

## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

Authority Granted under PA 388 of 1976 7/12

www.Michigan.gov/sos

## LATE CONTRIBUTION REPORT

1. Your Committee ID#: C-20/2-027	
2. Your Committee Name: CTE Sally Petersen for City Council	·
3. Date Late Contribution(s) Received: 10/22/20/5 (Only one Date per Sheet)	
<ul> <li>Late Contribution Reports are required when a         <ul> <li>Candidate committee receives a single contribution or a cumulative contribution from the same constitution of the candidate is participating. See Appendix G of the Campaign Finance Manual.</li> <li>A committee other than a candidate committee (PAC, Ballot Question or Political Party) receives a contribution or a cumulative contribution from the same contributor of \$2,500.00 or more after the last campaign statement required and the 3<sup>rd</sup> day before an election. See Appendix G of the Campaign entributions are anything of monetary value including contributions of money, in-kind and loans to the constitute Contribution Reports are not waived by the Reporting Waiver.</li> <li>Late Contribution Reports that are filed late result in the committee receiving a late filing fee. The maximus per report.</li> <li>Paper filers may file the report by any written means (including fax) within 48 hour of receipt of the contribution of Filing Official.</li> <li>Electronic Filers on the state level must file all Late Contribution Report electronically.</li> <li>The Late Contribution must also be reported on the next Campaign Statement owed by the committee.</li> </ul> </li> </ul>	re an election where a single closing date of the aign Finance Manual mmittee. m fee is \$2,000.00
4. Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial and if the contributor is an individual, the Occupation, Employer and Business address of the contributor.	5. Amount
Contributor Name and Address:  Rachel Bendit 2002 Scoffwood Ave  Ann Arbir, MI 48/04  (If Individual, also provide:) Occupation Staff Employer / Business Address Zingurmans Ann Arbor, MI 48/04	\$500
Contributor Name and Address:	
(If Individual, also provide:) Occupation Employer / Business Address	WASHTENAN
Contributor Name and Address:	CO
(If Individual, also provide:) Occupation Employer / Business Address	ED WIY, MI
Contributor Name and Address:	
(If Individual, also provide:) Occupation Employer / Business Address	