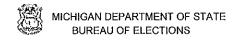


INDEPENDENT/POLITICAL COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

| Report must be legible, typed or printed in ink and sign by the treasurer or designated record keeper | ned | 3. This Statement covers From: 05/15/14 | _{To} <u>07/23/14</u> | | | | |
|--|------------------|---|---|--|--|--|--|
| 1. Committee I.D. Number | | 4. Committee's Mailing Address | | | | | |
| 46-5714365 | | 2478 Arrowwood Trail, Ann Arbor, MI 48105 | | | | | |
| 2. Committee Name | | | Je 1 | | | | |
| Committee to Elect Don Adams | | Area Code and Phone (313) 574-9669 | Area Code and Phone (313) 574-9669 | | | | |
| | | If the address in this box is different from the co Organization, mail may be sent to this address t | mmittee mailing duffess he Statement of by the filing official 2 | | | | |
| 5. Treasurer's Name and Residential Address | | | | | | | |
| Darnell Adams 2478 Arrowwood Trail, Ann Arbor, M | l 481 | 05 | ERE 25 AW | | | | |
| | | Area Code and Phone (313) | 218-2427 EEE | | | | |
| 6. Treasurer's Business Address | | 7. Designated Record Keeper's Name and Mailir | ng Address (If Me committee has a Designated | | | | |
| 65 Cadillac Square, Suite 3200, Detr | oit | Record Keeper) | | | | | |
| MI 48226 | Oit, | | | | | | |
| | | | | | | | |
| Area Code and Phone (844) 289-3522 | | | Area Code and Phone | | | | |
| 8. TYPE OF STATEMENT: | | | APPLICABLE TO INDEPENDENT AND | | | | |
| APPLICABLE TO INDEPENDENT AND POLITICAL | | APPLICABLE TO INDEPENDENT AND OLITICAL COMMITTEES REGISTERED | POLITICAL COMMITTEES REGISTERED ON | | | | |
| COMMITTEES REGISTERED ON STATE LEVEL | , , | ON COUNTY LEVEL | STATE AND COUNTY LEVEL | | | | |
| 8a, QUARTERLY STATEMENTS | | | | | | | |
| | 8c. | ANNUAL STATEMENT | 8f. AMENDMENT TO CAMPAIGN STATEMENT | | | | |
| | | (Coverage Year) | (Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h to indicate which Statement is being | | | | |
| February 15 | 8d. [| PRE-ELECTION OR | amended) | | | | |
| July 25 | 8e. | POST-ELECTION | | | | | |
| | | Pre-Election or Post-Election Statement relates to: | | | | | |
| April 25 | 7 | PRIMARY GENERAL | | | | | |
| October 25 | | CONVENTION | 8g. DISSOLUTION OF COMMITTEE | | | | |
| | | SCHOOL | | | | | |
| | | SPECIAL CAUCUS | Effective Date of Dissolution | | | | |
| 8b. SPECIAL ELECTION INDEPENDENT | | Date of Election, Convention or Caucus: | By checking this item, I/We certify that the committee has no asset or outstanding | | | | |
| EXPENDITURE REPORT | | 08/05/14 | debts, including late filing fees. Further, I | | | | |
| | | request that if the dissolution cannot be granted, that this be considered a request for | | | | | |
| | | July 25 Quarterly | the Reporting Waiver. | | | | |
| | | October 25 Quarterly | Note: The disposition of residual funds must be reported on Schedule 2B and the Summary Page. | | | | |
| Verification: I certify that all reasonable diligence was knowledge and belief the contents are true, accurate a | s used nd com | in the preparation of this statement and attached s | schedules (if any) and to the best of my | | | | |
| | | f) $n\rho(X)$ | / 07/0E/A | | | | |
| Current Treasurer or Darnell Adams Type of Pint Name | | Signature | | | | | |
| Designated Record Keeper Type or Print Name | | Signature | | | | | |



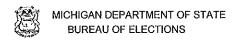
1. Committee I.D. Number <u>4</u>6-5714365

