<u>ڳ</u>

## CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	l signed by andidate.	3. This Statement covers I	<sup>-rom:</sup> 01/01/17	to 07/23/17	
1. Committee I.D. Number		4. Candidate Last Name	Fir	rst Name	M.I.
C-2015-001		Ackerman	Zachai	ry	D
2. Committee Name		4a. Office Sought Including Ann Arbor City Cou	-	ity Served (If applica	able)
Committee to Elect Zachary Ac	kerman	4b. County of Residence	WASHTENAW		
5. Committee's Mailing Address		6. Treasurer's Name & Re	sidential Address		
1506 Morton Ave		Brad O'Furey			
Ann Arbor, MI 48104		7810 Kookaburra Dexter, MI 48130	Ct	[ <sup></sup> ]	
Area Code and Phone <u>(734)</u> 883-8391 If the address in this box is different from the comm mailing address on the Statement of Organization, be sent to this address by the filing official.	ittee mail may	Area Code & Phone (734	) 474-3935		AASHTER
7. Treasurer's Business Address		8. Designated Record kee			
7810 Kookaburra Ct		Designated Record keepe	97)		
Dexter, MI 48130					
					$\mathcal{C}$
Area Code and Phone (734) 474-3935		Area Code and Phone			
9. TYPE OF STATEMENT			9e. Dissolution	of Candidate Com	mittee
9a. Pre-Election OR 9b. Post-Election	Required ON is not on the current year:		by the committee	to the candidate or	/ any outstanding debt his or her spouse is here
Pre-Election or Post-Election Statement relates to:		a da c	the committee. T	d forgiven, and no id 'he committee has n	onger collectible from o oustanding assets,
X Primary	July Quart	eny	owes no lates fee	es or has any oustan	ding debt.
General	Cctober Q	uarterly	Further, if the diss considered a requ	solution cannot be gi lest for the Reportin	ranted, that this be g Waiver.
Convention					,
Special	<sup>9c.</sup> Annua	l Statement () Coverage Year	Effectiv	e date of dissolution	
		dment to Campaign Stateme	ent —		_
	Comp	blete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The dispos	ition of residual fund the Summary Page	s must be reported on .
Date of Election, Convention or Caucus					
08/08/17					
		,			
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true,	ence was used accurate and co	in the preparation of this statemeters.	tement and attached so	chedules (if any) and	d to the best of
Current Treasurer or		,			
Designated Record keeper Type or Print Name		/ Signature		— Date	
Candidate Zachary Ackerman		1 ml Re		Date7	7/28/17
Type or Print Name		Signature			

Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

1. Committee I.D. Number C-2015-001

### SUMMARY PAGE CANDIDATE COMMITTEE

# 2. Committee Name Committee to Elect Zachary Ackerman

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>12,698.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$\$12,698.00	(18.) \$ \$12,698.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$12,698.00	(20.) \$ \$12,698.00
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <b>\$8,812.09</b>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <b>\$0.00</b>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <b>\$234.41</b>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$ \$9,046.50
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.) \$ <b>\$0.00</b>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <b>\$0.00</b>	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$_\$120.07	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$12,698.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$12,818.07	
<ol> <li>Amount expended during reporting period (Add lines 9 and 11)</li> </ol>	(16.) - \$ \$9,046.50	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$3,771.57 *	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS			
ITEMIZED CONTRIBUTIONS SCHEDULE 1A	1. Committee I.D. Number	(-2015-0	01
CANDIDATE COMMITTEE	2. Committee Name	E Zacha	y Ackerma
Enter contributor's name and address. If contribution is from an individual, emiddle initial. Check box to indicate if contribution is from a Political Commi 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:       Aavon       Alberrics         4550       Connectvent Ave       NW, Aft         Washington, DC       20008         5. If over \$100.00 cumulative, please provide:         Occupation       Employer         Business Address         Type of Contribution:       Direct         Loan from a person         3. Contribution #2       PAC Receipt?         YES       4. Date of Receipt         Name & Address         Arry       McLonghin         19 00       Arborvirus         Blud         Ann       Arborvirus         Blud         Ann       Arborvirus         Blud         Ann       Arborvirus         Blud         Business Address	406	s <u> </u>	<u>د ج- ۵</u> r Memo Itemization <u>د بر</u> Memo Itemization
