



**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.

1. Committee I.D. Number C-2018-039		3. This Statement covers From: <u>06/28/18</u> to <u>10/21/20</u>	
2. Committee Name Committee To Elect Sharifa Kerene Moore to Ann Arbor District Library Board		4. Candidate Last Name Moore First Name Sharifa M.I. K 4a. Office Sought Including District # or Community Served (If applicable) Ann Arbor District Library Trustee	
5. Committee's Mailing Address 1108 Fountain Ann Arbor, MI 48103 Area Code and Phone <u>(734) 686-4956</u> 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.		4b. County of Residence WASHTENAW 6. Treasurer's Name & Residential Address Tracy Van den Bergh 7800 Scio Church Rd Ann Arbor, MI 48108 Area Code & Phone <u>(248) 760-9479</u>	
7. Treasurer's Business Address Tracy Van den Bergh Roberts & Freatman 125 N. Huron Ypsilanti, MI 48197 Area Code and Phone <u>(734) 483-4166</u>		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>11/06/18</u>		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
		9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify 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 it 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 Tracy Van den Bergh Type or Print Name <u>Tracy Van den Bergh</u> Signature <u>[Signature]</u> Date <u>10-22-18</u>			
Candidate Sharifa Kerene Moore Type or Print Name _____ Signature <u>[Signature]</u> Date <u>10/22/18</u>			

RECEIVED FILED
 MICHIGAN DEPT OF STATE
 2018 OCT 25 AM 9:43
 ELECTIONS/REGISTRATION SEAL

FILED
 WASHTENAW COUNTY, MI
 2018 SEP -5 P 2:12
 MRS. SHARIFA MOORE/RECORD KEEPER



1. Committee I.D. Number C-2018-039

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sharifa Kerene Moore to Ann Arbor District Library Bd

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1,040.06</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$1,040.06</u>	(18.) \$ <u>\$1,040.06</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$1,040.06</u>	(20.) \$ <u>\$1,040.06</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$300.00</u>	(21.) \$ <u>\$300.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,030.40</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$1,030.40</u>	(23.) \$ <u>\$1,030.40</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$1,040.06</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$1,040.06</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$1,030.40</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$9.66</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2018-039
2. Committee Name Committee To Elect Sharifa Kerene Moore To An Arbor District Library B

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>07/06/20</u>	
Name & Address: <u>Sharifa K Moore</u> <u>1108 Fountain</u> <u>Ann Arbor, MI 48103</u>		\$ <u>5.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Legal Services of S Central Michigan</u> Business Address <u>15 S Washington, Ypsilanti, MI 48197</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 <input type="button" value=""/>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/09/18</u>	
Name & Address: <u>David Baum</u> <u>1517 Brooklyn Ave</u> <u>Ann Arbor, MI 48104</u>		\$ <u>27.18</u>	\$ <u>27.18</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>University of Michigan</u> 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 <input type="button" value=""/>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/18</u>	
Name & Address: <u>Elizabeth Benton</u> <u>823 Loyola Drive</u> <u>Ann Arbor, MI 48103</u>		\$ <u>54.03</u>	\$ <u>54.03</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Legal Services of S. Central MI</u> 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 <input type="button" value=""/>	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/12/18</u>	
Name & Address: <u>Cynthia Bostwick</u> <u>2836 WHITEWOOD ST</u> <u>Ann Arbor, MI 48103</u>		\$ <u>107.73</u>	\$ <u>107.73</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Washtenaw County Friend of the Court</u> Business Address <u>P.O. Box 8645, 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		Click Here for Memo Itemization <input type="button" value=""/>	

Page Subtotal 193.94

Grand Total of All Schedules 1A
(Complete on last page of Schedule) 1040.66

Enter this total on
line 3a of Summary



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2018-039
2. Committee Name Committee To Elect Sharifa Kerene Moore To An Arbor District Library B

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 Name & Address: Robert Gillett 2022 DAY ST Ann Arbor, MI 48104	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/11/18</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		\$ <u>50.00</u>	\$ <u>50.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: Krapohl Graydon 1502 Golden Ave Ann Arbor, MI 48104	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/18</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		\$ <u>27.18</u>	\$ <u>27.18</u>
		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Veronique Liem 2751 Byington Ann Arbor, MI 48103	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/10/18</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		\$ <u>27.18</u>	\$ <u>27.18</u>
		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Sarah Munro 3405 Riverbend Dr Ann Arbor, MI 48103	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/18</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Legal Services of S Central MI</u> Business Address <u>15 S. Washington, 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		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	

Page Subtotal 204.36

Grand Total of All Schedules 1A
(Complete on last page of Schedule) 1048.06

Enter this total on
line 3a of Summary

2045



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2018-039
2. Committee Name Committee To Elect Sharifa Kerene Moore To An Arbor District Library B

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>07/15/18</u>	
Name & Address: Katherine Sharkey 1116 Kuehnle Ann Arbor, MI 48103		\$ <u>54.03</u>	\$ <u>54.03</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 <input type="button" value=""/>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/18</u>	
Name & Address: Jamie VanderBroek 625 Barber Avenue Ann Arbor, MI 48103		\$ <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 <input type="button" value=""/>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/18</u>	
Name & Address: Angela Walker 676 Ironwood 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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value=""/>	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/18</u>	
Name & Address: Leslie Stambaugh 1940 Ridge Ave Ann Arbor, MI 48104		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>RLS Associates</u> Business Address <u>1940 Ridge Avenue, Ann Arbor, MI 48104</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 <input type="button" value=""/>	

Page Subtotal

229.03

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

1,040.06

Enter this total on
line 3a of Summary

3 of 5



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2018-039
2. Committee Name Committee To Elect Sharifa Kerene Moore To An Arbor District Library B

