



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

AMENDED

**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>10/21/2018</u>	
2. Committee Name Committee To Elect Sharifa Kerene Moore to Ann Arbor District Library Board		4. Candidate Last Name First Name M.I. Moore Sharifa 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.		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 here by 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 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 <u>Tracy Van den Bergh</u> Type or Print Name		<u>Tracy Van den Bergh</u> Signature	
		<u>11/21/18 Amended</u> Date	
Candidate <u>Sharifa Kerene Moore</u> Type or Print Name		<u>[Signature]</u> Signature	
		<u>10/22/18</u> Date	

FILED
 WASHTEENAW COUNTY, MI
 2018 OCT - 3 A 9:54
 CLERK/REGISTRAR



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

2. Committee Name Committee To Elect Shwartz
Karen Moore to AADL

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cyc
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1,079.09</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>45.00</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>0</u>	(18.) \$ <u>1124.09</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$1124.09</u>	(20.) \$ <u>1124.09</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1331.37</u>	(21.) \$ <u>1331.37</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,031.37</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>\$61.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$1,092.37</u>	(23.) \$ <u>1092.37</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</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</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>\$1124.09</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$1124.09</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$1092.37</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$31.72</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore to AADL

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 7/5/18
Name & Address:
David Baum
1577 Brooklyn Ave.
Ann Arbor, MI 48104

6. Amount \$ 27.18 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 27.18

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 7/9/18
Name & Address:
Graydon Krapohl
1502 Golden Ave.
Ann Arbor, MI 48104

6. Amount \$ 27.18 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 27.18

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 # 3 PAC Receipt? YES 4. Date of Receipt 7/10/18
Name & Address:
Veronique Lien
2751 Brighton Drive
Ann Arbor, MI 48103

6. Amount \$ 27.18 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 27.18

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 7/11/18
Name & Address:
Robert Gillett
2022 Day St.
Ann Arbor, MI 48104

6. Amount \$ 50.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 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

131.54

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

1079.09

Enter this total on
line 3a of Summary

1 of 5



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore to AADL

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 7/15/18

Name & Address:
Elizabeth Benton
823 Loyola Drive
Ann Arbor, MI 48103

6. Amount \$ 54.03 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 54.03

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 7/15/18

Name & Address:
Sarah Munro
3405 Riverbend Drive
Ann Arbor, MI 48103

6. Amount \$ 100.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation MI Advocacy Program / Attorney Employer _____

Business Address 15 S. Washington, Ypsilanti, MI 48197

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/15/18

Name & Address:
Katherine Sharkey
1100 Kuehale
Ann Arbor, MI 48103

6. Amount \$ 54.03 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 54.03

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 7/15/18

Name & Address:
Jamie Vanderbroek
625 Barber Ave.
Ann Arbor, MI 48103

6. Amount \$ 25.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25.00

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



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore to AADL

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 7/15/18
Name & Address:
Angela Walker
676 Ironwood
Ann Arbor, MI 48103

6. Amount \$ 50.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 50.00

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/15/18
Name & Address:
Leslie Stambough
1940 Ridge Ave.
Ann Arbor, MI 48104

6. Amount \$ 700.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100.00

5. If over \$100.00 cumulative, please provide:
Occupation Consultant Employer RLS Associates
Business Address 1940 Ridge Ave, Ann Arbor, MI 48104
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/15/18
Name & Address:
Paul Sher
17 W. Eden Court
Ann Arbor, MI 48108

6. Amount \$ 25.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25.00

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 7/15/18
Name & Address:
Steve Culver
P.O. Box 7117
Ann Arbor, MI 48107

6. Amount \$ 25.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25.00

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

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Page Subtotal 200.00
Grand Total of All Schedules 1A (Complete on last page of Schedule) 1074.09
Enter this total on line 3a of Summary



