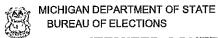


CANDIDATE COMMITTEE COVER PAGE

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	t covers From: 11/27/12 to 1:	2/31/13		
1. Committee I.D. Number	4. Candidate La	st Name First Name	M.I.		
C-2003-019	Mexicotte Debra				
2. Committee Name	4a. Office Sought Including District # or Community, Served (If applicable)				
	Ann Arboi	Board of Education			
The Committee to Elect Deb Mexicotte	4b. County of Res	sidence			
5. Committee's Mailing Address 2660 Yost Blvd.		me & Residential Address			
Ann Arbor, MI 48104	Deb Mexico 2660 Yost E				
	Ann Arbor, I		ي ا		
		C	<u>-</u>		
Area Code and Phone (734) 677-1587			WASHTEN ZOIN JAN		
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.			图 产 当		
be sent to this address by the filing official.	Area Code & Pho	ne (734) 677-1587			
7. Treasurer's Business Address	8. Designated Reco	ecord keeper's Name and Mailing Address	(If the committee has		
Deb Mexicotte	Deb Mexico	tte	ED V CC		
1100 LSA Bldg. 500 S. State St.	2660 Yost E	Blvd. 중	可 夏 D 夏		
Ann Arbor, MI 48109	Ann Arbor, I	MI 48104 5	₹ * ₹		
7 (117 / 1301, Wi -10100			ED ROUNT'S MI		
		, , , , ,	3		
Area Code and Phone (734) 677-1587	Area Code and P	_{hone} (734) 677-1587			
9. TYPE OF STATEMENT					
9a. Pre-Election OR 9b. Post	-Election	9c. Annual Statement (2013	Coverage Year)		
Pre-Election or Post-Election Statement relates to:		9d. Amendment to Campaign Statement or 9e to indicate which Statement	ent (Complete Item 9a, 9b, 9c is being amended)		
Primary Ger	neral	9e. Dissolution of Candidate Committ	ee		
Convention	ool	Effective Date of Disso	olution		
			!		
Date of Election, Convention or Caucus	By checking this item, I\We certify that the outstanding debts, including late filing feet the dissolution cannot be granted, that this	s. Further, I/We request that if			
		the Reporting Waiver. Note: The disposition of residual funds mu 1B and the Summary Page.	ist be reported on Schedule		
A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, expe	quired Campaign S		st include all applicable		
Schedules. Direct contributions, in-kind contributions, loans, expe If any of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accompany to before the filing deadline of a required campaign statement, to	nditures, and outsta ed since the inform his Campaign State nat campaign state	anding debts count against the \$1,000 Kept ation was shown on the committee's Stater ment. If a request for a Reporting Walve ement cannot be waived.	orting waiver threshold. ment of Organization, an ir is not received on or		
10. Verification: I\We certify that all reasonable diligence was used my\our knowledge and belief the contents are true, accurate and co					
Current Treasurer or Deb Mexicotte (Formal Mexico (1/21/14					
Designated Record keeper Type or Print Name Signature Date					
Candidate Deb Mexicotte					
Type or Print Name	Signature	Date Date			
· · · · · · · · · · · · · · · · · · ·	77	-			



Page_____of ___

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

2. Committee Name The Committee to Elect Deb Mexicotte

Page.

	ox to indicate if conti	ribution is from a Political		enter last name, first name, ttee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Jeffrey Kuras 605 Miller Rd. Ann Arbor, MI 4	PAC Receipt?	YES 4. Date of	f Recei	pt 10/24/12	_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cum	ulative, please pro				00.1.11	
Occupation Director		Univers	ity of	Michigan	Click Here fo	or Memo Itemization
Business Address 128	Michigan Leag	ue, 911 N. University				
	✓ Direct	Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	f Receir	ot		
					\$	\$
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here fo	r Memo Itemization
Occupation						
Business Address		-				
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date o	of Recei	ipt		
			-		\$	\$
5. If over \$100.00 cum	ulative, please pro	vide:		•	Click Here for	Memo Itemization
Business Address						\$
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of	of Rece	aipt		
					\$	\$
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here for	Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
	-			Page Subtotal	\$150.00	
				and Total of All Schedules 1A	\$150.00	
			(Comp	lete on last page of Schedule)	Enter this total on line 3a of Summary	-