2. Committee Name Committee to Elect Don Adams

SUMMARY PAGE
INDEPENDENT OR POLITICAL COMMITTE

| INDEPENDENT OR POLITICAL COMMITTEE RECEIPTS | | Column I | Column II |
|---|------------------------|--------------------------|------------------------------|
| 3. Contributions | | This Period | Cumulative for Calendar Year |
| a, Itemized Contributions | | 4 000 00 | |
| (Schedule 2A, Column 6 + Schedule 2A-2, Column 8 | (3a.) \$ | 4,000.00 | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$NO | OT APPLICABLE | |
| c. Subtotal of "Contributions" | (3c.) \$ | 5 ,70.00 | (18.)\$ |
| 4. Other Receipts (Schedule 2A-1, Column 6) | (4.) \$ | 0.00 | (19.)\$ |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS | | <i>5</i> 70.00 | |
| (Add line 3c + Line 4) N-KIND CONTRIBUTIONS | (5.) \$ | <u> </u> | (20.) \$ |
| 3. In-Kind Contributions | (6a.) \$ | 0.00 | |
| a. Itemized (Schedule 2-IK, Column 7) | | OT APPLICABLE | |
| b. Unitemized (less than \$20.01 each - no Schedule) | | | · |
| <u>r. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)</u> EXPENDITURES | (7.) \$ | 0.00 | (21.)\$ |
| 3. Expenditures | (8a.) \$ | 933.59 | |
| a. Itemized Direct (Schedule 2B, Column 7) | (8b.) \$ | | |
| b. Itemized Get-Out-the-Vote (Schedule B-G, Column 6) | | 0.00 | |
| c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 2B-2, Column 7) | (8c.) \$ | | |
| d. Unitemized (less than \$50.01 each - no Schedule) | (8d.) \$ | | |
| e. Subtotal of Expenditures | (8e.) \$ | | (22.)\$ |
| Independent Expenditures (Schedule 2B-1, Column 7) | (9.) \$ | | (23.)\$ |
| 10. TOTAL EXPENDITURES (Add Line 8e + Line 9) | (10.) \$ | 998.22 | (24.)\$ |
| N-KIND EXPENDITURES | | | |
| 11.In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8) | (11.)\$ | 0.00 | (25.)\$ |
| DEBTS AND OBLIGATIONS | **·• | | (,- |
| I2. Debts and Obligations a. Owed by the Committee (Schedule 2E) | (12a.) \$ | 0.00 | |
| • | (12a.) \$ (12b.) \$ | 0.00 | + |
| b. Owed to the Committee (Schedule 2E) BALANCE STATEMENT | (120.) Ф | | 1 |
| Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ | 0.00 | |
| 4. Amount received during reporting period | | ti ~~~0.00 | |
| (Line 5, Total Contributions & Other Receipts - Column I) | (14.) + | | |
| 5. SUBTOTAL Add lines 13 and 14 | (15.) = | <u>4</u> ,5 <u>70.00</u> | _ |
| Amount expended during reporting period (Line 10, Total Expenditures - Column I) | (16.) | 998.22 | |
| 7. ENDING BALANCE | (10.) | 3,571.78 | · |
| (Subtract line 16 from line 15) | (17.) \$ | ગુગ 1.70 | * |

^{*}If your ending balance is negative, please recheck your math.



ITEMIZED DIRECT EXPENDITURES **SCHEDULE 2B** INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 46-5714365

Committee to Elect Don Adams

| | _ | | | | | |
|-------------------|---|------|------|------|--|--|
| 2. Committee Name | | | | | | |

