



FILED
WASHTENAW COUNTY MI



C-2004-0010011

**CANDIDATE COMMITTEE
COVER PAGE**

2007 JAN 31 P 3: 20

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 covers From: 01/01/2006 To: 12/31/2006
Mo Day Year Mo Day Year

1. Committee I.D. Number
200400-1

2. Committee Name
Lawrence Kestenbaum for Clerk Register

4. Candidate Last Name Kestenbaum First Name Lawrence M.I.
4a. Office Sought Including District # or Community Served (If applicable)
Clerk-Register Washtenaw County
4b. County of Residence Washtenaw Driver License # (Optional)

5. Committee's Mailing Address
P. O. Box 2563
Ann Arbor MI 48106
Area Code and Phone (734) 769-7388

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
Denise Wilmarth
2850 Elmwood
Ann Arbor MI 48104
Area code & Phone (734) 971-2865
Driver License # (Optional)

7. Treasurer's Business Address
152 Main St.
Belleville MI 48111
Area Code and Phone (734) 697-8000

8. Designated Recordkeeper's Name and Mailing Address (If the committee has a Designated Recordkeeper)
Denise Wilmarth
2850 Elmwood
Ann Arbor MI 48104
Area Code and Phone (734) 971-2865
Driver License # (Optional)

9. TYPE OF STATEMENT

9a. Pre-Election OR 9b. Post-Election

Pre-Election or Post-Election Statement relates to:

Primary General
 Convention School
 Special Caucus

Date of Election, Convention or Caucus

Month Day Year

9c. Annual Statement (2006 Coverage Year)

9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. Dissolution of Candidate Committee
Effective Date of Dissolution

Mon Day Year

By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. **If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.**

10. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Recordkeeper Denise Wilmarth Signature [Signature] Date 01/31/2007
Type or Print Name Signature Mo Day Year

Candidate Lawrence Kestenbaum Signature [Signature] Date 01/31/2007
Type or Print Name Signature Mo Day Year

Authority granted under P.A. 388 of 1976



**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>3435.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>3435.00</u>	(18.) \$ <u>4135.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>12.31</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>3435.00</u>	(20.) \$ <u>4147.31</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</u>	(21.) \$ <u>0.00</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>3560.20</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>3560.20</u>	(23.) \$ <u>4017.95</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>13317.10</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>254.56</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + <u>3435.00</u>	
	(15.) = <u>3689.56</u>	
15. SUBTOTAL Add Lines 13 and 14		
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - <u>3560.20</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>129.36</u> *	

NOTE: Direct contributions, in-Kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.
All required schedules must be included with this statement. *If your ending balance is negative, please recheck your math.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1

2. Committee Name Lawrence Kestenbaum for Clerk Register

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>1</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>B. L. Bergman</u> Address: <u>2045 Geddes Ave.</u> <u>Ann Arbor MI 48104</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	100.00	100.00
3. Contribution # <u>2</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Sarah Curmi</u> Address: <u>5782 Huntington Dr.</u> <u>Ypsilanti MI 48197</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	50.00	50.00
3. Contribution # <u>3</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>James Dries</u> Address: <u>3840 Michael Rd. N</u> <u>Ann Arbor MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Chief Deputy Clerk-Register</u> Employer <u>Washtenaw County</u> Business Address <u>220 N. Main St.</u> <u>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	200.00	200.00
3. Contribution # <u>4</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Peter Eckstein</u> Address: <u>2551 Lononderry Rd.</u> <u>Ann Arbor MI 48104</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	50.00	50.00
Page Subtotal	400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1

2. Committee Name Lawrence Kestenbaum for Clerk Register

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3. Contribution # <u>5</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Cheryl Farmer Address: 214 N. Huron St. Ypsilanti MI 48197 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	50.00	50.00
3. Contribution # <u>6</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Leah Gunn Address: 1308 E. Stadium Ann Arbor MI 48104 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	100.00	100.00
3. Contribution # <u>7</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Gregory Hebert Address: 2058 Ascot Ann Arbor MI 48103 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	50.00	50.00
3. Contribution # <u>8</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Alfred Hegerich Address: 5195 Pontiac Trail Ann Arbor MI 48105 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	50.00	50.00
Page Subtotal	250.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



