line 3a of Summary  
Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/14/14</u> Name & Address: <b>BIZZELL DAWN M.</b> <b>1614 LONGSHORE DRIVE</b> <b>ANN ARBOR, MI 48105</b>  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	\$ <u>500.00</u>	\$ <u>500.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/15/14</u> Name & Address: <b>HOLSINGER KAY</b> <b>2300 KENT ST.</b> <b>ANN ARBOR, MI 48103</b>  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	\$ <u>200.00</u>	\$ <u>200.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/15/14</u> Name & Address: <b>PARSONS HARRIET</b> <b>295 MASONS AVE.</b> <b>ANN ARBOR, MI 48103</b>  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	\$ <u>75.00</u>	\$ <u>75.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/15/14</u> Name & Address: <b>SCHNITZER ANNA ERCOLI</b> <b>315 2ND ST. APT 412</b> <b>ANN ARBOR, MI 48103</b>  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	\$ <u>30.00</u>	\$ <u>30.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$805.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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? <input type="checkbox"/> YES      4. Date of Receipt <u>05/16/14</u> Name & Address: <b>RABHI PEGGY</b> 1991 UPLAND DR. ANN ARBOR, MI 48105-2109  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	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/17/14</u> Name & Address: <b>WILLIAMS MARIAN J.</b> 1836 SAXON ANN ARBOR, MI 48103  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	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/17/14</u> Name & Address: <b>SIMON VIRGINIA</b> 830 W. WASHINGTON ST. ANN ARBOR, MI 48103  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	\$ <u>25.00</u>	\$ <u>25.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/19/14</u> Name & Address: <b>DETTOR RAYMOND A.</b> 120 N. DIVISION, APT. 1 ANN ARBOR, MI 48104  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	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$175.00**

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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? <input type="checkbox"/> YES 4. Date of Receipt <u>05/20/14</u> Name & Address: <b>STULBERG TOM</b> 1202 TRAVER STREET ANN ARBOR, MI 48105  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	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/27/14</u> Name & Address: <b>NAGOURNEY PETER</b> 914 LINCOLN ST. ANN ARBOR, MI 48104  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	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/22/14</u> Name & Address: <b>ZARNOWITZ STEVEN</b> 300 SOUTH THAYER ST. ANN ARBOR, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation <u>LAWYER</u> Employer <u>DAHLMANN PROPERTIES</u> Business Address <u>300 S. THAYER ST. 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	\$ <u>500.00</u>	\$ <u>500.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/30/14</u> Name & Address: <b>BULLINGTON LUANNE</b> 1801 SOUTH BLVD ANN ARBOR, MI 48104-4782  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	\$ <u>150.00</u>	\$ <u>150.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$800.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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? <input type="checkbox"/> YES      4. Date of Receipt <u>06/02/14</u> Name & Address: <b>BILAKOS PETER</b> <b>203 E ANN ST.</b> <b>ANN ARBOR, MI 48104</b>  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	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/02/14</u> Name & Address: <b>O'NEAL JOE E.</b> <b>1920 SCOTTWOOD AVE.</b> <b>ANN ARBOR, MI 48104</b>  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	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/03/14</u> Name & Address: <b>STURGIS ERIC A.</b> <b>2009 PONTIAC TRAIL</b> <b>ANN ARBOR, MI 48105</b>  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	\$ <u>35.00</u>	\$ <u>35.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/03/14</u> Name & Address: <b>BANNISTER ANNE L.</b> <b>612 N MAIN STREET</b> <b>ANN ARBOR, MI 48104</b>  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	\$ <u>25.00</u>	\$ <u>25.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$260.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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? <input type="checkbox"/> YES      4. Date of Receipt <u>06/04/14</u> Name & Address: <b>DAHLMANN BEN</b> 1552 NEWPORT CREEK DR. ANN ARBOR, MI 48103  5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE MANAGEMENT</u> Employer <u>DAHLMANN PROPERTIES</u> Business Address <u>300 S. THAYER ST. 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	\$ <u>500.00</u>	\$ <u>500.00</u>  Click Here for Memo Itemization
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/20/14</u> Name & Address: <b>BJORN LARS</b> 712 E ANN STREET ANN ARBOR, MI 48104  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	\$ <u>50.00</u>	\$ <u>50.00</u>  Click Here for Memo Itemization
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/25/14</u> Name & Address: <b>RALPH ALICE J.</b> 1607 E STADIUM BLVD ANN ARBOR, MI 48104  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	\$ <u>25.00</u>	\$ <u>25.00</u>  Click Here for Memo Itemization
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/26/14</u> Name & Address: <b>LIEM VERONIQUE M.</b> 2751 BYINGTON BLVD. ANN ARBOR, MI 48105-9683  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	\$ <u>50.00</u>	\$ <u>50.00</u>  Click Here for Memo Itemization