Name & Address: Andrea Anbender U 26 Monton Pl Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	pt 6/29/17	<sup>s</sup> う <del>ら</del> Click Here for	<u>s</u> کرچ Memo Itemization
Type of Contribution:	Fund Raiser		
3. Contribution # 4       PAC Receipt?       YES       4. Date of Receipt?         Name & Address       Another Prince []       YES       4. Date of Receipt?         Another & Prince []       YES       4. Date of Receipt?         Another & Prince []       YES       4. Date of Receipt?         Another & Prince []       YES       4. Date of Receipt?         Another & Prince []       YES       4. Date of Receipt?         Another & Prince []       YES       4. Date of Receipt?         Another & Prince []       YES       4. Date of Receipt?         Another & Prince []       YES       4. Date of Receipt?         Jone Contribution       YES       Another Prince []         Business Address		<u>\$ 25</u> Click Here for t	<sub>\$</sub> こう
Gra	Page Subtotal Ind Total of All Schedules 1A ete on last page of Schedule)	114.00 17698.00 Enter this total on line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS		
ITEMIZED CONTRIBUTIONS	7415	- · •
SCHEDULE 1A 1. Committee I.D. Number		
CANDIDATE COMMITTEE 2. Committee Name	TE Zach	my Ackenno
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 <u>5/10/17</u> Name & Address: Ary Black		
1328 wines Dr		
Ann Arbor, MI 48103	<u>\$ 50</u>	<u>\$ 50</u>
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #2       PAC Receipt?       YES       4. Date of Receipt       C/31/17         Name & Address       Address       Address       Address       Address		
Andrey we jthowiak		
523 Longshore B Ann Arbor, MI 48105	\$ <u>50</u>	\$ 50
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:       Image: Contribution in the contrinet in the contribution in the contribution in the contris and co		
3. Contribution # 3       PAC Receipt?       YES       4. Date of Receipt       7 (15/17)         Name & Address:		
B.b Necdhan		
220 W sammit St	<u>د،</u>	\$ 13
Ann Arbor, MI 48103	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	· ·	
3. Contribution # 4       PAC Receipt?       YES       4. Date of Receipt       4/24/17         Name & Address       YES       4. Date of Receipt       4/24/17	_	
Brooks Allmondt		
2933 N Sheridan #917	\$ 50	\$ 50
Chricago, IL 60657 5. If over \$100.00 cumulative, please provide:	<u></u>	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	165.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	12698.00	_
Page Z of Z6	Enter this total on line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS SCHEDULE 1A 1. Committee I.D. Nu	mber (-2015-001
CANDIDATE COMMITTEE 2. Committee Name	CTE Zachary Ackerman
Enter contributor's name and address. If contribution is from an individual, enter last name, first nar 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.	ne, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 6/28/17 Name & Address: Bryan Weinert	
108 Worden Are	
Ann Arbor, MI 40103	<u>s 100 s 100</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Policy Adviser Employer Recycle Ann Arb Business Address 2420 5 Industrial, Ann Arbor, M7	
Business Address 2420 5 Industrial, Ann A-bor, M7	43104
Type of Contribution:	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/14/17 Name & Address	
Callie mekee	-
1900 Arburview Blud	\$ <u>3</u> <u>3</u>
Ann Arbor, MI 43103	
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 V Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/14/17 Name & Address:	
S83 Hilldule iDr	\$ <u>10</u> <u>\$10</u>
Ann Arbon, MI 48105	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 6/5/17 Name & Address	
charter Warpehoski 2020 wine wood	
Ann Arbor, MI 47103	\$ 100 <u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	Olick Llove for Monro Homization
Occupation Director Employer ILPJ	Click Here for Memo Itemization
Business Address 1414 Hill St, Ann Arbor, MI 47	loud
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Su	ibtotal 213.00
Grand Total of All Schedule (Complete on last page of Sche	edule)
Page 3 of 26	Enter this total on line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	