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore to AADL

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 7/15/18
Name & Address:
Donna Muma Rafferty & Jules Cobb
609 Ross St.
Ann Arbor MI 48103
6. Amount \$ 100.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100.00
5. If over \$100.00 cumulative, please provide:
Occupation Consultant Employer Firefly Millward Brown [Click Here for Memo Itemization](#)
Business Address 224 Riverside Ave. #4A, Westport, CT
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/17/18
Name & Address:
Cynthia Bostwick
2836 Whitewood
Ann Arbor, MI 48103
6. Amount \$ 107.73 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 107.73
5. If over \$100.00 cumulative, please provide:
Occupation Attorney Employer Washington Trial Court [Click Here for Memo Itemization](#)
Business Address 101 E. Huron St., Ann Arbor MI 48107
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/17/18
Name & Address:
Diana Marin
3007 Sequoia Parkway
Ann Arbor, MI 48103
6. Amount \$ 107.73 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 107.73
5. If over \$100.00 cumulative, please provide:
Occupation Attorney Employer MI Advocacy Program [Click Here for Memo Itemization](#)
Business Address 15 S. Washington, Ypsilanti, MI
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 7/21/18
Name & Address:
Brad O'Furey
105 Fieldcrest, #203
Ann Arbor, MI 48103
6. Amount \$ 54.03 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 54.03
5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____ [Click Here for Memo Itemization](#)
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

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Page Subtotal 369.49
Grand Total of All Schedules 1A (Complete on last page of Schedule) 1079.09

Enter this total on line 3a of Summary



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore to AADL

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 7/25/18
Name & Address: Lurray Brown
3025 Fieldcrest Lane
Vpsilanti, MI 48197

6. Amount \$ 25.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25.00

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 10/21/18
Name & Address: S. Kerene Moore
1108 Fountain
Ann Arbor, MI 48103

6. Amount \$ 120.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 120.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation Attorney Employer MI Advocacy Program
Business Address 15 S. Washington, Vpsilanti MI 48197
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt _____
Name & Address: _____

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

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 _____
Name & Address: _____

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

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 145.00
Grand Total of All Schedules 1A 1079.09
(Complete on last page of Schedule)

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Enter this total on line 3a of Summary



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore to AADL

CANDIDATE COMMITTEE

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)
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Contribution # 1 Name & Address: Moore, S. Kerene 1108 Fountain Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Business Address: Michigan Advocacy Program 15 S. Washington Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser Contribution	PAC Receipt? <input type="checkbox"/> Yes 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>campaign business cards</u> 5. Date Of Receipt: <u>07/05/18</u> 6. Vendor Name & Address: VistaPrint 95 Hayden Ave. Lexington, MA Click Here for Memo Itemization	\$ <u>28.60</u>	\$ <u>28.60</u>
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Contribution # 2 Name & Address: Moore, S. Kerene 1108 Fountain Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Address: Michigan Advocacy Program 15 S. Washington Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser Contribution	PAC Receipt? <input type="checkbox"/> Yes 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>campaign stamp</u> 5. Date Of Receipt: <u>07/08/20</u> 6. Vendor Name & Address: VistaPrint 95 Hayden Ave. Lexington, MA Click Here for Memo Itemization	\$ <u>30.72</u>	\$ <u>59.32</u>
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Contribution #3 Name & Address: Moore, S. Kerene 1108 Fountain Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Address: Michigan Advocacy Program 15 S. Washington Ypsilanti, MI 48197 <input checked="" type="checkbox"/> Fund Raiser Contribution	PAC Receipt? <input type="checkbox"/> Yes 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>food supplies for kickoff</u> 5. Date Of Receipt: <u>07/12/18</u> 6. Vendor Name & Address: Meijer 3145 Ann Arbor-Saline Rd. #64 Ann Arbor, MI Click Here for Memo Itemization	\$ <u>140.65</u>	\$ <u>199.97</u>
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Page Subtotal \$ 199.97 \$ 199.97

Grand Total of all Schedules 1-IK (Complete on last page of Schedule) 1331.37

Enter this total on line 6 of Summary Page

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ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore To AADL