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

C-2003-019 1. Committee I. D. Number

2. Committee Name The Committee to Elect Deb Mexicotte

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Marian Perez		12/22/12	\$ 564.50
Address	Purpose: Graphics/Web Design	Date	the control of the co
33575 Elmira		ere for Memo	Itemization Type
Liwinia, MI 48150	_	CIC IOI WCIIIO	Romizaton Typo
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			\$
Address	Burnage	Date	. •
Address	Purpose:		
	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name			
Address	Purpose:	 Date	\$
	Click He	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name	·		
	-	Date	\$
Address	Purpose:	, 2	:
	Click He	ere for Memo	Itemization Type
e de la companya de	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		1
	statement		
Expenditure #5 Name			
·			\$
Address	Purpose:	Date	
	Click Ho	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		: -
	Subtota	al this page	\$564.50
	Grand Total of all S (Complete on last page		\$564.50

Enter this total on line 8a of **Summary Page**

Page _____ of ___



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

C-2003-019

CANDID	ATE	COMN	MITTEE

The Committee to Elect Deb Mexicotte

CANDIDATE COMMITTEE 2. C	ommittee Name		1110111001	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Chec	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven <u>by</u> the con	nmittee.
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? Yes Owed to or by: Deb Mexicotte	4. Type: Reimbursement 5. Date Debt Was Incurred:	\$		
2660 Yost Blvd.	09/26/12	Ψ		
Ann Arbor, MI 48104		<u> </u>	\$ O	\$_ <u>0</u>
·	6. Original Amount of Debt:	\$		
·	\$ <u>1041.45</u>	\$		FORGIVEN
If bank loan, name of endorser or guarantor:	AMBERT III S FT	Amo	ount Endorsed: \$	·
Debt #2 Corp? Yes Owed to or by: Deb Mexicotte	4. Type: Loan to Campaign 5. Date Debt Was Incurred:	\$		`
2660 Yost Blvd.	10/1/12	<u> </u>		
Ann Arbor, MI 48104	6. Original Amount of Debt:	\$	0 .	\$_0
	\$ 500.00	\$	Ψ	
	¥ <u></u>	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		An	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: Reimbursement	\$		
Deb Mexicotte	5. Date Debt Was Incurred:	\$		
2660 Yost Blvd.	10/4/12	•		ŧ
Ann Arbor, MI 48104	6. Original Amount of Debt:		_{\$_} 0	\$_0
	_{\$} 1041.45	\$		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	
**************************************		Page Subtotal	(Outstanding debt)	\$0.00
(Co	omplete on last page of Schedule s	Grand Total showing amounts owed by c	of all Schedules 1E or to the committee)	\$762.30
	.			Enter this total on line 12a "owed by"" or line 12b
A debt or obligation must be shown on this Schedu this Campaign Statement or it was forgiven during	lle if there was an outstanding a the period covered by this Camp	mount owed on it at the cloaign Statement.	osing date of	"owed to" of the Summary Page

