COVER PAGE

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 covers From: 2/3/2010 to
1. Committee LD. Number	4. Candidate Last Name First Name M.I.
C-2010-008	Lesko, Patricia D. DL#LZ0067643103
2. Committee Name	4a. Office Sought Including District # or Community Served (If applicable)
Committe to Elect Patricia Lesko	Mayor of Ann Arbor, MI
	4b. County of Residence Washtenaw
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address
817 Brookside Drive	Marjorie W. Lesko
Ann Arbor, M1 48105	819 Brookside Dr.
Area Code and Phone <u> </u>	Ann Arbor, MI 48105
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 7347418195
7. Treasurer's Business Address	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
817 Brookside Dr.	
Ann Arbor, MI 48105	
/ () / (()	
	₩ 23 4
Area Code and Phone 134 930 6854	Area Code and Phone
9. TYPE OF STATEMENT	99 53
9a. Pre-Election OR 9b. Post-	Election 9c. Annual Statement (Coverage Year)
Post-	
Pre-Election or Post-Election Statement relates to:	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
Primary	9e. Dissolution of Candidate Committee
Convention	ol Effective Date of Dissolution
Special Cauci	By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if
Date of Election, Convention or Caucus	the dissolution cannot be granted, that this be considered a request for
August 3, 2010	the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule
	1B and the Summary Page.
A committee that does not have a Reporting Walver must file all req Schedules. Direct contributions, in-kind contributions, loans, expent	uired Campaign Statements. The Campaign Statements must include all applicable ditures, 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 amendment to the Statement of Organization should accompany this before the filing deadline of a required campaign statement, that	d since the information was shown on the committee's Statement of Organization, an s Campaign Statement. If a request for a Reporting Waiver is not received on or t campaign statement cannot be waived.
0. Verification: IWe certify that all reasonable diligence was used in	the preparation of this statement and attached schedules (if any) and to the best of applete.
	1/1 s
Designated Record keeper Transport W LESKO /	Date 7/20/10
Type of Print Name	Signature
candidate Tatricia D Lesko	[atura] (28/10 Date 7/20/10
Type or Print Name	Signature

1. Committee I.D. Number <u>C - 2010 - 608</u>

SUMMARY PAGE ANDIDATE COMMITTEE

CANDIDATE COMMITTEE	2. Committee Name COMMITTEE (C Dicer participal
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	-	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 5493.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ <u>5493.00</u>	(18.)\$ 5493.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$56.00	(19.)\$ 56.06
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 5543.00	(20.) \$ 5543.00
IN-KIND CONTRIBUTIONS & EXPENDITURES	0	0101-0
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>813.77</u>	(21.)\$ 813.72
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 5036.34	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ 304.69	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 5341.03	(23.) \$ 5341.03
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)		
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations	\	
a. Owed by the Committee (Schedule 1E)	(12a.)\$ 1525.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	· · · · · · · · · · · · · · · · · · ·
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ 6.00	
14. Amount received during reporting period	(14.)+ \$ <u>5543.60</u>	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ <u>5543.60</u>	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	5341 A7	
(Add lines 9 and 11)	(16.) - \$	
17. ÈNDING BALANCÉ	(17.) \$ 201.9 *	:
(Subtract line 16 from line 15)		

CANDIDATE COMMITTEE

line 3a of Summary

Page.

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/10/10 Name & Address: Shirley Zempel 434 4th Ave Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation Employer	s 100.00 Click Here fo	s ↓ OO co o
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/15/10 Name & Address		
Anna Ercoli Schnitzer 315 2nd St., Apt 412 Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide:	\$ 50.00 Click Here for	\$ 50.00
OccupationEmployer Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/06/10 Name & Address:		
Janelle Baranowski 2213 Dexter Ave Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 25.00 Click Here for	* <u> </u>
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 2. Lull O		
Name & Address Rita Loch Caruso 556 Glendale Circle Ann Arbor, MI 48103	<u>\$150.00</u>	<u>\$150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation Ord Fessor Employer Univ of Mich Ann Arbo School of Public Health, 1420 Washington Hts, Ann A Type of Contribution: Direct Loan from a person Fund Raiser	<i>y</i>	Memo Itemization
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 325.00	

CANDIDATE COMMITTEE

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.	e, 6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 04/07/10 Name & Address:		
Ethel K. Potts 1014 Elder Blvd. Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	\$ 50.00
Occupation Employer	Click Here for	or Memo Itemization
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/07/10 Name & Address		
Paul L. Bancel 1115 Kuehnle Blvd. Ann Arbor, MI 48103	_{\$} 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		Andreas
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/12/10 Name & Address:		
Sandra Helman 452 Sherman Canal Venice, CA 90291	\$ 100.00	\$ 00.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Remizadon
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 04/12/10 Name & Address		
Katheryn A. Boris P.O. Box 8117 Ann Arbor, MI 48107	_{\$} 50.00	\$ 50.60
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		Wello Remization
Business Address		
Type of Contribution:		
Page Subto Grand Total of All Schedules (Complete on last page of Schedules) Page 2 of 13	1A	

ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

Enter contributor's name and address. If middle initial. Check box to indicate if co Committee (PAC) Report <u>all</u> contribution:	ntribution is from a F	Political Comm		6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt	? YES 4.	Date of Rece	eipt 04/15/10		De Maria de Barros de la comerción de la como 1960, de la 1960
Name & Address: Dr. Elizabeth Erwin					
420 Bloomfield Ave				E0 00	F 2 00
Montclair, NJ 07042				_{\$} 50.00	\$ 50.00
5. If over \$100.00 cumulative, please p	rovide:			Click Horo fo	or Memo Itemization
Occupation	Employer			Click Here II	or werno itemization
Business Address	44444				
Type of Contribution: 🗸 Direct	Loan from a p	erson	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4.	Date of Rece	ipt 04/15/10		
Julie Blackman				25.00	
153 Lloyd Road				_{\$} 25.00	\$ 25.00
Montclair, NJ 07042					
5. If over \$100.00 cumulative, please pr				Click Here to	or Memo Itemization
Occupation	Employer				
Business Address					
Type of Contribution:	Loan from a po	erson	Fund Raiser		-
3. Contribution #3 PAC Receipt? Name & Address:	YES 4.	Date of Rece	eipt 04/15/10		
Dr. John Marx				_s 100.00	10000
4689 Wendrick Drive				\$ 100.00	\$ 00.00
West Bloomfield, MI 48323				Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please pr	ovide:			0.000000	Thomas normal
Occupation	Employer	· ·			
Business Address			<u> </u>		
Type of Contribution: Direct	Loan from a p		Fund Raiser		
3. Contribution #4 PAC Receipt? Name & Address	YES 4	. Date of Rec	eipt 04/15/10		
Karen Larson				25.00	0 - 00
1737 Tudor Drive Ann Arbor, MI 48103				§ 25.00	\$ 25.00
5. If over \$100.00 cumulative, please pr	ovide:				
Occupation	Employer _			Click Here for	Memo Itemization
Business Address					
Type of Contribution: Direct	Loan from a p	erson	Fund Raiser		
			Page Subtotal	\$200.00	
		C.	and Total of All Schedules 1A	+	-
			plete on last page of Schedule)	Enter this total on]
Page 3 of 13				line 3a of Summary Page.	
· ~3~ ~ ~ ~				-	

ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

Enter contributor's name and address. If o middle initial. Check box to indicate if cont Committee (PAC) Report <u>all</u> contributions	ribution is from a Political (me, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of	Receipt <u>04/15/10</u>		
Frances Blackman 176 Kennedy Ct. Paramus, NJ 07652			_{\$} 25.00	\$ 25.00
5. If over \$100.00 cumulative, please pro	vide:		Click Here fo	or Memo Itemization
Occupation	Employer			n wente termzation
Business Address			_	
Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? Name & Address	YES 4. Date of	Receipt <u>04/16/10</u>		
Gerald M. Wolberg 29350 Southfield Road Southfield, MI 48076			_{\$} 75.00	\$ 75.00
5. If over \$100.00 cumulative, please pro	vide:		Click Here fo	r Memo Itemization
Occupation	Employer			
Business Address			_	
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? Name & Address:	YES 4. Date of	Receipt 04/17/10		
Raymond Fullerton 505 E. Huron St., Apt 606 Ann Arbor, MI 48104			§ 20.00	<u>\$ 20.00</u>
5. If over \$100.00 cumulative, please pro	vide:		Click Here for	Memo Itemization
Occupation	Employer		_	
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser	-	
3. Contribution #4 PAC Receipt? Name & Address She 1/4 W. Pont	YES 4. Date o	Receipt 4/19/10		
945 Linden A Oak Park, I			\$ 118.00	s 118.00
5. If over \$100.00 cumulative, please pro			Cliak Hara for	Momo (tomization
Occupation Home Maker	_ Employer		—— Click nere for	Memo Itemization
Business Address/				
Type of Contribution: Direct	Loan from a person	Fund Raiser		Austrace
<u> 11. julija - Para Julija yn 1900 (1900) (1</u>	<u> 1988 - Park II. Johnson (m. 1988)</u>	Page Su	ubtotal \$238,00	
	,	Grand Total of All Schedule	es 1A	
Page 4_ of 13_	(Complete on last page of Scho	Enter this total on line 3a of Summary Page.	-