CANDIDATE COMMITTEE

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)
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<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Moore, S. Kerene 1108 Fountain Ann Arbor, MI 48103</p> <p>If over \$100.00 cumulative, please provide: Occupation: Attorney</p> <p>Employer Name & Business Address: Michigan Advocacy Program 15 S. Washington Ypsilanti, MI 48197</p> <p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>catering services for kickoff</u></p> <p>5. Date Of Receipt: <u>07/18/18</u></p> <p>6. Vendor Name & Address: Paquetta Palmer 734 Gott #2 Ann Arbor, MI 48103</p> <p style="text-align: right;">Click Here for Memo Itemization</p>	<p>\$ <u>100.00</u></p>	<p>\$ <u>299.97</u></p>
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<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address:</p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description _____</p> <p>5. Date Of Receipt: _____</p> <p>6. Vendor Name & Address:</p> <p style="text-align: right;">Click Here for Memo Itemization</p>	<p>\$ _____</p>	<p>\$ _____</p>
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<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address:</p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description _____</p> <p>5. Date Of Receipt: _____</p> <p>6. Vendor Name & Address:</p> <p style="text-align: right;">Click Here for Memo Itemization</p>	<p>\$ _____</p>	<p>\$ _____</p>
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Page Subtotal \$100.00 \$299.97

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) ¹³³¹⁻
\$1,031.37

Enter this total
on line 6 of Summary
Page

2 of 4



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2018-039
 2. Committee Name Committee To Elect Sharita Keene Moore To Ann Arbor District Library RD

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)	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Third date in Item)
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Contribution # 1 PAC Receipt? Yes

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

If over \$100.00 cumulative, please provide:
 Occupation: _____
 Employer Name & Business Address: _____

5. Date Of Receipt: _____
 6. Vendor Name & Address: _____

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Contribution # 2 PAC Receipt? Yes

Name & Address:
Liah Song
1290 Bardstown Tr-1
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 \$ 150.00 \$ 150.
 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
107 E. Liberty, #300
Ann Arbor, MI 48104

If over \$100.00 cumulative, please provide:
 Occupation: self-employed
 Employer Name & Address:
Liah Song
1290 Bardstown Tr-1
Ann Arbor, MI 48105

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Contribution # 3 PAC Receipt? Yes

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

If over \$100.00 cumulative, please provide:
 Occupation: _____
 Employer Name & Address: _____

5. Date Of Receipt: _____
 6. Vendor Name & Address: _____

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Page Subtotal	<u>150.00</u>
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	<u>1331.37</u>



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore to AADL

CANDIDATE COMMITTEE

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 <u>all</u> 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? <input type="checkbox"/> Yes Name & Address: Moore, S. Kerene 1108 Fountain Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Attorney Employer Name & Business Address: Michigan Advocacy Program 15 S. Washington Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>yard sign deposit</u> 5. Date Of Receipt: <u>10/03/18</u> 6. Vendor Name & Address: Sawicki and Son 1521 W. Lafayette Detroit, MI 48216 Click Here for Memo Itemization	\$ <u>365.70</u>	\$ <u>665.67</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Moore, S. Kerene 1108 Fountain Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: Attorney Employer Name & Address: Michigan Advocacy Program 15 S. Washington Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>yard sign balance</u> 5. Date Of Receipt: <u>10/18/18</u> 6. Vendor Name & Address: Sawicki and Son 1521 W. Lafayette Detroit, MI 48216 Click Here for Memo Itemization	\$ <u>365.70</u>	\$ <u>1031.37</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Kimberly Berger 1108 Fountain Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: <u>self-employed</u> Employer Name & Address: Any Everything 1108 Fountain Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>graphic design/yard sign</u> 5. Date Of Receipt: <u>10/1/18</u> 6. Vendor Name & Address: Click Here for Memo Itemization	\$ <u>150.00</u>	\$ <u>150.00</u>

Page Subtotal **731.40** **\$1031.37**

Grand Total of all Schedules 1-IK (Complete on last page of Schedule) **1331.37**