Page _____ of __



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

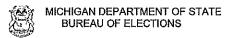
C=2003-019

CANDIDATE COMMITTEE

Page _____ of ____

2. Committee Name The Committee to Elect Deb Mexicotte

CANDIDATE COMMITTEE					
This Schedule itemizes:	•				
a Debts and obligations owed <u>by</u> or forgiven the committee OR b. Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. (Check either a or b. Use only for the purpose checked.)					
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	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt#1 Corp? Yes Owed tolor by: Marian Perez 33575 Elmira	4. Type: Reimbursement 5. Date Debt Was Incurred: 10/15/12	10/19/12 \$ 1,000.00 11/20/12 \$ 500.00 12/22/12 \$ 564.50	·	·	
Livonia, MI 48150	6. Original Amount of Debt:	\$	\$ 2064.50	\$_0 FORGIVEN	
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$		
Debt.#2 Corp? Yes Owed foor by: Deb Mexicotte 2660 Yost Blvd. Ann Arbor, MI 48104	4. Type: Reimbursement 5. Date Debt Was Incurred: 10.17.12 6. Orlginal Amount of Debt: \$ 762.30	\$ \$ \$ \$	\$ <u>0</u>	\$_762.30 FORGIVEN	
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$		
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> :	\$\$ \$ \$ \$	\$	\$FORGIVEN	
if bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_		
		Page Subtotal	(Outstanding debt)	\$762.30	
Grand Total of all Schedules 1E \$762.30 (Complete on last page of Schedule showing amounts owed by or to the committee) 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. Grand Total of all Schedules 1E \$762.30 Enter this total on line 12a "ow by"" or line 12b "owed to" of the Summary Page" of the Summary Page 10 to 10					
				, · · · · · ·	



Page of ____

ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

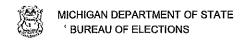
1. Committee I. D. Number <u>C2003019</u>

CANDIDATE COMM	IT	ΓEΘ
----------------	----	-----

2. Committee Name The Committee to Elect Deb Mexicotte

CANDIDATE COMIN			
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: Steven Norton 1217 Olivia Ave. Ann Arbor, MI 48104 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: Okno Design 1217 Olivia Ave. Ann Arbor, MI 48104 Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description 4 months Online Web/Payment Form Service 5. Date Of Receipt: 12/01/12 6. Vendor Name & Address:	119.96 \$	119.96
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:	k Here for Memo Ite	emization
Contribution #3 PAC Receipt? Yes Name & Address:	4.	\$_	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Fund Raiser Contribution	Description 5. Date Of Receipt: 6. Vendor Name & Address:	sk Here for Memo Ite	emization
T dire reases Contribution	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$119.96 In 19.96 Enter this total on line 6 of Sumn	\$119.96

Page



1. Committee I.D. Number <u>C-2003-019</u>

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name The Committee to Elect Deb Mexicotte