| Name and address of person or vendor to whom the expenditure was made | 5. Candidate or Ballot Question Information | 6. Date | 7 Amount | for Election or Election Cycle |
|--|---|------------------------------|-------------------------------------|-----------------------------------|
| Expenditure #1 Name & Address: United States Postal Service 2075 W. Stadium Blvd Ann Arbor, MI 48103 | 5. Don Adams Name of Candidate City Council - Ann Arbor Ward 1 Office Sought & District # or Jurisdiction Washtenaw County | 06/27/14 Date Click Here | \$ 119.00 | \$119.00 |
| 4. Purpose: Stamps Fund Raiser | Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement | | | |
| Expenditure #2 Name & Address: United Sonz Inc 105 W. Michigan Avenue Ypsilanti, MI 48197 | 5. Don Adams Name of Candidate City Council - Ann Arbor Ward 1 Office Sought & District # or Jurisdiction Washtenaw County | Date | \$ <u>151.50</u> or Memo Itemiza | \$tion Type |
| Purpose: Absentee Voter Cards Fund Raiser | Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement | | | |
| Expenditure #3 Name & Address: United Sonz Inc 105 W. Michigan Avenue Ypsilanti, MI 48197 | 5. Don Adams Name of Candidate City Council - Ann Arbor Ward 1 Office Sought & District # or Jurisdiction Washtenaw County | 07/08/14 Date Click Here t | \$442.02 for Memo Itemiz | \$ <u>593.52</u> ation Type |
| 4. Purpose: Labels and Shirts Fund Raiser | Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement | | | |
| Expenditure #4 Name & Address: Sam's Club 5450 Carpenter Rd. Ypsilanti Township, MI 48197 | 5. Don Adams Name of Candidate City Council - Ann Arbor Ward 1 Office Sought & District # or Jurisdiction Washtenaw County | 07/07/14 Date Click Here | \$221.07 for Memo Item | \$ <u>221.07</u> |
| 4. Purpose: Fruit for July Parade Fund Raiser Fund Raiser | Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement | ototal this page | \$000.50 | |
| | | Il Schedules 2B | \$933.59 | |
| | Unanu total ura | II ついばらないこう 4D | : MAAAA EA | |

(Complete on last page of Schedule) \$933.59

Enter this total on line 8a of the Summary Page



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS **SCHEDULE 2A**

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number

2. Committee Name Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount Calendar Year for Each and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Contributor (Through Committee (Both are commonly called PACs). date of receipt) 3. Contribution # 1 4. Date of Receipt ______06/15/14 Is this contribution from a PAC? Name & Address: ,200.00 David L. Fanslow 1428 Pontiac Trail, Ann Arbor, MI 48105 Click Here for Memo Itemization Type 5. If over \$100.00 cumulative, please provide: Employer Department of Commerce Occupation Biologist Business Address 4840 S. State Rd, Ann Arbor, MI Loan from a person √ Fund Raiser 3. Contribution # 2 4. Date of Receipt <u>06/14/14</u> Is this contribution from a PAC? Name & Address: s 200.00 _s 200.00 John Hieftje 1046 Baldwin, Ann Arbor, MI 48105 Click Here for Memo Itemization Type 5. If over \$100.00 cumulative, please provide: Occupation Mayor Employer City of Ann Arbor Business Address 301 E. Huron Street, Ann Arbor, MI 48104 Loan from a person √ Fund Raiser 3. Contribution #3 4. Date of Receipt 06/24/14 YES Is this contribution from a PAC? Name & Address: _{\$} 100.00 ,100.00 Kyriakoula Plikas 5929 Cottonwood Dr, Ypsilanti, MI 48197 Click Here for Memo Itemization Type 5. If over \$100.00 cumulative, please provide: Occupation Clinical Director Employer Eisenhower Center Business Address 3200 Eisenhower Parkway, Ann Arbor, MI 48108 Type of Contribution: 🗸 Loan from a person √ Fund Raiser 3. Contribution # 4 Date of Receipt 06/24/14 Is this contribution from a PAC? Name & Address: _s 100.00 00.00ء John Cornack 1605 Pontiac Trail, Ann Arbor, MI 48105 Click Here for Memo Itemization Type 5. If over \$100.00 cumulative, please provide: Employer Eisenhower Center President Business Address 3200 Eisenhower Parkway, Ann Arbor, MI 48108 ✓ Fund Raiser ✓ Direct Loan from a person Type of Contribution:

Page Subtotal

\$600.00

Grand Total of All Schedules 2A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 2A