CANDIDATE COMMITTEE

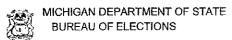
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 04/19/10		
Name & Address: Gerald S. Cook		
30348 Windingbrook Lane	36 00	¢ 36.00
Farmington Hills, MI 48334	_{\$} 36.00	\$ 30.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	Chorenteen	or worne normation
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/16/10 Name & Address		
Sandra Foulke	E0.00	FO 00
1606 Waltham Drive	_{\$} 50.00	_{\$} 50.00
Ann Arbor, MI 48103		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: ☐ Loan from a person ☐ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/17/10 Name & Address:		
Jefferey Sabatini	50.00	F0.00
1706 Jackson Ave.	§ 50.00	_{\$} 50.00
Ann Arbor, MI 48103	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:	Choic Flore for	World Romaducti
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	and the second of the second o	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 04/17/10 Name & Address		
Noreen Winkelman	100.00	100.00
3759 Northampton Street	§ 180.00	_{\$_} 180.00
Washington, DC 20015 5. If over \$100.00 cumulative, please provide:		
	Click Here for	Memo Itemization
Occupation Social Worker Employer unemployed		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$316.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule)	Enter this total on	J
$P_{\text{age}} = 5$ of $\sqrt{3}$	line 3a of Summary Page.	

ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

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 <u>all</u> contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address: Eleyne Levitt 787 Skyknob Drive		
Ann Arbor, MI 48105	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:	Click Horo fo	or Memo Itemization
Occupation Employer	Click Here it	or Memo itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address		
Peggy Rabhi 1991 Upland Drive	_{\$} _20.00	_{\$} 20.00
Ann Arbor, MI 48105	Oliale Lieve fe	
5. If over \$100.00 cumulative, please provide:	Click Here to	r Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: ✓Direct Loan from a person ✓ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address:		
Karen Sidney	50 00	50.00
100 Longman	\$ 50.00	_{\$} 50.00
Ann Arbor, Mt 48103	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address		
Joseph Machak 3665 Fox Hunt Drive Ann Arbor, MI 48105	_{\$} 50.00	_{\$} 50.00
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		
Page Subtotal	\$140.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	3
Page of 13.	Page.	

CANDIDATE COMMITTEE

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address: Samuel DeMarco		
3172 Edgewood Drive Ann Arbor, MI 48104	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Cliak Hara fo	or Memo Itemization
Occupation Employer	Click Here to	n wemo temization
Business Address		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address		
Kathleen Clark 549 S. First St.	_{\$} 150.00	_{\$} 150.00
Ann Arbor, MI 48103		
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Owner Employer First Street Garden Inh		
Business Address 549 S. First St, Ann Arbor MI 48103		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address:		
John Floyd, III	_s 100.00	100.00
519 Sunset Road	\$ 100.00	_{\$} 100.00
Ann Arbor, MI 48103	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
	kannan kannan menengan dian kannan kan	and the control of th
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address		
Christine Willacker	100.00	400.00
709 Barton Drive Ann arbor, MI 48105	_{\$} 100.00	_{\$} 100.00
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	\$400.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule) ¹	Enter this total on	ı
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ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address:		
Susan Schmitt-Creech 3075 Hunting Valley Ann Arbor, MI 48104	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Click Liona f	or Memo Itemization
Occupation Employer	Click nere i	or Menio Remization
Business Address		1
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address		
Douglas White 330 S. Seventh Street Ann Arbor, MI 48103	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address:		
Charles Lewis 330 S. Seventh Street	_{\$} 50.00	§ 50.00
Ann Arbor, MI 48103	Click Here fo	r Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address	-	
Mary Barnett 428 East Shore Drive Whitmore Lake, MI 48189	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer	•	
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtot	al \$200.00	
Grand Total of All Schedules 1/ (Complete on last page of Schedule	A ()	
Page $\frac{8}{9}$ of $\frac{13}{3}$	Enter this total on line 3a of Summary Page.	,

CANDIDATE COMMITTEE

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address: Odile Hugonot Haber 531 Third St.	¢30.00	° 30.00
Ann Arbor, MI 48103	\$_ 00.00	\$ 00.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	(C) 2011	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/18/10 Name & Address		
Charles Hamilton Loucks 2957 Leslie Park Circle Ann Arbor, MI 48105	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/21/10 Name & Address:		
Betsy Winkelman 3132 Shadydale Lane West Bloomfield, MI 48323	\$ 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide: Occupation RHIVE Employer	Click Here for	r Memo Itemization
Business Address Type of Contribution:		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 04/24/10 Name & Address		
Barbara Roether 4928 Dorla Drive Ann Arbor, MI 48108	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide:	Click Horo for	r Memo Itemization
Occupation Employer	Click Here loi	Wellio Remization
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page O of	\$280.00 Enter this total on line 3a of Summary Page.	