SCHEDULE 1A 1. Committee I.D. Number	(-2015-001
CANDIDATE COMMITTEE 2. Committee Name	TE Zachary Acknown
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 Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/14/17 Name & Address:	
Chros Deombak	
1416 Gotden Ave Apt 3 Ann Arbor, MI 48104	s 10 s 10
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 V Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/25/17	3 <u></u>
Name & Address	
Christopher Taylor for Mayor	
ZIIS Nature Cove Apt 207	\$ 100 \$ 100
Ann Arbor, MI 481041	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation <u>Campanyn Camm</u> Employer	
Business Address	·
Type of Contribution: Direct Loan from a person V Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt <u>6(6/2017</u>	· · · · · · · · · · · · · · · · · · ·
Daniel Denison	
1015 Martin Pl	<u>\$ 500</u> <u>\$ 500</u>
Ann Arbor, MI 48104	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation <u>Chairmen</u> Employer <u>Den. Zon</u> Consulting Business Address <u>121</u> w <u>Washington</u> , <u>Ann Arber</u> , <u>MI</u> u Type of Contribution: Direct Loan from a person Fund Raiser	8104
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/14/17	
Douglas Scott 1525 Hortug Rd	
Ann Arbir, MI 40104	<u>\$ 100 </u> \$ 100
5. If over \$100.00 cumulative, please provide:	
Occupation Retried Employer Retried	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person V Fund Raiser	
Page Subtotal	710.00
Grand Total of All Schedules 1A	12693.00
(Complete on last page of Schedule)	Enter this total on
Page 4 of 20	line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS SCHEDULE 1A 1. Committee I.D. Number	C-2015-001
CANDIDATE COMMITTEE 2. Committee Name	TE Zachary Ackerman
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 Filection Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 6/28/17 Name & Address: (abriel Edelson	
3590 Broadway Blod Bloomfred Hills, MJ 48301 5. If over \$100.00 cumulative, please provide:	\$ 500 \$ 500
Occupation Langer Employer Florignon	Click Here for Memo Itemization
Business Address 39400 woodword Ave, Potrett, MI BI	confield Hills, MI 48304
Type of Contribution:     Direct     Loan from a person     Fund Raiser       3. Contribution #2     PAC Receipt?     YES     4. Date of Receipt     5 / 7. (17)	,
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/こい7 Name & Address	
Greta Krapchl	
1502 Golden Ave	\$ <u>100</u> \$ 100
Ann Arber, MI 48104 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation <u>Pesearcher</u> Employer U of M	
Business Address 500 5 State, Ann Arbor MI 47109	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt <u>らにつろして</u> Name & Address:	
Helen Kaplan	
3545 chanter Pl	\$ 300 \$ 500
Ann Arber, MI 418105 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Social worker Employer U of M	
Business Address 500 3 State, Ann Arbor, MI 48109	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7 /(4/2017 Name & Address	
James Daly	
124 w summit suite F	\$ 750 \$ 750
Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide:	
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Ann Arbor vellocos</u>	Click Here for Memo Itemization
Business Address 321 & Liberty, Ann Arbur, 1I 48	
Type of Contribution: Direct Loan from a person V Fund Raiser	
Page Subtotal	1850.00
Grand Total of All Schedules 1A	12698.00
(Complete on last page of Schedule)	Enter this total on
Page 5 of 26	line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS SCHEDULE 1A 1. Committee I.D. Number	(-2015-001
	TE Zachany Ackenna
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 Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt <u>5/25/17</u> Name & Address: Janne Easter	
ZZOU Brockman Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide:	<u>50</u> <u>50</u>
Occupation Employer	Click Here for Memo Itemization
Business Address         Type of Contribution:       Direct         Loan from a person       Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/23/17 Name & Address James Bobern 3465 Vintag Valley Ann Arlow, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation <u>Retreed</u> Employer <u>Retreed</u> Business Address Type of Contribution: Wirect Loan from a person Fund Raiser	<u>\$ 250</u> <u>\$</u> 250 Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/25/17 Name & Address: Jason Morgan for County Connession 2860 Gladstone Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 50 <sub>\$</sub> 50 Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person V Fund Raiser	