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SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>9</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Michael Homel Address: 3473 Wooddale Ct. Ann Arbor MI 48104 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	50.00	50.00
3. Contribution # <u>10</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Derrick Jackson Address: 1427 Glengrove Ave. Ypsilanti MI 48198 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	50.00	50.00
3. Contribution # <u>11</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Ruth Ann Jamnick Address: 7776 Lake Crest Dr. Ypsilanti MI 48197 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	50.00	50.00
3. Contribution # <u>12</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Frieda Hubert Jardim Address: 2007 Delafield Dr. Ann Arbor MI 48105 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	25.00	25.00
Page Subtotal	175.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
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3. Contribution # <u>13</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Robert June Address: 8205 Starling Ct. Ypsilanti MI 48197 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	50.00	50.00
3. Contribution # <u>14</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Richard Kato Address: 424 Little Lake Dr. Apt. 22 Ann Arbor MI 48103 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	25.00	25.00
3. Contribution # <u>15</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Ralph Katz Address: 605 Skydale Ann Arbor MI 48105 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	50.00	50.00
3. Contribution # <u>16</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: Martha Kern Address: 1659 Sheffield Ypsilanti MI 48198 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	50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	175.00	

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3. Contribution # <u>17</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Lawrence Kestenbaum</u> Address: <u>1726 W. Stadium Blvd.</u> <u>Ann Arbor MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Clerk Register</u> Employer <u>Washtenaw County</u> Business <u>220 N. Main St.</u> Address <u>Ann Arbor MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	200.00	200.00
3. Contribution # <u>18</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Dores McCree</u> Address: <u>3672 Wellington Cross</u> <u>Ann Arbor MI 48105</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	25.00	25.00
3. Contribution # <u>19</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Samuel Offen</u> Address: <u>1911 Boulder</u> <u>Ann Arbor MI 48104</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	100.00	100.00
3. Contribution # <u>20</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Eleanor Ostafin</u> Address: <u>2007 Delafield</u> <u>Ann Arbor MI 48105</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	25.00	25.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	350.00	

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3. Contribution # <u>21</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>David Ostrowski</u> Address: <u>971 S. Grove</u> <u>Ypsilanti MI 48198</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	50.00	50.00
3. Contribution # <u>22</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Pam Byrnes for State Rep</u> Address: <u>7412 Black Forest Dr.</u> <u>Dexter MI 48130</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	50.00	50.00
3. Contribution # <u>23</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Steve Pierce</u> Address: <u>118 S. Washington St.</u> <u>Ypsilanti MI 48197</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	50.00	50.00
3. Contribution # <u>24</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Lloyd Powell</u> Address: <u>P. O. Box 7722</u> <u>Ann Arbor MI 48107</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	100.00	100.00
Page Subtotal	250.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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3. Contribution # <u>25</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Lynn Rivers</u> Address: <u>518 2nd St.</u> <u>Ann Arbor MI 48103</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Instructor</u> Employer <u>Washtenaw Comm College</u> Business <u>4800 E. Huron River Dr.</u> Address <u>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	500.00	500.00
3. Contribution # <u>26</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>M. Douglas Scott, Jr</u> Address: <u>1525 Harding Rd.</u> <u>Ann Arbor MI 48104</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	50.00	50.00
3. Contribution # <u>27</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Marilyn Scott</u> Address: <u>2705 Provincial Dr.</u> <u>Ann Arbor MI 48104</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	25.00	25.00
3. Contribution # <u>28</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Joseph Spiegel</u> Address: <u>825 Victors Way</u> <u>Suite 300</u> <u>Ann Arbor MI 48108</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self Employed</u> Business _____ Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	200.00	200.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	775.00	

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3. Contribution # <u>29</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Rebeka Warren</u> Address: <u>234 8th St.</u> <u>Ann Arbor MI 48103</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	50.00	50.00
3. Contribution # <u>30</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/20/2006</u> Name: <u>Susan Wineberg</u> Address: <u>712 E. Ann St.</u> <u>Ann Arbor MI 48104</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	25.00	25.00
3. Contribution # <u>31</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/21/2006</u> Name: <u>John Dingell for Congress Comm</u> Address: <u>607-14th St., NW</u> <u>Suite 800</u> <u>Washington DC 20005</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	100.00	100.00
3. Contribution # <u>32</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/21/2006</u> Name: <u>Douglas Kelley</u> Address: <u>910 Sunset Rd.</u> <u>Ann Arbor MI 48103</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	25.00	25.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	200.00	

Enter this total on
line 3a of
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**ITEMIZED CONTRIBUTIONS
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2. Committee Name Lawrence Kestenbaum for Clerk Register