 $\mathsf{Page} \underline{10}_{\mathsf{of}} \underline{13}_{\mathsf{of}}$

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

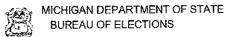
line 3a of Summary

Page.

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.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/26/10 Name & Address: Herbert Pfabe, Jr.	<u> </u>	date of receipt)
611 Westwood Ave. Ann Arbor, MI 48103	_{\$} 20.00	_{\$} 20.00
If over \$100.00 cumulative, please provide: Occupation Employer	Click Here fo	or Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4/30/10 Name & Address Kent W. Burkhart 4091/2 N. Fourth Ave Ann Arbor, MI 481041	\$ 99.00	<u>\$ 99.00</u>
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/10/10 Scott Newell 255 Sonset Rd Ann Arbor, M: 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 100.60 Click Here for	\$
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5/14/18 Name & Address The Peaceable Kingdom, LLC 210 S Alain Ann Arbor, M, 48104 5. If over \$100.00 cumulative, please provide: Occupation Not Incorporated Employer Business Address		\$\left \left \
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$319.00	

CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Commonwell (PAC) Report all contributions regardless of amount.	enter last name, first name, ittee or an Independent	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
 Contribution # 1 PAC Receipt? YES 4. Date of Receipt Name & Address: 	ipt 05/24/10		
Inspire Ann Arbor Leadership PAC 817 Brookside Drive Ann Arbor, MI 48105		_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		Click Here fo	or Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: 🗸 Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt. Name & Address	pt 05/24/10		
Robert Roether 8283 N. Telegraph Road Dearborn Hghts, MI 48127		_{\$} 50.00	§ 50.00
5. If over \$100.00 cumulative, please provide:		Click Here fo	r Memo Itemization
OccupationEmployer			
Business Address			
Type of Contribution:	Fund Raiser		
Contribution #3 PAC Receipt? YES 4. Date of Receipt Name & Address:	of 06/05/10		
Hatim Elhady 19939 Concord Detroit, MI 48234		\$ 100	<u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address	<u> </u>		
Type of Contribution: V Direct Loan from a person	Fund Raiser		<u>a la francia de la companya de la c</u>
Contribution # 4 PAC Receipt? YES 4. Date of Rec Name & Address	eipt 06/20/10		
Letitia Shapiro 1706 Packard St. Ann Arbor, MI 48104		_{\$} 100	_{\$_} 100
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer		Onoix Flore For	Monto Romazanon
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal	\$750.00	
	rand Total of All Schedules 1A plete on last page of Schedule)	Enter this total on	
Page $\frac{1}{\sqrt{3}}$ of $\frac{1}{\sqrt{3}}$		line 3a of Summary Page.	



CANDIDATE COMMITTEE

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.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution #1 PAC Receipt? YES Name & Address: Virginia Simon	4. Date of Recei	pt <u>06/09/10</u>		
830 W. Washington St.			, 25.00	_{\$} 25.00
Ann Arbor, MI 48103			Ψ	
If over \$100.00 cumulative, please provide: Occupation Empl	oyer		Click Here fo	r Memo Itemization
	oyei			
Business Address Type of Contribution: ✓ Direct Loan	n from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES	4. Date of Recei			
Name & Address	- Date of (1995)	03/01/10		
Marian Williams			_s 100.00	_s 100.00
1836 Saxon St. Ann arbor, MI 48103			\$	\$ 100.00
5. If over \$100.00 cumulative, please provide:			Click Here for	r Memo Itemization
	er			
0000000011				
Business Address	from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? YES		ipt 06/08/10		
Name & Address:		00/00/10		
Gavin R. Eadie			_{\$} 25.00	_s 25.00
507 Second St. Ann Arbor, MI 48103			<u> </u>	\$
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation Emplo	over			
Business Address	-			
	n from a person	Fund Raiser		
Contribution # 4 PAC Receipt? YE Name & Address	S 4. Date of Rece	eipt <u>07/17/10</u>		
John E. Eaton			050.00	050.00
1606 Dicken Drive			_{\$} 250.00	<u>\$_250.00</u>
Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide:				
·	nployer Mark H. Co	ousens	Click Here for	Memo Itemization
Business Address 26261 Evergreen Rd.	Suite 110, Sout	hfield, MI 48076		
Type of Contribution: Direct Loa	n from a person	Fund Raiser		
		Page Subtotal	\$400.00	_
		and Total of All Schedules 1A		
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$_{\rm post}$ 12 $_{\rm c}$ $^{\prime}$			line 3a of Summary Page.	

Page 13 of 13

ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

line 3a of Summary

Page.