3. Contributions a. Itemized (Schedule 1A - Column 6) b. Unlitemized (less than \$20.01 each - no Schedule) c. Subtotal of "Contributions" 4. Other Receipts (Schedule 1A-1, Column 6) 6. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) NNINID CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contibutions (Schedule 1-IK, Column 6) 7. In-Kind Contibutions (Schedule 1B-IK, Column 6) EXPENDITURES 8. Expenditures 8. Expenditures 9. Expenditures 9. Lemized (Schedule 1B, Column 6) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements 10. Disbursements 10. Unlitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 16a + Line 16b) 11. Disbursements 12. Dobs and Obligations 13. Ending Balance of last report filed (Einer zaro if no previous reports have been filed.) 14. Annount received during reporting period (Line 5, Total Contributions & Other Receipts) 13. Ending Balance of last report filed (Einer zaro if no previous reports period (Line 5, Total Contributions & Other Receipts)	CANDIDATE COMMITTEE	2. Committee Name	
3. Contributions a. Itemized (Schedule 1A - Column 6) b. Unliemized (less than \$20.01 each - no Schedule) c. Subtotal of "Contributions" 4. Other Receipts (Schedule 1A -1, Column 6) 6. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) 7. In-Kind Contributions (Schedule 1-IK, Column 6) 6. In-Kind Contributions (Schedule 1-IK, Column 6) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) 6. Expenditures 8. Expenditures 8. Expenditures 8. Expenditures 9. Lemized (Schedule 1B, Column 6) 9. TOTAL EXPENDITURES (All Line 3a + Line 8b + Line 8c) 1 INCIDENTAL EXPENSE DISBURSEMENTS (Officiachiders Cniy) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemized (Schedule 1C, Column 6) b. Unitemized (Schedule 1C, Column 6) c. Unitemize	RECEIPTS		Column II Cumulative this election cycle
b. Uniternized (less than \$20.01 each - no Schedule) c. Subtotal of "Contributions" 3.6.) \$ \$150.00 4. Other Receipts (Schedule 1A-1, Column 6) 4. Other Receipts (Schedule 1A-1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3s + Line 4) W.KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-K, Column 6) EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8b) b. Unitemized (schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) b. Unitemized (schedule 1C, Column 6) c. Unitemized (schedule 1C, Column 6) c. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (10b.) \$ \$0.00 DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) TRAIL RECEIVED (Sched	3. Contributions	•	
c. Subtotal of "Contributions" 4. Other Receipts (Schedule 1A.1, Column 6) 4. Other Receipts (Schedule 1A.1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3e + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) EXPENDITURES 8. Expenditures 8. Expenditures 8. Expenditures 8. Expenditures 9. Itemized (Schedule 1B, Column 6) 10. Itemized (Gest Auther-Vote (Schedule 1B-G) 10. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) 10. Unitemized (less than \$50.01 each - no Schedule) 10. Disbursements 11. ITOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 12. Debts and Obligations 13. Ending Balance of last report filed (Eine zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. Ending Balance of last report filed (Eine zero if no previous reports have been filed.) 14. Amount received during reporting period (16.) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 150.00	-
4. Other Receipts (Schedule 1A -1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3e + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) EXPENDITURES 8. Expenditures a. Iternized (Schedule 1B, Column 6) b. Iternized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8e + Line 8b + Line 8c) 10. Debit Lemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBITS AND OBLICATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Einet zero if no previous reports have been filled.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (5.) \$ \$150.00 (20.) \$ \$3,445.00 (21.) \$ \$1119.96 (21.) \$ \$1119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$2,792.93	b. Unitemized (less than \$20.01 each - no Schedule)		
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-tine-Vote (Schedule 1B-G) c. Unlitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 12. Debts AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Einter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (5.) \$ \$150.00 (20.) \$ \$3119.96 (21.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$119.96 (22.) \$ \$2,792.93	c. Subtotal of "Contributions"		
(Add Line 3c + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-tine-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 12. Debts AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (16.) \$ \$ \$119.96 (21.) \$ \$119.96 (22.) \$ \$ \$119.96 (22.) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$3,295.00