1. Committee I.D. Number

46-5714365

Enter this total on line 3a of Summary Page

INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Name Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, 7. Cumulative for 6. Amount and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Calendar Year for Each Contributor (Through Committee (Both are commonly called PACs). date of receipt) 3. Contribution # 1 4. Date of Receipt 06/24/14 Is this contribution from a PAC? Name & Address: s 100.00 . 100.00 Matthew Ingram 1225 Wendell Ave, Ypsilanti, MI 48198 Click Here for Memo Itemization Type 5. If over \$100.00 cumulative, please provide: Employer_Eisenhower Center Occupation VP of Operations Business Address 1225 Wendell Ave, Ypsilanti, MI 48198 Type of Contribution: ✓ Direct Loan from a person √ Fund Raiser 3. Contribution # 2 4. Date of Receipt 06/24/14 Is this contribution from a PAC? Name & Address: _s 100.00 £ 100.00 John Hieftje for Mayor Campaign 1308 E. Stadium Blvd, Ann Arbor, MI 48104 Click Here for Memo Itemization Type 5. If over \$100.00 cumulative, please provide: Occupation Candidate Employer Campaign account Business Address 1308 E. Stadium Blvd, Ann Arbor, MI 48104 Loan from a person √ Fund Raiser 3. Contribution #3 4. Date of Receipt 06/02/14 YES Is this contribution from a PAC? Name & Address: s 100.00 s 100.00 Lakiesha Vereen 2496 Arrowwood Trail, Ann Arbor, MI 48105 Click Here for Memo Itemization Type 5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution: V Direct ✓ Fund Raiser Loan from a person 3. Contribution # 4 4. Date of Receipt Is this contribution from a PAC? Name & Address: _s 100.00 ,100.00 Joan Lowenstein 502 Burson Place, Ann Arbor, MI 48104 Click Here for Memo Itemization Type 5. If over \$100.00 cumulative, please provide: Employer Ann Arbor office of Jaffe Raitt Heuer & Weiss Business Address 201 S/Main Street, Suite 300, Ann Arbor, MI 48104 Loan from a person Fund Raiser Direct Type of Contribution: Page Subtotal \$400.00 Grand Total of All Schedules 2A (Complete on last page of Schedule)

Page 2 of 9



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS

| SCHEDULE 2A | 1. Committee I.D. Number 40-57 14365 | | | |
|------------------------------------|--------------------------------------|------------------------------|--|--|
| INDEPENDENT OR POLITICAL COMMITTEE | 2. Committee Name | Committee to Elect Don Adams | | |

| Please enter contributor's name and address. If contribution is from an individual, enter last name, first name and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). | 6. Amount | 7. Cumulative for Calendar Year for Each Contributor (Through date of receipt) |
|--|---------------------------------------|---|
| 3. Contribution # 1 Is this contribution from a PAC? YES 4. Date of Receipt 06/20/14 Name & Address: | 4000.00 | 4000.00 |
| Larry Nisson | _{\$} _1000.00 | \$ <u>1000.00</u> |
| 1227 Lutz Ave, Ann Arbor, MI 48103 | | |
| 5. If over \$100.00 cumulative, please provide: Occupation Executive Coaching and Business Consulting Employer Self Employed | Click Here for | Memo Itemization Type |
| Business Address 1227 Lutz Ave, Ann Arbor, MI 48103 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution # 2 Is this contribution from a PAC? YES 4. Date of Receipt (22) | 500.00 | _s 500.00 |
| Karen Siporin | _{\$} 500.00 | |
| 25524 Wareham Dr, Huntington Woods, MI 48070 | Click Here for t | Memo Itemization Type |
| 5. If over \$100.00 cumulative, please provide: | | |
| Occupation Professional Guardian Employer Self Employed | | |
| Business Address 29488 Woodward Ave, Royal Oak, MI 48073 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution # 3 Is this contribution from a PAC? YES 4. Date of Receipt 07/03/14 | | |
| Name & Address: | _s 500.00 | ¢500.00 |
| UAW Michigan V-PAC 8000 East Jefferson Avenue, Detroit, Michigan 48214 | · · · · · · · · · · · · · · · · · · · | Memo Itemization Type |
| 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 Is this contribution from a PAC? YES 4. Date of Receipt 06/26/14 Name & Address: | , 250.00 | <u>.</u> 250.00 |
| Michigan Laborers' Political League | \$ 200.00 | \$ 200.00 |
| 1118 Centennial Way, Suite 100, Lansing, MI 48917 | Click Here for N | Memo Itemization Type |
| 5. If over \$100.00 cumulative, please provide: | | • |
| Occupation Employer | _ | |
| Business Address — — — — — — — — — — — — — — — — — — | | |
| Type of Contribution: V Direct Loan from a person Fund Raiser | | |
| Page Subf Grand Total of All Schedule: | | _ |