CANDIDATE COMMITTEE

	ox to indicate if con	tribution is from	a Political Com	l, enter last name, first name, mittee or an independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt?	YES	4. Date of Rec	eipt 07/17/10	The Court of Management and the Court of the	<u> </u>
Name & Address:		******			_	
Doug Cowherd 1117 Brooks Str	eet				400.00	400.00
Ann arbor, MI 4					_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cum	ulative, please pro	ovide:			O5-1-11 6-	an Maria a Danisha (C
Occupation		_ Employer_		**************************************	Click Here to	or Memo Itemization
Business Address						
Type of Contribution:	√ Direct	Loan from	a person	Fund Raiser		
3. Contribution #2	PAC Receipt?	YES	4. Date of Rece	oipt 2310		And the state of t
Name & Address Patricia) ocks					
600 1 Bro	ickside Dr	ive			1575 00	15-55 a A
λ Δ.	bor, mi 4	8105			\$1725.00	\$ 1525.00
メルハ ト・ 5. If over \$100.00 cum					Click Horo fo	r Memo Itemization
\mathcal{O}_{I}	ilative, piease pro	Employer A	diont A	dvocate, Inc	Click Here to	i Memo nemization
Occupation Yours	A. Bex 1	20117.	Ann A	bor, Mi 4811	7	:
Type of Contribution:	77/	Loan from		Fund Raiser		
3. Contribution #3	PAC Receipt?					
Name & Address:	PAC Receipt?	YES	4. Date of Rec	eipt	-	
					\$	\$
					Click Here for	Memo Itemization
5. If over \$100.00 cumu	ılative, please pro	vide:				
Occupation		_ Employer				
Business Address	Direct	Loan from	a pareon	Tund Baisan		
3. Contribution #4	PAC Receipt?			Fund Raiser		
Name & Address	FAC Receipt?	YES	4. Date of Rec	elpi		
					e	•
					9	\$
5. If over \$100.00 cumu	ılative, please pro	vide:			Click Here for	Memo Itemization
Occupation	*******************************	_ Employer	-			
Business Address						
Type of Contribution:	Direct	Loan from	a person	Fund Raiser		
			<u>L</u>	Page Subtota	11625.00	
			G	rand Total of All Schedules 1A	1100	
				plete on last page of Schedule]
					4110 10141 011	

ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

	(-Zolo-008
. Committee I.D. Number_	C 2010 440

	CANDIDATE COMMITTEE	1. Committee I.D. Number
	CANDIDATE COMMITTEE	2. Committee Name Committee to Elect Potricia Le
3. Name & Address Fr	rom Whom Received 4. Date of Receipt	5. Type of Receipt 6. Amount
Receipt #1	Date of Receipt 2 3 10	Loan from a Lending Institution
Name & Address:	1 1	\$50.00
TCF Bank		Interest
2701 Ply	mouth Kd.	Refund \Rebate Click for Memo Itemization Type
Ann Avbo	mouth Rd. r MI 48165 Fund Raiser	Other (Specify)
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #3 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	<u></u>	Other (Specify)
	Fund Raiser	
Receipt #4 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #5	Date of Receipt	Loan from a Lending Institution
Name & Address:		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #6 Name & Address:	Date of Receipt	Loan from a Lending Institution
Takio dynasioso.		interest \$
		Refund \Rebate Click for Memo Itemization Type
		Other (Specify)
	Fund Raiser	
Receipt #7 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest
		Refund \Rebate Click for Memo Itemization Type
	[]	
	Fund Raiser	Other (Specify)Page Subtotal
		00.00
		Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)

Enter this total on line 4 of Summary Page

ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number

C-2010-008

CANDIDATE COMM	NTTEE 2. Committee Name Committee 40 E	lect Vatricia Lesko
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 for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? Yes Name & Address: Kaplan, Nan(Y 3015 Hunting Valley Dr Ann Arbor, M1 48104 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business 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 Description Food and drinks for meet and goods. 5. Date Of Receipt: 3 14 16 6. Vendor Name & Address:	65.00 s (65.00) rect ick Here for Memo Itemization
Fund Raiser Contribution Contribution #2 PAC Receipt? Yes Name & Address Bulling ton, Lu Anne 1801 South Blud Anne Hor, MI 48104 If over \$100.00 cumulative, please provide: Occupation: Retired Employer 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 Description MCI LIST BURCHASES 5. Date Of Receipt: 4 1 1 6 6. Vendor Name & Address:	209.72 \$ <u>209.72</u>
Fund Buines Contribution		ick Here for Memo Itemization
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Kaplan, Nancy Bole 5 Hunting Valle, Dr. Ann Arbor, M. 48164 If over \$100.00 cumulative, please provide: Occupation: Petived Employer Name & Address:	Soods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Facility restal and food at 5. Date Of Receipt: 5/23/10 6. Vendor Name & Address:	75.00 \$ 240.00 much and greet ick Here for Memo Itemization
Fund Raiser Contribution		· · · · · · · · · · · · · · · · · · ·
	Page Subtota	1449.72
	Grand Total of all Schedules 1-II (Complete on last page of Schedule	1 1