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>33</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/21/2006</u> Name: Wendy Lawrence Address: 2740 Laurell Hill Rd. Ann Arbor MI 48103 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	50.00	50.00
3. Contribution # <u>34</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/23/2006</u> Name: Stuart Karabenick Address: 2535 Gladstone Ann Arbor MI 48104 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	25.00	25.00
3. Contribution # <u>35</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/24/2006</u> Name: Lawrence Yonovitz Address: 2105 Ridge Ave. Ann Arbor MI 48104-6383 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	100.00	100.00
3. Contribution # <u>36</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/25/2006</u> Name: Janis Ann Bobrin Address: 407 Keech Ann Arbor MI 48103 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	50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	225.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>37</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/26/2006</u> Name: <u>George Schwartz</u> Address: <u>19450 Waterloo Rd.</u> <u>Chelsea MI 48118</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	50.00	50.00
3. Contribution # <u>38</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/02/2006</u> Name: <u>Gwen Nystuen</u> Address: <u>1016 Olivia</u> <u>Ann Arbor MI 48104</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	50.00	50.00
3. Contribution # <u>39</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/04/2006</u> Name: <u>Peter Fletcher</u> Address: <u>25 S. Huron St.</u> <u>Ypsilanti MI 48197</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Credit Bureau of Ypsilanti</u> Business Address <u>25 S. Huron</u> <u>Ypsilanti MI 48197</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	200.00	200.00
3. Contribution # <u>40</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/07/2006</u> Name: <u>Mary Stadel</u> Address: <u>5245 E. Timrod St.</u> <u>Tucson AZ 85711</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	25.00	25.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	325.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>41</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/16/2006</u> Name: <u>Jane Barney</u> Address: <u>423 W. Liberty</u> <u>Ann Arbor MI 48103</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	25.00	25.00
3. Contribution # <u>42</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/29/2006</u> Name: <u>Jean Carlberg</u> Address: <u>1902 Independence</u> <u>Ann Arbor MI 48104</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	50.00	50.00
3. Contribution # <u>43</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/31/2006</u> Name: <u>C.F. Gray</u> Address: <u>6095 Lake Dr.</u> <u>#348</u> <u>Ypsilanti MI 48197</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	50.00	50.00
3. Contribution # <u>44</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/23/2006</u> Name: <u>Nancy Francis</u> Address: <u>1101 Mixtwood Rd.</u> <u>Ann Arbor MI 48103</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	100.00	100.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	225.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 45 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/06/2006</u> Name: Terry Adams Address: P. O. Box 7373 Ann Arbor MI 48107 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	20.00	20.00
3. Contribution # 46 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/28/2006</u> Name: Heidi Herrell Address: 2896 Sharon Dr. Ann Arbor MI 48108 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	25.00	25.00
3. Contribution # 47 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/2006</u> Name: Kristin Mahler Address: 1442 Pontiac Trail Ann Arbor MI 48105 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	40.00	40.00

Page Subtotal	85.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	3435.00

Enter this total on
line 3a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 1 Name: Manatee Graphic Design Address: 840 S. Clark Rd. Dansville MI 48819 <input type="checkbox"/> Fund Raiser	Purpose: <u>Graphic Deisgns</u> Expenditure Code <u>OE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	02/03/2006	125.00
Expenditure # 2 Name: Partners Press Address: 1958 S. Industrial Suite C Ann Arbor MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Letterhead, envelopes</u> Expenditure Code <u>OE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	02/20/2006	677.34
Expenditure # 3 Name: Unit Packaging Address: 119 Enterprise Dr. Ann Arbor MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailing</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	02/20/2006	617.91
Expenditure # 4 Name: HDL Address: 118 S. Washington Ypsilanti MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Web Service</u> Expenditure Code <u>CO</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/23/2006	99.95
Expenditure # 5 Name: Lawrence Kestenbaum Address: 1726 W. Stadium Blvd. Ann Arbor MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Repayment of Loan</u> Expenditure Code <u>LO</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	05/15/2006	1000.00
Subtotal this page			2520.20
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1

2. Committee Name Lawrence Kestenbaum for Clerk Register

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 6 Name: Washtenaw Co. Dem Party Address: P. O. Box 3951 Ann Arbor MI 48106-3951 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	06/29/2006	300.00
Expenditure # 7 Name: Lawrence Kestenbaum Address: 1726 W. Stadium Blvd. Ann Arbor MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Repayment of Loan</u> Expenditure Code <u>LO</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/26/2006	300.00
Expenditure # 8 Name: Lawrence Kestenbaum Address: 1726 W. Stadium Blvd. Ann Arbor MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Repayment of Loan</u> Expenditure Code <u>LO</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/26/2006	200.00
Expenditure # 9 Name: Ypsilanti American Legion Address: 117 S. Huron St. Ypsilanti MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/26/2006	240.00