3. Contribution # 4       PAC Receipt?       YES       4. Date of Receipt       5/25/17         Name & Address       Jean       Car I being       19.02       Jean Jacpindance         Ann       Arbor, MI       48.044         5. If over \$100.00 cumulative, please provide:       Occupation       Employer         Occupation       Business Address	<u>د رەت چ رەت</u> Click Here for Memo Itemization
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page _ 6_ of _ 2.6_	LEC.00 ICCR.00 Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	mber <u>C-ZOIS-COI</u>
	CTE Zachany Ackerman
Enter contributor's name and address. If contribution is from an individual, enter last name, first nar 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.	ne, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/16/17 Name & Address: Demonso Palms	
2656 Easy Ann Arbor. MJ 48104	\$ 100 \$ 100
5. If over \$100.00 cumulative, please provide:	·
Occupation Director Employer Blosson Prescho.	Click Here for Memo Itemization
Business Address	
Type of Contribution:	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/8/17 Name & Address	
Jeff Hauptman	
611 stratford	\$ 1000 \$ 1000
Ann Arborr, MI 4204	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Owner Employer Oxford Company	2
Business Address	
Type of Contribution: 🗹 Direct Loan from a person 📃 Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/1-1/17 Name & Address:	,
Jessica Letaw	\$ 3 . 3
PO BOX 131222	* \$
Ann Arbor, MI 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       3. Contribution #4     PAC Receipt?     YES     4. Date of Receipt     17.8 / 1-	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6/28/17	<u>/</u>
J. 11 Schloff	
Ann Arbor, 12 4PIOH	\$ 500 \$ 500
5. If over \$100.00 cumulative, please provide:	
Occupation Lawyer Employer A: Jenbaum Sch	Click Here for Memo Itemization
Business Address 6960 Orchand Lake Anter M	vest Bloomfield Tap.MI
Type of Contribution: Direct Loan from a person Fund Raiser	48322
Page Su	btotal 1603.00
Grand Total of All Schedule	
(Complete on last page of Sche	
Page 7 of 26	line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	
	6-2015-001
CANDIDATE COMMITTEE 2. Committee Name	TE Zachary Ackerman
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 5/23/17 Name & Address:	
Joan Lovenstein	
502 Burson	· 250 · 250
Ann Arbor, MI 2/8/04	\$ <u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Lawyer Employer Juffe Law Business Address 535 W William #400	
Business Address 535 W William #400	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2       PAC Receipt?       YES       4. Date of Receipt       7/14/17         Name & Address	
Joel Bathermon	
2258 W Grand Apt 308	\$ <u>10</u> \$10
Detroit, MI 48208	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution:	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 6/27/17	
John Breza	
310 N connectiont	\$ <u>500</u> <u>\$</u> 500
Rayal Oak, MI 48067	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation Self-Employed Employer Self-Employed	
Occupation Self-Employed Employer Self-Employed Business Address 310 N Connectvent, Royal Oat, MI 4	8067
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/3/17 Name & Address	
John Hicktje Campargh	
2115 Nature Care Apt 207 Ann Arbor, MI 417104	\$ 100 \$ 100
	ж Ф
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation <u>Candidate Comm</u> Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal	860-00
Grand Total of All Schedules 1A	12648.00
(Complete on last page of Schedule)	Enter this total on line 3a of Summary
Page 8 of 26	Page.

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	
	C-2015-001
CANDIDATE COMMITTEE 2. Committee Name	E Zachary Ackerman
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 7/11/17 Name & Address: John Juancuch	
Ann Arbor. MI 48104	\$ 25 \$ 25
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	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/2/17 Name & Address John Kotask: 1230 Sanndars Crescent	s (00 s (00)
Ann Arbor, MI 47103	\$\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation _ Retired _ Employer Retured	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/25/(7 Name & Address:	
Junch Copi 225 Browcrest #206	\$ 500 , 500