Enter this total on line 6 of Summary Page

ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number <u>C-20</u>10-008

CANDID	ATE	COMN	MITTE
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2. Committee Name Committee to Elect Patricia Lesko

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). Reportall in-kind contributions. Contribution # 1 PAC Receipt? Yes Name & Address: Kaplan, Nancy 3065 Hunting Valley Drive Ann Arbor, MI 48104 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description rental of facility for picnic 5. Date Of Receipt: 6. Vendor Name & Address:		8. Cumulative for Election Cycle (Through date in Item 5)
	Ci	ick Here for Memo Ite	mization
Fund Raiser Contribution			
Contribution #2 PAC Receipt? Yes Name & Address Greff, Renel 1305 Grant St Yes	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Society Candidate or Others Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description USC of room and food 5. Date Of Receipt:	250.00s	250.00
Employer Name & Address: A v bor Bvewing Company 114 E. Washington Ann A v bor, Mil (1810) Fund Raiser Contribution		ick Here for Memo Ite	emization
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: Fund Raiser Contribution	Description	ick Here for Memo Ite	emization
1 and Maiser Contribution	Page Subtota	9///80	-
	Grand Total of all Schedules 1-I (Complete on last page of Schedule	\$12.17	

Enter this total on line 6 of Summary Page

Page $\frac{\lambda}{2}$ of $\frac{2}{2}$

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

C-2010-008

2. Committee Name Committee to Elect Patricia Lesko

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Sawicki and Sons		04/16/10	\$ 995.34
Address	Purpose: Lawn Signs	Date	» <u>990.04</u>
1521 W. Lafayette			
Detroit, MI 48216	Xf	5 Ék" ∕É=P°Ý U4i	ÐKÊ~ω3þPh–sÝbw
Donoit, 1441 10210	Check box if this expenditure is payment	of	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name New York Pizza Depot		04/14/10	
Now York 1 1224 Bopot	for all formations	Date	\$ <u>92.82 </u>
Address	Purpose: food for volunteers	Date	
605 E William St.	Yes	SÈL"Æ_D°ÝHAE)KÊ~ω3þPh–sÝbw
Ann Arbor, MI 48104	1_		7KE~1/00€PF11—51DW
	Check box if this expenditure is payment debt or obligation reported on previous	of	
Fund Raiser	statement		
Expenditure #3			
Name Vinology		04/18/10	
	Reception	Date	\$ <u>243.94</u>
Address	Purpose: Reception	Date	
110 South Main	Xf5	Èk" ∕È=P°Ý U4Đ	KÊ~ω3þPh–sÝbw
Ann arbor, MI 48104	Check box if this expenditure is payment	of	·
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name FedEx Office			
reutx Office		04/28/10	\$ 52.66
Address	Purpose: printing and copying	Date	<u> </u>
2609 Plymouth Road			
Ann Arbor, MI 48105	Xf5	Èk" ∕È=P°Ý U4Đ	KÊ~ω3þPh–sÝbw
	Check box if this expenditure is payment	of	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Office Max			
Office Wax	- His a sumplier	04/20/10	\$ 162.40
Address	Purpose: office supplies	Date	102.10
3765 Washtenaw	Xf5	Èk" Æ=P°Ý U4Ð	KÊ~ω3þPh-sÝbw
Ann Arbor, MI 48104	Check box if this expenditure is payment		
Fund Raiser	debt or obligation reported on previous statement		
		state this same	10-114 11
	Sur	ototal this page	124116
	Grand Total of a (Complete on last pa		