(Complete on last page of Schedule) 2,250.40

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE

BUREAU OF ELECTIONS ITEMIZED CONTRIBUTIONS **SCHEDULE 2A**

1. Committee I.D. Number 46-5714365

Enter this total on line 3a of Summary Page

| INDEPENDENT OR POLITICAL | COMMITTEE 2. Co | mmittee Name Comn | nittee to Elect Do | on Adams 🙃 |
|---|---------------------------------------|--|----------------------|---|
| Please enter contributor's name and address. If of and middle initial. Check box to indicate if contribe Committee (Both are commonly called PACs). | | | 6. Amount | 7. Cumulative for Calendar Year for Each Contributor (Through date of receipt) |
| Contribution # 1 Is this contribution from a PAC? YES Name & Address: | 4. Date of Receipt <u>05/23/14</u> | | 100.00 | _s 100.00 |
| Leah Gunn | | | _{\$} 100.00 | . \$ 100.00 |
| 1308 E. Stadium Blvd, Ann Arbor | , MI 48104 | | | |
| 5. If over \$100.00 cumulative, please provide | : | | Click Here for | Memo Itemization Type |
| Occupation retired Emp | loyer | | | |
| Business Address Type of Contribution: | l con from a navion | | | |
| Type of Contribution: | Loan from a person | Fund Raiser | | |
| Is this contribution from a PAC? YES Name & Address: | 4. Date of Receipt 06/24/14 | · · | 100.00 | _{\$} 100.00 |
| Christopher Taylor for Mayor | | | <u>\$ 100.00</u> | |
| 1308 E. Stadium Blvd, Ann Arboi | , MI 48104 | | Click Here for I | Memo Itemization Type |
| 5. If over \$100.00 cumulative, please provide: | | | | |
| Occupation Candidate Em | _{ployer} Candidate for Mayor | | | |
| Business Address 1308 E. Stadium Blvd, Ann | Arbor, MI 48104 | | | |
| Type of Contribution: ✓ Direct | Loan from a person | ✓ Fund Raiser | | |
| 3. Contribution # 3 | 4 D-4{D | | | |
| Is this contribution from a PAC? | 4. Date of Receipt | 11-11-1-11-11-11-11-11-11-11-11-11-11-1 | | |
| Name & Address; | | | œ. | ¢. |
| | | | Φ | <u> </u> |
| | | | Click Here for N | Memo Itemization Type |
| i. If over \$100.00 cumulative, please provide: | | | | |
| OccupationEmpl | oyer | | | |
| Business Address | | | | |
| Type of Contribution: Direct | Loan from a person | Fund Raiser | | |
| 3. Contribution # 4 YES | 1. Date of Receipt | | | |
| Is this contribution from a PAC? | | | | |
| Name & Address. | | | \$ | \$ |
| | | | Click Horo for N | Memo Itemization Type |
| | | | CRCK FIELE TO I | wemo nemization Type |
| 5. If over \$100.00 cumulative, please provide | : | | | |
| Occupation E | mployer | | - | |
| Business Address — | | | | |
| Type of Contribution: Direct | Loan from a person | Fund Raiser | · | |
| | | Page Subto | | _ |
| | | and Total of All Schedules lete on last page of Sched | | |



