Rec'd 1/31/13

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE		
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement co	overs From: 1/27/12 to 12/3//2_
1. Committee I.D. Number	4. Candidate Last I	,
(-2012 -027	Petc	-
2. Committee Name	4a. Office Sought Inc	Albor City Counce / Ward #2
2. Committee Name Committee to Elect	HAN	
Sally Pokerson to City county	4b. County of Reside	
	6. Treasurer's Name	e & Residential Address
Ann Albor, ME 48104		Jane miller
Ann Albor MI Way		160 Watersket W
7111 11111 7 48101		Ann Arbor MI waster
Area Code and Phone 734 996 · 5569		77117
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.	Area Code & Phone	Residential Address Jane Miller No Watershel Dr Ann Arbor ME 48165 313 330 6403
7. Treasurer's Business Address	8. Designated Reco Designated Record	ord keeper's Name and Mailing Address (If the committee has a
	200.9	
A. 0 to 15	A O. d d Dh	
Area Code and Phone 9. TYPE OF STATEMENT	Area Code and Pho	ne
5. THE OF STATEMENT		5/ 2017
9a. Pre-Election OR 9b. Post	-Election 9	c. Annual Statement (<u>2012</u> Coverage Year)
	90	
Pre-Election or Post-Election Statement relates to:		└── or 9e to indicate which Statement is being amended)
Primary		e. Dissolution of Candidate Committee
		Effective Date of Dissolution
Convention	001	
Special Cau	ous _	
· • • • • • • • • • • • • • • • • • • •	la la	y checking this item, IVWe certify that the committee has no assets or utstanding debts, including late filing fees. Further, I/We request that if
Date of Election, Convention or Caucus		ne dissolution cannot be granted, that this be considered a request for ne Reporting Waiver.
		lote: The disposition of residual funds must be reported on Schedule B and the Summary Page.
A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, expe		
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	nditures, and outstand ed since the information	ing debts count against the \$1,000 Reporting Waiver threshold. on was shown on the committee's Statement of Organization, an
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, the	nis Campaign Stateme nat campaign statem	ent. If a request for a Reporting Walver is not received on or lent cannot be walved.
10. Verification: I/We certify that all reasonable diligence was used my/our knowledge and belief the contents are true, accurate and co	in the preparation of the implete.	his statement and attached schedules (if any) and to the best of
Current Treasurer or		1/1/1///
Designated Record keeper	1 00	Date //3///3
Type or Print Name	Signature	
candidate Sarah Hurt Velersen	, Chuft	Mad Reful Date 1/31/13
Type or Print Name	Signature	, ————————————————————————————————————

SUMMARY PAGE CANDIDATE COMMITTEE

1. Committee I.D. Number C-2012-027

2. Committee Name Sally Dokuson to City Cancil

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	00
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$ 13,047.
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(10) 8
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$ 13,047.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		47
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$ 3,681. 47
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	12 533 88
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$ 12,523. 88
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(100,) 4	
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
**************************************	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ <i>523.12</i>	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ <u>523.12</u>	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$	
(Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>523,12</u>	