	\$\$\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Owner Employer Ann Arbour Wellness	
Business Address <u>371</u> E Locarty Ann Arbon, MJ 48104 Type of Contribution: Direct Loan from a person M Fund Raiser	4
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/14/17	
Jonah Copi 225 Briercrest #206	<b></b>
Ann Arbor, MI 48104	\$ <u>7</u> <u>\$</u> 507
5. If over \$100.00 cumulative, please provide:	
Occupation Owner Employer Ann Arbor Wellness Business Address 321 EL. berty, Ann Arbor, MI 4810	Click Here for Memo Itemization
Business Address 321 EL. berty, Ann Arbor, MJ 4810	24
Type of Contribution: Direct Loan from a person V Fund Raiser	
Page Subtotal	632.00
Grand Total of All Schedules 1A	12698.00
(Complete on last page of Schedule) Page 9 of 76	Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE			
ITEMIZED CONTRIBUTIONS SCHEDULE 1A 1. Co	mmittee I.D. Number	(-2015-0	001
	mmittee NameCTC	E Zacha	y Ackerman
Enter contributor's name and address. If contribution is from an individual, enter las middle initial. Check box to indicate if contribution is from a Political Committee or a 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 <u>4</u> Name & Address:	124/17		
GLO E ZOM # 108 New York, NY 10009 Joeseph Ribey	\$	s <u> </u>	\$ <b>\$</b>
5. If over \$100.00 cumulative, please provide:		Click Horo for	Memo Itemization
Occupation Employer		CIICK TIEFE IOF	
Business Address			
Type of Contribution: Direct Loan from a person Fund	Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7	14/17		
Julie Grand 1604 Brodelyn	\$	10	e i D
Ann Arbor, MI 47021	•		۴
5. If over \$100.00 cumulative, please provide:		Click Here for I	Memo Itemization
Occupation Employer			
Business Address			
	Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	5/25/17		
Kavin Ellis		<b>7</b> (1)	- <b>1</b> 2
806 Magnolia	\$	20	s <u> </u>
Royal Oak, MI 48073 5. If over \$100.00 cumulative, please provide:		Click Here for N	lemo Itemization
Occupation Employer			
Business Address			
	Raiser		
Name & Address	5/25/17		
Kyle Mazurete 2526 w Liberty	¢	100	, 100
Ann Arbor, MI 48103	શ્		Φ
5. If over \$100.00 cumulative, please provide:		Click Here for M	lemo Itemization
Occupation <u>Manager</u> Employer <u>Concast</u>	·····		
Business Address 41112 Concept, Plymonth, 1	NI 43170		
Type of Contribution: Direct Loan from a person V Fund			
	Page Subtotal	165.00	
		2698.00	
(Complete on I Page <u>10 of <u>26</u></u>	lir	nter this total on ne 3a of Summary age.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	f and show it
SCHEDULE 1A 1. Committee I.D. Number _	6-2015-001
CANDIDATE COMMITTEE 2. Committee Name	E Zachary Ackerma
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 7 (3/17	
Laurence Deitch	
ucci Hidden woods	
Bloomfield Hills, MI 40301	\$ 500 \$ 500
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Langer Employer Bodman	
Business Address 2000 Brush St. Detroit, MI 4822	C
Type of Contribution:	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/3/17	
Name & Address	
2115 Nature Cove Apt 207	
Ann Arbor, MI UBIOY	\$ 150 \$ 150
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation <u>Retrics</u> Employer <u>Retrics</u>	
Business Address	
Type of Contribution:	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/13/17 Name & Address:	
Leah Gunn ZILS Nature Cove Apt 207	\$ 100 , 250
Ann Arbor, MIT 418604	\$\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Business Address	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/25/17	
Name & Address	
2860 Cladstone	
Ann Arbor, MI 48104	\$ 100 \$ 100
5. If over \$100.00 cumulative, please provide:	
Occupation Administrater Employer Eastern Michigan 1	Click Here for Memo Itemization ノー・ハー・イン
Business Address 202 welch Hall, Yps: lamti, MI 471	97
Type of Contribution: Direct Loan from a person Fund Raiser	
	850.00
	12698.00
(Complete on last page of Schedules IA	Enter this total on
Page 11 of 26	line 3a of Summary Page.

MICHIGAN DEI BUREAU OF	PARTMENT OF STA	ATE				
ITE	MIZED CON	ITRIBUTIONS				-
	SCHEDU	LE 1A			(-2015-1	
С	ANDIDATE (	COMMITTEE	2. Committee Name	e <u>CTE</u>	5 Zachar	y Adacoman
	ox to indicate if cont	contribution is from an individu tribution is from a Political Co regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Lun Ja 3. Kepp	PAC Receipt? Diene 7 Ier Ct		eceipt 7/14/17	, ,	······································	
Ann Ar	bur, MI	48103			<u>\$</u>	\$ 6