Subtotal this page	1040.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	3560.20
Enter this total on line 8a of Summary Page	



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

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

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 (Indicate type and you may assign an expenditure code) 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: Lawrence Kestenbaum 1726 W. Stadium Blvd. Ann Arbor MI 48103	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>02/20/2006</u> 6. <u>Original Amount of Debt:</u> \$ <u>200.00</u>	\$ _____ \$ _____ \$ _____ \$ _____	0.00	200.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt # 2 Corp? <input checked="" type="checkbox"/> Yes Owed to or by: Practical Political Consulting P. O. Box 6249 East Lansing MI 48826	4. Type: <u>Mailing List</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>03/08/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>439.00</u>	\$ _____ \$ _____ \$ _____ \$ _____	0.00	439.00 <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: Lawrence Kestenbaum 1726 W. Stadium Blvd. Ann Arbor MI 48103	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>04/30/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>300.00</u>	<u>10/26/2006</u> \$ <u>300.00</u> \$ _____ \$ _____ \$ _____	300.00	0.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

639.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee.)

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

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.

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



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

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

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 (Indicate type and you may assign an expenditure code) 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 # 4 Corp? <input type="checkbox"/> Yes Owed to or by: Lawrence Kestenbaum 1726 W. Stadium Blvd. Ann Arbor MI 48103 If bank loan, name of endorser or guarantor: _____	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>07/11/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>1000.00</u>	<u>05/15/2006</u> \$ <u>1000.00</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	1000.00	0.00 <input type="checkbox"/> FORGIVEN Amount Endorsed: \$ _____
Debt # 5 Corp? <input type="checkbox"/> Yes Owed to or by: Lawrence Kestenbaum 1726 W. Stadium Blvd. Ann Arbor MI 48103 If bank loan, name of endorser or guarantor: _____	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>10/02/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>1000.00</u>	<u>10/26/2006</u> \$ <u>200.00</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	200.00	800.00 <input type="checkbox"/> FORGIVEN Amount Endorsed: \$ _____
Debt # 6 Corp? <input type="checkbox"/> Yes Owed to or by: Lawrence Kestenbaum 1726 W. Stadium Blvd. Ann Arbor MI 48103 If bank loan, name of endorser or guarantor: _____	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>10/27/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>1822.14</u>	_____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	0.00	1822.14 <input type="checkbox"/> FORGIVEN Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

2622.14

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee.)

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

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.

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



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

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

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 (Indicate type and you may assign an expenditure code) 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 # 7 Corp? <input type="checkbox"/> Yes Owed to or by: Lawrence Kestenbaum 1726 W. Stadium Blvd. Ann Arbor MI 48103	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>10/27/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>9000.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	0.00	9000.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt # 8 Corp? <input checked="" type="checkbox"/> Yes Owed to or by: Practical Political Consulting P. O. Box 6249 East Lansing MI 48826	4. Type: <u>Mailing List</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>12/20/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>698.30</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	0.00	698.30 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt # 9 Corp? <input checked="" type="checkbox"/> Yes Owed to or by: Practical Political Consulting P. O. Box 6249 East Lansing MI 48826	4. Type: <u>Mailing List</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>12/20/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>357.66</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	0.00	357.66 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

10055.96

Grand Total of all Schedules 1E

13317.10

(Complete on last page of Schedule showing amounts owed by or to the committee.)

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

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.

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



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1
2. Committee Name Lawrence Kestenbaum for Clerk Register

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>02/20/2006</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) <p style="text-align: center;">38</p>	5. Type of Fund Raising Activity <p style="text-align: center;">2006 Presidents Day</p>	6. Address and Name (If any) of the place where the activity was held Al & Mary Hegerich 5195 Pontiac Trail Ann Arbor MI 48105 <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions of \$20.00 or less 0.00

8. Total Contributions of \$20.01 or more 2700.00

9. SUBTOTAL (Add lines 7 and 8) 2700.00

10. Other Receipts 0.00

11. Gross Receipts (Add lines 9 and 10) 2700.00

12. Total Cost of Event* 1295.25 ~~0.00~~

*Includes In-Kind Contributions and All Expenditures Made For the Event

13. 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.