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS

| SCHEDULE 2A 1. Comm | nittee I.D. Number 40- | 5/14305 | induced William III. |
|--|--------------------------|----------------------|---|
| NICESTAL OF THE STATE OF THE ST | nittee Name Commit | tee to Elect Do | on Adams |
| Please enter contributor's name and address. If contribution is from an individual, enter and middle initial. Check box to indicate if contribution is from a Political Committee or Committee (Both are commonly called PACs). | r last name, first name, | 6. Amount | 7. Cumulative for Calendar Year for Each Contributor (Through date of receipt) |
| 3. Contribution #1 Is this contribution from a PAC? YES 4. Date of Receipt Mame & Address: | | 100.00 | _{\$} 100.00 |
| Christine Myran 10431 Seymour, Grass Lake, MI 49240 | \$. | 100.00 | \$_100.00 |
| 5. If over \$100.00 cumulative, please provide: Occupation VPof Programs Employer Eisenhower Center Business Address 3200 Eisenhower Parkway, Ann Arbor, MI Type of Contribution: | Fund Raiser | Click Here for | Memo Itemization Type |
| 3. Contribution # 2 Is this contribution from a PAC? YES 4. Date of Receipt 05/27/14 Name & Address: | - | _{\$} 150.00 | _s 150.00 |
| Michael Allemang 3465 Vintage Valley Rd, Ann Arbor, Ml 48105 | | *. | # 100.00 |
| 5. If over \$100.00 cumulative, please provide: Occupation retired Employer | | | |
| Business Address | · | | |
| Type of Contribution: | ✓ Fund Raiser | | |
| 3. Contribution # 3 Is this contribution from a PAC? YES 4. Date of Receipt 06/11/14 Name & Address: | | | |
| Jack Panitch | \$ | 200.00 | _{\$} 200.00 |
| 501 Burson Pl, Ann Arbor, Ml 48104 | | Click Here for N | lemo Itemization Type |
| 5. If over \$100.00 cumulative, please provide: | | | |
| Occupation Counsel Employer Varnum | | | |
| Business Address 39500 High Pointe Boulevard Suite 350 Novi, MI 48 | 375 | | |
| | Fund Raiser | | |
| 3. Contribution # 4 Is this contribution from a PAC? Name & Address: 4. Date of Receipt 06/11/14 | | 100.00 | _{\$} 100.00 |
| Jonathan Levine | \$. | 100.00 | \$ 100.00 |
| 456 Hilldale Dr. Ann Arbor, MI 48105 | | Click Here for N | Memo Itemization Type |

Page Subtotal

\$550.00

Grand Total of All Schedules 2A (Complete on last page of Schedule)

✓ Fund Raiser

__ Employer University of Michigan

Loan from a person

\$50.00

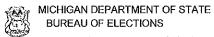
Enter this total on line 3a of Summary Page

Occupation Professor

Type of Contribution:

5. If over \$100.00 cumulative, please provide:

Business Address 2000 Bonisteel Boulevard Ann Arbor, MI 48109



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

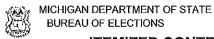
1. Committee I.D. Number

46-57)4365 CTE DON Adams

| CANDIDATE COMMINITIEE 2. Committee Name | CIC CUII | TRAINTIS |
|--|---------------------|--|
| 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 Name & Address: COTHY FLEISCHER 1715 DOWN Ct, Ann Arbor, M. 48185 | _{\$} 50.00 | s 50.00 |
| 5. If over \$100.00 cumulative, please provide: | Olista Harra fa | |
| Occupation Employer | Click Here to | r Memo Itemization |
| Business Address | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt (124/14) Name & Address Michael Harrib LOSSO Grand Hiver, Novi, M | \$ 80.00 | \$ 80 <i>0</i> 0 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | K. | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt (////// Name & Address: HETER HONEYMAN 113 4th Ave Unit 4 Ann Arbor, M 18104 5. If over \$100.00 cumulative, please provide: Occupation Employer | \$ 50,00 | \$ <u>50.00</u> Memo Itemization |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt (1)14 Name & Address AUDITED WOST KOWA TAK 523 LONGShure B ANN AYDIN, MI 48165 | _{\$} 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 | 230,00 | |
| Grand Total of All Schedules 1A | 236.00 | |

(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

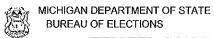
| 2. | Committee | Name |
|----|-----------|------|
| | | |

1. Committee I.D. Number 46-5714365
2. Committee Name CTE Dan Adams

| 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 Name & Address: USC DISCH HUINGAR, Ann Arbon MI 4805 | <u> 36.00</u> | <u>; 35.</u> ∞ |
| 5. If over \$100.00 cumulative, please provide: | Click Hara fo | or Memo Itemization |
| Occupation Employer | Click Hele IC | i Weno itemization |
| Business Address | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address | | |
| Constance Cottingham Do Box 130181, Ann Arby, MI 48113 | <u>\$ 50.00</u> | \$ 50 m |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | 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 6/24/14 Name & Address: Neali Lucas 5521 N. Eagle Ct, Ypsilanti M148197 | \$ <u>50.8</u> | \$ 50.00 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| OccupationEmployer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/24/14 Name & Address Veronique Uen | | |
| 2751 Byington Blud, Annarlour, MI 48105 | \$ 50.00 | s 50.00 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Page Subtotal | 185.60 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | (85, 00 Enter this total on |] |

Page $\frac{7}{2}$ of $\frac{9}{2}$

line 3a of Summary Page.