5. If over \$100.00 cum					OP-1-U	
Occupation		_ Employer			Click Here to	r Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a person	Fund Raiser			
3. Contribution #2 Name & Address	PAC Receipt?		eceipt 5 (25/17	7		
Londa L	evy rootdyn A	<i>.</i> .			<b>*</b> ~~	5 mm
					\$50	\$ <u>50</u>
•	bor, MI					. Not the state
5. If over \$100.00 cum					Click Here to	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 Re	eceipt 7/14/17	,		
Name & Address:	ernwood	Ala				
6000 1		100			\$ 30	s 30
						Ψ
5. If over \$100.00 cum	ulative, 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 Name & Address	PAC Receipt?	YES 4. Date of R	leceipt 5/28/17	ŗ		
Lisa M	walden w	ł				
•	holden w				<u>s (00</u>	s_ 100
5. If over \$100.00 cum	•	-				
		Employer EY			Click Here for	Memo Itemization
Business Address 7	77 Was.	dward # 1000	, Petrat,	MI	48226	
Type of Contribution:		Loan from a person	Fund Raiser	_		
			Page S	Subtotal	186.00	
			Grand Total of All Schedu	ules 1A	12698.00	
		(Co	mplete on last page of Sc	chedule) 🖵	Enter this total on	J
Page 12 of 26					line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE			
ITEMIZED CONTRIBUTIONS			
SCHEDULE 1A	1. Committee I.D. Number		
CANDIDATE COMMITTEE	2. Committee Name	E Znohn	M Ackenn
Enter contributor's name and address. If contribution is from an individual middle initial. Check box to indicate if contribution is from a Political Comr 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?	eipt 6/19/17		
Liz Brater			
1507 wells		( معر المر ال	. 100
Ann Arbon, MI 40104		\$	\$ (
5. If over \$100.00 cumulative, please provide:	ł	Click Here fo	r Memo Itemization
Occupation <u>Return</u> Employer <u>Return</u>	202		
Business Address			
Type of Contribution:	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt?	eipt 6/29/17	·····	
Name & Address	Corto rity		
Mackaneie Miller			
930 1 St NW Apt TO		\$ 50	\$ 50
Washington, DC 20001			·
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution:	Fund Raiser		
Name & Address:	eipt 5725117		
Narganet Teall 1208 Brootbyn Ann Arbor, MI 48104			
1208 Brootbyn		\$ 100	\$ 100
Ann Arbor, MI 48104		Olish Have for	* * · · · · · · · · · · · · · · · · · ·
5. If over \$100.00 cumulative, please provide:			Memo Itemization
Occupation Teacher Censul Junt mployer Eastern Business Address 614P Pray-Harrold Ha	Michigan ut.	try Proje	~ <del></del>
Business Address 614P Pron- Harrold Ha	Il, Yps: lanti, A	1I 48197	
	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt? YES 4. Date of Receipt?	celpt 5/16/17		
Mark Acterman			
1506 Morton Ave		\$ 1000	1000
Ann Arbor, MI USION		\$	\$ 1000
5. If over \$100.00 cumulative, please provide:		Olick Hore for	Momo Itamization
Occupation Professor Employer Vof	M		Memo Itemization
Business Address 500 5 Startz, Ann A	tubor, MI 481	.09	
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal	1250.00	
	irand Total of All Schedules 1A	12698.00	
	plete on last page of Schedule)	Enter this total on line 3a of Summary	i.
Page 13 of 26		Page.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	
SCHEDULE 1A 1. Committee I.D. Number	(-2015-001
CANDIDATE COMMITTEE 2. Committee Name	TE Zachary Ackernan
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 7/8/17 Name & Address: Mark Bern sterr	
2002 scottwood Ann Arbor, MI 40104	\$ 1000 \$ 1000
Occupation Langer Employer Sam Bernstein Law	F. Click Here for Memo Itemization
Business Address 31731 North merstern Hung FF333, For	mongton Holls, MI
Type of Contribution:	48334
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/25/17	
Name & Address Marte Chevery	
29.7 Brockman	100 100
Ann A-bor, MI 48704	\$ <u>100</u> \$ <u>100</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation <u>Retried</u> Employer <u>Retried</u>	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3       PAC Receipt?       YES       4. Date of Receipt       4/25/17         Name & Address:	
Matt Hampel	\$ 100 \$ 100
575 30 4 454	\$ <u>(00</u>
Brooklyn, NY # 11235 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Co-Foundar Employer Local Data Business Address 575 3rd St # 5.4, Brookely, NY 11235	
Type of Contribution:	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6 (4 / 17 Name & Address	
Mochele Heisler	
Ann Arbor, MI 47104	\$ 500 \$ 500
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Professor Employer Usf M	
Business Address 500 9 State, Ann Arbor, NI 4810 Type of Contribution: Direct Loan from a person Fund Raiser	۲