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 Name & Address: Paul Sher 17 W Eden Court Ann Arbor, MI 48108	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/18</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		\$ <u>25.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: Steve Culver PO Box 7117 Ann Arbor, MI 48107	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/15/18</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		\$ <u>25.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Donna Rafferty and Jules Cobb 609 Ross St. Ann Arbor, MI 48103	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/05/18</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		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Diana Marin 3007 Sequoia Parkway Ann Arbor, MI 48104	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/17/18</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Farmworker Legal Services</u> Business Address <u>15 S. Washington, Ypsilanti, MI 48107</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>107.73</u>	\$ <u>107.73</u>
		Click Here for Memo Itemization	

Page Subtotal 257.73

Grand Total of All Schedules 1A
(Complete on last page of Schedule) 1040.06

Enter this total on
line 3a of Summary



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2018-039
2. Committee Name Committee To Elect Sharifa Kerene Moore To An Arbor District Library B

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>07/25/18</u>	
Name & Address: <u>Lorray Brown</u> <u>3625 Fieldcrest Lane</u> <u>Ypsilanti, MI 48197</u>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization <input type="checkbox"/>	
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>10/21/18</u>	
Name & Address: <u>Tracy Vanden Bergh</u> <u>7860 Scio Church Rd.</u> <u>Ann Arbor, MI 48103</u>		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization <input type="checkbox"/>	
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>10/21/18</u>	
Name & Address: <u>Sharifa K. Moore</u> <u>1108 Fountain</u> <u>Ann Arbor, MI 48103</u>		\$ <u>120.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Legal Services of S. Central MI</u> Business Address <u>15 S. Washington, Ypsilanti, MI</u>		Click Here for Memo Itemization <input type="checkbox"/>	
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 _____	
Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization <input type="checkbox"/>	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

155.00

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

1040.00

Enter this total on
line 3a of Summary



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2018-039
 2. Committee Name Committee To Elect Sharife Kerec Mayor To Ann Arbor District Library SD.

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:
 Kimberly Borger
 1108 Fountain
 Ann Arbor, MI 48103

If over \$100.00 cumulative, please provide:
 Occupation: self-employed
 Employer Name & Business Address:
 AnyEverything
 1108 Fountain
 Ann Arbor, MI 48103

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 graphic design

5. Date Of Receipt: 10/01/20

6. Vendor Name & Address:

\$ 150.00 \$ 150.00

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Contribution # 2 PAC Receipt? Yes

Name & Address:
 Liah Song
 1290 Bardstown Trl
 Ann Arbor, MI 48105

If over \$100.00 cumulative, please provide:
 Occupation: self-employed
 Employer Name & Address:
 Liah Song
 1290 Bardstown Trl
 Ann Arbor, MI 48105

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 Provided venue for fundraiser

5. Date Of Receipt: 7/15/18

6. Vendor Name & Address:
 Ann Arbor City Club
 103 E. Liberty, #300
 Ann Arbor, MI 48104

\$ 150.00 \$ 150.00

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Contribution #3 PAC Receipt? Yes

Name & Address:

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 _____

5. Date Of Receipt: _____

6. Vendor Name & Address:

\$ _____ \$ _____

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Page Subtotal	300.00
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	300.00

Enter this total on line 6 of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number c2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name S. Kerene Moore Address 1108 Fountain Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Reimbursement</u> Memo Itemization Below <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/3/18</u> Date	<u>\$ 299.00</u>
Expenditure #2 Name VistaPrint Address 95 Hayden Ave Lexington, MA <input type="checkbox"/> Fund Raiser	Purpose: <u>self-inking stamp</u> (Memo Itemization) <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/7/19</u> Date	<u>\$ (30.72)</u>
Expenditure #3 Name VistaPrint Address 95 Hayden Ave Lexington, MA <input type="checkbox"/> Fund Raiser	Purpose: <u>business cards</u> (Memo Itemization) <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/5/18</u> Date	<u>\$ (28.60)</u>
Expenditure #4 Name PA Palmer Address 734 Gott #2 Ann Arbor, MI 48104 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>catering</u> (Memo Itemization) <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/18/18</u> Date	<u>\$ (100.00)</u>
Expenditure #5 Name Meijer Address 3145 Ann Arbor-Saline Rd, #64 Ann Arbor, MI <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>food for catering</u> (Memo Itemization) <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/12/18</u> Date	<u>\$ (140.65)</u>

Subtotal this page 299.00
Grand Total of all Schedules 1B (Complete on last page of Schedule) 1030.40

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number c2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name S. Kerene Moore Address 1108 Fountain Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Reimbursement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/02/18</u> Date	\$ <u>731.40</u>
Expenditure #2 Name Sawicki and Son Address 1521 W Lafayette Detroit, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>yard sign deposit</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/3/18</u> Date	\$ <u>(365.70)</u> (Memo Itemization)
Expenditure #3 Name Sawicki and Son Address 1521 W Lafayette Detroit, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>yard sign balance</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/18</u> Date	\$ <u>(365.70)</u> (Memo Itemization)
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	\$ _____ (Memo Itemization)
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	\$ _____ (Memo Itemization)

Subtotal this page 731.40

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 1030.40

Enter this total
on line 8a of
Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C2018039

2. Committee Name Committee To Elect Sharifa Kerene Moore To Ann Arbor District Library Bd

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>07/15/18</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>25</u>	5. Type of Fund Raising Activity <u>small gathering</u>	6. Address and Name (if any) of place where the activity was held <u>Ann Arbor Club</u> <u>103 Liberty, #300</u> <u>Ann Arbor, MI 48104</u> <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions 433.06

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) 433.06

10. Total Cost of Event \$390.65
(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.