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 to AADL

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 (loan repayment)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/18</u> Date	<u>\$ 299.97</u> Memo Itemization Below <input type="checkbox"/>
Expenditure #2 Name VistaPrint Address 95 Hayden Ave. Lexington, MA <input type="checkbox"/> Fund Raiser	Purpose: <u>campaign bus. cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/05/18</u> Date	<u>\$ (28.60)</u> (Memo Itemization) <input type="checkbox"/>
Expenditure #3 Name VistaPrint Address 95 Hayden Ave. Lexington, MA <input type="checkbox"/> Fund Raiser	Purpose: <u>campaign stamp</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/07/18</u> Date	<u>\$ (30.72)</u> (Memo Itemization) <input type="checkbox"/>
Expenditure #4 Name Meijer Address 3145 Ann Arbor-Saline Rd #64 Ann Arbor, MI <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>food for kickoff</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/12/18</u> Date	<u>\$ (140.65)</u> (Memo Itemization) <input type="checkbox"/>
Expenditure #5 Name Paquetta Palmer Address 734 Gott #2 Ann Arbor, MI 48104 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>caterer</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/18/18</u> Date	<u>\$ (100.00)</u> (Memo Itemization) <input type="checkbox"/>

Subtotal this page **\$299.97**

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

1031.32

Enter this total on line 8a of Summary Page

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C2018039
2. Committee Name Committee To Elect Sharifa Kerene Moore to AADL

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 (loan repayment)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/18</u> Date	<u>\$ 731.40</u> Memo Itemization Below <input type="checkbox"/>
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>10/03/18</u> Date	<u>\$ (365.70)</u> (Memo Itemization) <input type="checkbox"/>
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) <input type="checkbox"/>
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 <input type="checkbox"/>
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) <input type="checkbox"/>

Subtotal this page **\$731.40**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$1,031.37**

Enter this total on line 8a of Summary Page

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**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2018-039
2. Committee Name Committee To Elect Sharifa Kerene Moore To AADL

This Schedule itemizes:

a. Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: S. Kerene Moore 1108 Fountain Ann Arbor, MI 48103	4. Type: <u>cand. business cards</u> 5. <u>Date Debt Was Incurred:</u> <u>07/05/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 28.60</u>	08/03/18 \$ 28.60 \$ \$ \$ \$	\$ 28.60	\$ 0.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: S. Kerene Moore 1108 Fountain Ann Arbor, MI 48103	4. Type: <u>cand. stamp</u> 5. <u>Date Debt Was Incurred:</u> <u>7/7/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 30.72</u>	08/03/18 \$ 30.72 \$ \$ \$ \$	\$ 30.72	\$ 0.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: S. Kerene Moore 1108 Fountain Ann Arbor, MI 48103	4. Type: <u>food for catering</u> 5. <u>Date Debt Was Incurred:</u> <u>7/12/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 140.65</u>	08/03/18 \$ 140.65 \$ \$ \$ \$	\$ 140.65	\$ 0.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$0.00**
Grand Total of all Schedules 1E **\$0.00**
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2018-039
2. Committee Name Committee To Elect Sharifa Kerene Moore To AADL

This Schedule itemizes:

a. Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: S. Kerene Moore 1108 Fountain Ann Arbor, MI 48103	4. Type: <u>catering</u> 5. <u>Date Debt Was Incurred:</u> <u>07/18/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 100.00</u>	08/03/18 \$ 100.00 \$ \$ \$ \$	\$ 100.00	\$ 0.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: S. Kerene Moore 1108 Fountain Ann Arbor, MI 48103	4. Type: <u>yard sign deposit</u> 5. <u>Date Debt Was Incurred:</u> <u>10/3/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 365.70</u>	10/22/18 \$ 365.70 \$ \$ \$ \$	\$ 365.70	\$ 0.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: S. Kerene Moore 1108 Fountain Ann Arbor, MI 48103	4. Type: <u>yard sign balance</u> 5. <u>Date Debt Was Incurred:</u> <u>10/18/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 365.70</u>	10/22/18 \$ 365.70 \$ \$ \$ \$	\$ 365.70	\$ 0.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$0.00**
Grand Total of all Schedules 1E **\$0.00**
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**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) place where the activity was held <u>Ann Arbor Club</u> <u>103 Liberty, #300</u> <u>Ann Arbor, MI 4810</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 Contribution 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.