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal	1700.00
Grand Total of All Schedules 1A	12698.00
(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 1A 1. Committee I.D. Number	C- 2015-001
CANDIDATE COMMITTEE 2. Committee Name	TE Zachory Ackerman
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 Flection Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 6/29/17 Name & Address:	_
Nock Buchelenes 1607 SE 313+ Atre	
Portland, OR 97214	\$ 100 <u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	
Occupation Softmare Developer_ Self-Employed	Click Here for Memo Itemization
Business Address 1607 SE 31st Rartland, OR 97214	
Type of Contribution:	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 24/17</td <td></td>	
Name & Address	
Patrick Maillet	
930 M STAPT 311	\$ <u>20</u> \$ <u>5</u>
Washington, DC 20001	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 # 3 PAC Receipt? YES 4. Date of Receipt 5/2/17 Name & Address:	_
Ralergh Sadher 1615 Shadford	\$ 50 \$ 50
Ann Arbor, MI 48104	
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	
3. Contribution # 4       PAC Receipt?       YES       4. Date of Receipt       7/22/17         Name & Address	
Robert Dropplemen 837 S Mann St	
837 Smann st	\$ 100 \$ 100
Ann Arbor, MI 48104	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Manager Employer Andre Research Business Address 340 Ethron #300, Ann Arbor, M	
Business Address 340 E Hurr #300, Ann Arbor, M.	I UPION
Type of Contribution:	
Page Subtota	270.00
Grand Total of All Schedules 1A	12698.00
(Complete on last page of Schedule	Enter this total on
Page 15 of 26	line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE			
ITEMIZED CONTRIBUTIONS			
SCHEDULE 1A	1. Committee I.D. Number _	6-2015-1	001
CANDIDATE COMMITTEE	2. Committee Name <u>CT</u>	E Zacha	y Ackerman
Enter contributor's name and address. If contribution is from an individual, e middle initial. Check box to indicate if contribution is from a Political Commit 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 Receip Name & Address:	ot 6(17/17		
Ronald K Emans			
2503 Hampshite		\$ 100	s 100
5. If over \$100.00 cumulative, please provide:		Ψ	۴
	7 A-2	Click Here fo	r Memo Itemization
Occupation Engineer Employer Learnin Business Address 3767 Rancharo #200	Arm A-bor a	NT 47108	
Type of Contribution:	Fund Raiser		
	t 5/25117		
Name & Address			
940 vesper Ed		_	
Ann Arbor, MI 418103		\$\$	\$ 50
iZuth Jaubmon			
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		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receip Name & Address:	ot 6(28(17		
Ryan Bloom			500
2030 E Arter Pl		<u>s</u>	\$
chandler, AZ 35286		Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:	and Sublate	and Bloo	m
Occupation Langer Employer A: Icn b Business Address 6960 Orchard Late,	A PI	II Trop,	NI 418322
Business Address     6460     0700     Cate,       Type of Contribution:     Direct     Loan from a person	Fund Raiser		r
3. Contribution # 4 PAC Receipt? YES 4. Date of Received Name & Address	pt 6/13/17		
Soni Mithani			
1030 Ferdon		\$ 250	\$ 250
Ann Arbor, NI 43104			۲ <u> </u>
5. If over \$100.00 cumulative, please provide:	C. C. Al	Click Here for	Memo Itemization
Occupation Langer Employer mille			
Business Address 101 N Marn St, Ann	A-bor, MI	93104	
	Fund Raiser		
	Page Subtotal	900.00	
	nd Total of All Schedules 1A	12698.00	
(Comple	ete on last page of Schedule) L	Enter this total on	1
Page 16 of 26		line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE			
ITEMIZED CONTRIBUTIONS		1 to the second	
	Committee I.D. Number		
<b>CANDIDATE COMMITTEE</b> 2.	Committee Name	E Zacho	my Acterne
Enter contributor's name and address. If contribution is from an individual, enter middle initial. Check box to indicate if contribution is from a Political Committee c 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	6128/17	· · · · · · · · ·	
Stephannie Edelson 3590 Broadway Blud Bloomfield H:115, MI 48301		\$00	\$ 500
5. If over \$100.00 cumulative, please provide:	i 1	Click Here fo	r Memo Itemization
Occupation Not Employed Employer Not Empl	loved		
Business Address			
Type of Contribution:	nd Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	7/14/17		
Staphane White 2115 Winchell			
z115 Windhell		\$ <u> </u>	\$( <i>o</i>
Ann Arbon, 15 43104			
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 Fu	und Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:	7/14/17		