Enter this total on line 8a of Summary Page

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

C-2010-008

1. Committee I. D. Number

2. Committee Name Committee to Elect Patricia Lesko

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Pitney Bowes Address	Purpose: postage	04/29/10 Date	\$ <u>100.00</u>
P.O. Box 856042 Louisville, KY 40285			ÐKÊ~ω3þPh-sÝbw
Fund Raiser Expenditure #2	statement statement		
Name Verizon Wireless		05/11/10	\$ 44.81
Address	Purpose: phone	Date	
777 Big Timber Rd. Elgin, IL 60123	Xf5 Check box if this expenditure is payment debt or obligation reported on previous		DKÊ~ï‰3pPhsÝbw
Fund Raiser Expenditure #3	statement		
Name About Words		05/11/10	\$ 680.74
Address	Purpose: data processing	Date	
1375 Harpst Ann Arbor, MI 48104	 		KÊ~ľ‰3þPh–sÝbw
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of	
Expenditure #4			
Name FedEx Office Address	Purpose: printing and copying	05/07/10 Date	\$ <u>170.15</u>
2609 Plymouth Rd Ann Arbor, MI 48105		Èk" ∕È=P°Ý U4Đ	KÊ~ω3pPh–sÝbw
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of	
Expenditure #5			
Name Office Max	office supplies	05/15/10	\$ 41.72
Address 3765 Washtenaw Ann Arbor, MI 48104 Fund Raiser	Purpose: office supplies Xf5 Check box if this expenditure is payment debt or obligation reported on previous statement		KÉ~ľ‰3pPh-sÝbw
	Sut	ototal this page	1037.42
	Grand Total of a	i	

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SCHEDULE 1B CANDIDATE COMMITTEE

ommittee LD Number C-2010-008

Committee I. D. Number

2 Committee Name Committee to Elect Patricia Lesko

OARDIDATE COMMITTEE 2.0	Committee Name	- attroid	
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Hostgo		05/15/10	\$ 39.62
Address	Purpose: webhosting	Date	
2600 Michelson Dr., Suite 1700	Xf5 È	«" ⁄È≕P°Ý U4	ÐKÊ~Ή3þPh–sÝbw
Irvine, CA 92612			P
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name PrintRunner		05/07/10	s 129.95
Address	Purpose: campaign literature	Date	
9673 Topanga Canyon Place	Xf5 Èk	." /È=P°Ý U4f	9KÊ~ω3þPh~sÝbw
Chatsworth, CA 91311	governancy		•
,	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name PrintRunner		05/26/10	\$ 311.34
Address	Purpose: campaign literature	Date	
9673 Topanga Canyon Place			
Chatsworth, CA 91311		' Æ=P°Y U4£)KÊ~ï‰3þPh–sÝbw
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name PrintRunner	1	04/07/10	
7 Title (drailo)	-		\$ 195.95
Address	Purpose: stationary	Date	
9673 Topanga Canyon Place			
Chatsworth, CA 91311	Xf5 Èk*	′⁄È≂P°Ý U4E	KÊ~ω3pPh-sÝbw
,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name PrintRunner		05/04/40	
, ma carason		05/31/10	\$ 210.77
Address	Purpose: stationary	Date	
9673 Topanga Canyon Place	Xf5 Èk'	, vj≕dočitae)KÊ~ω3þPh-sÝbw
Chatsworth, CA 91311	Check box if this expenditure is payment of	,	112 1000p1 11 01211
Fund Raiser	debt or obligation reported on previous		
1 GIN ACION	statement	1	
	Subtota	al this page	881.63
	Grand Total of all So (Complete on last page of	j	

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Page <u>3</u> of <u>5</u>



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number C-2010-

C-2010-008

2. Committee Name Committee to Elect Patricia Lesko

2.0	Solitifalities (4a) lie		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Cottage Inn		06/20/10	07.00
Oottage IIII			\$ <u>97.82</u>
Address	Purpose: food for volunteers	Date	
Maiden Lane	V(E +	" ~ Dov's sar	
Ann Arbor, MI 48105	XID E	C /E=P°Y U4€)KÊ~ω3pPh–sÝbw
- 7 (100), 1411 - 10100	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #2	statement		
'			
Name Arbor Brewing Company		05/16/10	\$ 236.72
•	reception	Date	\$ <u>230.72</u>
Address	Purpose: reception		
114 E. Washington	\(\(\text{c} \)	0 A DOSCUED	ucê ão au bu vớu
Anna rbor, MI 48104	XIS EK	. /E=P*Y U46	ŀKÊ~ω3þPh−sÝbw
Tanta 100t, Will To To To	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
Experiorate #3			
Name FedEx Office		06/15/10	
			\$ <u>222.56</u>
Address	Purpose: printing and copying	Date	
2609 Plymouth Rd	Vac Pil	e è povilan	KÊ~ω3pPh-sÝbw
Ann Arbor, MI 48105		/E=P-Y Q4D	NE~I‰3pPn-SYDW
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4		, , ,	
Name Stanles			
Name Staples		06/15/10	\$ 118.68
Address	Purpose: office supplies	Date	<u> 170.00</u>
	Purpose:		
2601 Jackson St.	Vf5 Èl"	, ¢≓~Do∧ IMDI	<Ê~ω3þPh–sÝbw
Ann Arbor, Mi 48103	l ,	/C=F 1 04D1	(E~1/000)PF11=51DW
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		}
Expenditure #5			
			ļ
Name Verizon Wireless		06/21/10	0.45.04
Address	Purpose: phone	Date	\$ <u>45.24</u>
777 Big Timber Road			
}		∕È=P°Ý U4ĐI	KÊ~ω3þPh-sÝbw
Elgin, IL 60123	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
			-1 -
	Subtofa	I this page	121.02
	Grand Total of all So	hedules 1B	