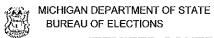
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 46.5714365

| CANDIDATE COMMITTEE 2. Committee Name | 10 (W) //C | |
|--|-----------------|--|
| 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 (0/24/14) Name & Address: ASNULU REID 10000 Mavg Verile St. Devery Hills, M | s 25.00 | > \$ 26.00 |
| 5. If over \$100.00 cumulative, please provide: | Click Hore fo | or Memo Itemization |
| Occupation Employer | Olick Field R | of Wellio Remization |
| Business Address | | |
| Type of Contribution: Loan from a person Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12114 | | |
| Ryan Sosnitza. 20345 Auduthe St. Dearborn MI 48124 | s 25,0b | \$ 25.00 |
| 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 Fund Raiser | _ | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 6/24/14 Name & Address: Oevold Cax | 25 5 | |
| 1015 Berkshire, Annarby, M 48104 | <u>\$ 25.00</u> | \$ 25.00 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| OccupationEmployer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt (124/14) Name & Address ANGLIA Neihoff | | |
| 712 W. Washington, St #1, Ann Arbor, MI 48103 | <u>\$ 30.₩</u> | <u>\$ 30.00</u> |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | · Memo Itemization |
| Occupation Employer | OHOIC HOTE IUI | WONO ROMEZAGON |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtotal | 105.00 | |
| Grand Total of All Schedules 1A | 106.00 | |

Enter this total on line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

| 1. Committee I.D. Number | 46-571436 |
|--------------------------|---------------|
| | CTE Don Adams |

| 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 Name & Address: | PAC Receipt? | ئـــا | YES 4. Date of Re | eceip | t <u>U/11)14</u> | | |
| Graydon K 1502 Golde | raponi o Ava Ann | Αſ | YURY IM NOW | | | . FOR | · 50 (d) |
| | | | | | | \$ <u>00.00</u> | \$CO-CO |
| 5. If over \$100.00 cumulative, please provide: | | | | | | Click Here for Memo Itemization | |
| Occupation | | _ = | mployer | | | | |
| Business Address | | _ | | $\overline{}$ | | | |
| Type of Contribution: | 4 Direct | | Loan from a person | 4 | Fund Raiser | · · · · · · · · · · · · · · · · · · · | |
| Contribution #2 Name & Address | PAC Receipt? | <u></u> | ES 4. Date of Re | eceip | t | | |
| | | | | | • | | |
| | | | | | | \$ | \$ |
| | | | | | | | |
| 5. If over \$100.00 cumulative, please provide: | | | | | | Click Here for Memo Itemization | |
| Occupation | • | _ Em | ployer | | | | |
| Business Address | | | | | | | |
| Type of Contribution: | Direct | L | oan from a person | | Fund Raiser | | |
| 3. Contribution # 3 | PAC Receipt? | | YES 4. Date of R | eceip | ot | | |
| Name & Address: | | | | | | | |
| | | | | | | ¢ | |
| | | | | | | · . | \$ |
| 5. If over \$100.00 cumulative, please provide: | | | | | | Click Here for | Memo Itemization |
| Occupation | | . Er | nployer | | | | |
| Business Address | | | | | | | |
| Type of Contribution: | Direct | <u></u> | _oan from a person | | Fund Raiser | | |
| 3. Contribution # 4 | PAC Receipt? | | YES 4. Date of F | Recei | pt | | |
| Name & Address | | | | | | | |
| | | | | | | | |
| | | | | | | \$ | \$ |
| 5. If over \$100.00 cum | ulative, please pro | viđe: | | | | | |
| Occupation Employer | | | | | Click Here for | Memo Itemization | |
| Business Address | | | | | | | |
| Type of Contribution: | Direct | | Loan from a person | $\overline{\sqcap}$ | Fund Raiser | | |
| | | | | _ | Page Subtotal | 50.00 | |
| Grand Total of All Schedules 1A | | | | | | | - |
| | | | (Co | | ete on last page of Schedule) | Enter this total on |] |
| Page of 9 | | | | | | line 3a of Summary Page. | |