Page Subtotal \$625.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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? <input type="checkbox"/> YES      4. Date of Receipt <u>06/26/14</u> Name & Address: <b>STROUD KATHLEEN F.</b> <b>2271 PLACID WAY</b> <b>ANN ARBOR, MI 48105-1205</b>		\$ <u>15.00</u>	\$ <u>15.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/30/14</u> Name & Address: <b>DENNIS ERIC PAUL</b> <b>919 BARTON DR.</b> <b>ANN ARBOR, MI 48105</b>		\$ <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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/07/14</u> Name & Address: <b>GREGG INGRID A.</b> <b>3129 FAWNMEADOW COURT</b> <b>ANN ARBOR, MI 48105</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR</u> Employer <u>EARHART FOUNDATION</u> Business Address <u>2200 GREEN RD. SUITE F, 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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/08/14</u> Name & Address: <b>HERSETH FREDA</b> <b>1508 LONGSHORE DR.</b> <b>ANN ARBOR, MI 48105-1632</b>		\$ <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		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$290.00**  
 Grand Total of All Schedules 1A  
 (Complete on last page of Schedule)  
 Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

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>07/08/14</u> Name & Address: <b>VALACAK PAUL A.</b> 1815 TIMBER TRAIL ANN ARBOR, MI 48103		\$ <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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/10/14</u> Name & Address: <b>PERRY SUSAN A.</b> 1708 FAIR STREET ANN ARBOR, MI 48103-4150		\$ <u>100.00</u>	\$ <u>100.00</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>07/13/14</u> Name & Address: <b>MICHENER JANE</b> 2115 DEVONSHIRE RD ANN ARBOR, MI 48104-4059		\$ <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 _____ Name & Address:		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$200.00**

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

**\$5,345.00**

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2010-012  
2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>SAWICKI</b>  Address <b>1521 W. LAFAYETTE DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>YARD SIGNS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/04/14</u> Date	<u>\$ 492.90</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>HEIKKINEN PRODUCTIONS</b>  Address <b>1410 WEST MICHIGAN AVE. YPSILANTI, MI 48197</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>T-SHIRTS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/10/14</u> Date	<u>\$ 151.05</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>FIRST IMPRESSION PRINTING</b>  Address <b>4109 JACKSON ROAD ANN ARBOR, MI 48103</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>POSTCARDS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/11/14</u> Date	<u>\$ 970.75</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>POSTMASTER</b>  Address <b>LIBERTY STATION ANN ARBOR, MI 48104</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>STAMPS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/13/14</u> Date	<u>\$ 588.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <b>POSTMASTER</b>  Address <b>LIBERTY STATION ANN ARBOR, MI 48104</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>STAMPS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/20/14</u> Date	<u>\$ 153.00</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$2,355.70**  
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**

**C-2010-012**

1. Committee I. D. Number

2. Committee Name COMMITTEE TO ELECT SUMANGALA KAILASAPATHY

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>BIZZELL DAWN</b>  Address <b>1614 LONGSHORE DRIVE ANN ARBOR, MI 48105</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>REIMBURSEMENT FOR WEBSITE REG &amp; SUPPLIES</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/03/14</u> Date	<u>\$ 69.13</u>  Click Here for Memo Itemization Type
Expenditure #2 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	\$ _____  Click Here for Memo Itemization Type
Expenditure #3 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	\$ _____  Click Here for Memo Itemization Type
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	\$ _____  Click Here for Memo Itemization Type
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	\$ _____  Click Here for Memo Itemization Type

Subtotal this page **\$69.13**  
 Grand Total of all Schedules 1B  
 (Complete on last page of Schedule) **\$2,424.83**

Enter this total  
on line 8a of  
Summary Page