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

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ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

C-2010-008

1. Committee I. D. Number

2. Committee Name	Committee	to	Elect	Patricia	Lesko
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3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1 Name Pitney Bowes	06/22/10 s 100.00
P.O. Box 856042 Louisville, KY 40285	Purpose: Date Xf5 Èk" Æ=P°Ý U4ĐKÊ~ï‰3þPh~sÝbw Check box if this expenditure is payment of
Fund Raiser Expenditure #2	debt or obligation reported on previous statement
Name Sawicki and Sons	07/01/10 \$ 695.63
Address	Purpose: lawn signs
1521 Lafayette Detroit, MI 48216	Xf5 Èk™ ∕È=P°Ý U4ĐKÊ~ï‰3pPh–sÝbw
Fund Raiser Expenditure #3	debt or obligation reported on previous statement
Name Verizon Wirelss Address	Purpose: phone
777 Big Timber Rd. Elgin, IL 60123 Fund Raiser	Xf5 Èk" Æ=P°Ý U4ĐKÊ~ï‰3þPh–sÝbw ☐Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #4 Name	
Address	Purpose:\$
Fund Raiser	Xf5 Èk" Æ=P°Ý U4ĐKÊ~ω3þPh-sÝbw Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #5 Name	
Address	Purpose: \$
Fund Raiser	Xf5 Èk" /È=P°Ý U4ĐKÊ~ω3pPh-sÝbw Check box if this expenditure is payment of debt or obligation reported on previous statement
	Subtotal this page 842.81

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

Enter this total on line 8a of

Summary Page

Page 5 of 5

DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE

1. Committee I.D. Number C-2c(0-008)

2. Committee Name Committee to Elect Patricia Lesko

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com	mittee OR b. Debt	s and obligations owed <u>to</u> o	r forgiven <u>by</u> the cor	nmittee.
(Che	ck either a or b. Use only for the ρι	rpose 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	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount	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)
provide information regarding the endorsers or guarantors, if any.	of debt			
Debt #1 Corp? Yes Owed to or by:	4. Type: \\ \(\alpha \) \(\alpha \)	\$		
Patricia Lesko	5. Date Debt Was Incurred:	\$		
Patricia Lesko 817 Brockside Dr. Ann Arbon, Mi 48105	2/3/10	\$		1571 60
Ann Arbon Mi 48105	6. Original Amount of Debt	\$	\$	\$ 1525.00
	\$ 1525.00	Φ.		FORGIVEN
if bank loan, name of endorser or guarantor:		ф Amo	ount Endorsed: \$	
Debt #2 Corp? Yes	T			
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	<u>\$</u>		
	6. Original Amount of Debt:	\$		Φ.
	o. <u>Original Alridditt of Debt.</u>	\$	\$, b
	Ψ	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$:
Debt #3 Corp? Yes		701	ount επασίσεα. φ==	
Owed to or by:	4. Type:	<u> </u>		
	5. Date Debt Was Incurred:	<u> </u>		
	6 Original Amount of Daht	\$.	_	\$
	6. Original Amount of Debt:	\$! \$ I	a
	\$	¢		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	· · · · · · · · · · · · · · · · · · ·
		Page Subtotal	(Outstanding debt)	1525.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
				Enter this total on line 12a "owed

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.

by"" or line 12b "owed to" of the Summary Page

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

	- USE A SEPARATE SH	EET FOR EACH EVENT	•
3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity Reception	6. Address and Name (If any) of the place where the activity was held. Vinology Restaurant 110 South Main Ann Arbor, MI 48104
. Total Contributions	\$820.6	ò	Private Residence
. Other Receipts	***************************************		
. Gross Receipts (Add lines 7	and 8)		
Total Cost of Event Total Cost includes In-Kind Co	intributions and All Expenditures	<u> </u>	
1. Check if event was a jo	int fund raiser and complete the	following:	
Co-Sponsor(s)	Contribution S (%)	split	Expenditure Split (%)
		<u> </u>	
			
	maken shellow and the shellow of the		1.41.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.
		<u></u>	
period covered by the C Receipts and expenditu Schedule (1A), Itemized Summary Page.	red to file a separate Fund Raise Campaign Statement. Ires listed on a Fund Raiser Sch d In-Kind Contributions Schedul Irticipated in a joint fund raiser n	edule must also be reported o e (1-IK), Itemized Expenditures	n the Itemized Contributions s Schedule (1B) and the
age of	- -		