6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) 7. In-Kind Expenditures 8. Expenditures 8. Expenditures 9. Itemized (Schedule 1B, Column 6) 9. Itemized Get-Out-the-Vote (Schedule 1B-G) 9. Out-the-Vote (Schedule 1B-G) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) 1NICIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements 9. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10b) 12. Debts and Obligations 9. Over the Committee (Schedule 1E) 13. Ending Balance of last report filed (Einter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (10. \$ \$11.996 (22.)\$ \$119.96 (22.)\$ \$119.96 (22.)\$ \$119.96 (22.)\$		(5.) \$ \$150.00	(20.) \$ \$3,445.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6) EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Arnount received during reporting period (Line 5, Total Contributions & Other Receipts) (7.) \$ \$0.00 (22.) \$ \$119.96 (23.) \$ \$2,792.93 (23.) \$ \$2,792.93 (23.) \$ \$2,792.93 (23.) \$ \$2,792.93	IN-KIND CONTRIBUTIONS & EXPENDITURES		
EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. Description of the committee (Schedule 1E) 16. Sp. Sp. Ood 17. Sp. Ood 17. Sp. Ood 18. Sp. Ood 18. Sp. Ood 18. Sp. Ood 19. Sp. Ood 19. Sp. Ood 10. Sp. Ood 10. Sp. Ood 10. Sp. Ood 11. Sp. Ood 12. Sp. Ood 12. Sp. Ood 13. Sp. Ood 14. Sp. Ood 14. Sp. Ood 15. Sp. Sp. Ood 16. Sp. Ood 17. Sp. Ood 18. Sp. Ood 18. Sp. Ood 19.	6. In-Kind Contributions (Schedule 1-IK, Column 7)		(21.) \$ \$119.96
8. Expenditures a. Iternized (Schedule 1B, Column 6) b. Iternized Get-Out-the-Vote (Schedule 1B-G) c. Uniternized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Iternized (Schedule 1C, Column 6) b. Uniternized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) (14.) + \$\$150.00 (15.) = \$\$1,279.06	7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$119.96
a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (Iess than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (8a.) \$ \$50.00 (9b.) \$ \$0.00 (10a.) \$ \$0.00 (10b.) \$ \$0.00 (11.) \$ \$0.00 (12a.) \$ \$762.30 (12b.) \$ \$0.00	EXPENDITURES		
b. Itemized Get-Out-the-Vote (Schedule 1B-G) c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) (14.) * \$150.00 (15.) = \$1,129.06 (15.) = \$1,279.06	8. Expenditures		·
c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) 10. Disbursements	a. Itemized (Schedule 1B, Column 6)		_
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) (14.) + \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	_
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (10a.) \$ \$0.00 (10b.) \$ \$0.00 (11.) \$ \$0.00 (12a.) \$ \$762.30 (12a.) \$ \$762.30 (12b.) \$ \$0.00	c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
(Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) (11.) \$ \$0.00 BALANCE STATEMENT 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (15.) = \$ \$1,279.06	9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$564.50</u>	(23.) \$ \$2,792.93
a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (10a.) \$ \$0.00 (11b.) \$ \$0.00 (24.) \$ \$762.30 (12b.) \$ \$0.00			
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) (Line 5, Total Contributions & Other Receipts) (10b.) \$ \$0.00 (12a.) \$ \$762.30 (12b.) \$ \$0.00 BALANCE STATEMENT (13.) \$ \$1,129.06 (14.) + \$ \$150.00 (15.) = \$ \$1,279.06		(10a.)\$ \$0.00	_
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) (Line 5, Total Contributions & Other Receipts) (11.) \$ \$0.00 (12a.) \$ \$762.30 (12b.) \$ \$0.00 (12b.) \$ \$0.00 (13.) \$ \$1,129.06 (14.) + \$ \$150.00 (15.) = \$ \$1,279.06	b. Unitemized (less than \$50.01 each - no Schedule)	(10h) \$ \$0.00	
DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) (12a.) \$ \$762.30 (12b.) \$ \$0.00 BALANCE STATEMENT (13.) \$ \$1,129.06 (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (15.) = \$ \$1,279.06			- (24.)\$ \$762.30
a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) (12a.) \$ \$762.30 (12b.) \$ \$0.00 BALANCE STATEMENT 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (15.) = \$ \$1,279.06			
(12b.) \$ \$\frac{1}{2}\text{DUOUTED}\$ BALANCE STATEMENT 13. Ending Balance of last report filed (13.) \$ \$1,129.06 (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (15.) = \$ \$1,279.06	-	(12a.) \$_\$ 762.30	- :
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) BALANCE STATEMENT (13.) \$ \$1,129.06 (14.) + \$ \$150.00 (15.) = \$ \$1,279.06	b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (14.) + \$ \$150.00 (15.) = \$ \$1,279.06		BALANCE STATEMENT	-
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (15.) = \$\\$1,279.06		(13.) \$ \$1,129.06	
$(15.) = \$ \frac{\$1,279.00}{}$	14. Amount received during reporting period		
	(Line 5, Total Contributions & Other Receipts)	(15.) = \$_\$1,279.06	
ro. Amount expended during reporting period (10.) • # T T T T T	15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ \$564.50	
(Add lines 9 and 11) 17. ENDING BALANCE (17.) \$ \$714.56 *	(Add lines 9 and 11)		*
(Subtract line 16 from line 15)		· · · -	·