stere Culver		e 10	
555 E William St		\$ 10	\$ 10
Ann Arbor, MI 48104		Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	und Raiser		
Name & Address			
1504 Linnerd Ave		1070	
Ann A-bon, MI 4/8103		\$ 100	\$
5. If over \$100.00 cumulative, please provide:			Mama Itamization
Occupation Professor Employer Uof N	٦		Memo Itemization
Business Address 500 5 State Ann Ar		48109	
Type of Contribution: Direct Loan from a person Fur	nd Raiser		
	Page Subtotal	620.00	
	otal of All Schedules 1A n last page of Schedule)	12698.00	
Page 17 of 26	/	Enter this total on line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE		
ITEMIZED CONTRIBUTIONS SCHEDULE 1A 1. Committee I.D. Number	(-2015-	001
CANDIDATE COMMITTEE 2. Committee Name	TE Zacha	- Ackernon
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 5/25/17 Name & Address:		
Travis Raduna 2750 windwood of 146		
Ann Arbon, MI 48105	\$ 50	\$ 50
5. If over \$100.00 cumulative, please provide:	Oliok Horo fo	w Manaa Itansiyatian
Occupation <u>Alumni ManagerEmployer</u> Usf M	Click Here to	or Memo Itemization
Business Address 520 5 state Ann Arbon, MI 2181	09	
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/11/17 Name & Address		i
travis Radina		
2750 windward # 146	\$ 50	<u>\$</u> 100
Ann Arbur, M± 48105		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation <u>Alumni MangerEmployer</u> USRM		
Business Address 500 & State, Ann Arbor, MI 471.	~ 9	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7(1H/l)	-	
Virginia Ragers 1332 White St	s 10	. 10
1332 White St	\$	\$
Ann Arbor, MI 48104	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address		
	\$	¢
	¥	φ
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	160.00	
Grand Total of All Schedules 1A	17698.00	-
(Complete on last page of Schedule)	Enter this total on	J
Page $(P_{of} ZG)$	line 3a of Summary Page.	

ITEMIZED EXPENDITURES	1 . 7 . 11	•	
SCHEDULE 1B	Committee I. D. Number <u>C-2015-00</u>	<u> </u>	
CANDIDATE COMMITTEE 2. C	Committee Name CTE Zachary	Acter	mom
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Ann Arbor Democrate Party Address	C . F .	<u>\$/1/17</u> Date	\$ <u>50.00</u>
	Purpose: Event Sponsor	Date	
PO Box 7497 Ann Arbor, ME 48106		lere for Memo	Itemization Type
Ann Arbor, rece 10.00	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name Alex Vertery		5/4/17 Date	\$ 200.00
Address	Purpose: Stafet Pary	Date	
3658 View Dr	Click H	lere for Memo I	temization Type
Dexter, MJ 418130			····· · <b>/</b> / ·
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Jon Tay Community Conter		5/10/57	\$ 50.00
Address 319 Brann Ct	Purpose: Event Sponsor	Date	•
Am Arbor, MI 48104	Click H	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4	statement		
Name United Sonz		5/11/17	\$ 922.94
Address	Purpose: Printny	Date	
105 W Michigen	Click He	ere for Memo I	temization Type
Yps: lanti, MI 43197	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Alex Verteen		5/u/ <u>17</u>	\$ 7.00.00
Address 3658 Vrew Dr Dexter, MF (13130	Purpose: Staff Pay	Date	· <u> </u>
Dexter, M7 (18130	Check box if this expenditure is payment of	ere for Memo I	temization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subtota	al this page	922.94
	Grand Total of all S (Complete on last page		3812.09

Enter this total on line 8a of Summary Page

ITEMIZED EXPENDITURES	(-705 00)
SCHEDULE 1B	1. Committee I. D. Number C- 2015 - 001
CANDIDATE COMMITTEE	2. Committee Name CTE Zachary Ackerman
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	
Name United Sonz	Zin har Date \$ 528.94
Address 105 w nuchagen Vps: lanti, nI 48197	Purpose: Printing Date
Ipsilanti, NI 48147	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #2	
Name Morgan & Norte Address	Fundravisor <u>5/26/17</u> \$ 265.21 Purpose: Jenne (Food Date
Adaress 1928 Rackand St	Click Here for Memo Itemization Type
Ann Arbor, MI 418104	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous
Expenditure #3	statement
Name Direct Connect	Purpose: Denation Processing Date Date
Address 3901 Conterview #W	Purpose: Lonation trocessing Date
Chantilly, VA 20151	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure #4	statement
Name Alex Verkey	<u>6/6/17</u> \$ 400.00 Date \$ 400.00
Address 3658 Voew Dr	Purpose: Starfif Pary Date
Dearter, MI 48120	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #5	
Name United Sonz Address 105 w Michigon Ypsilanti, MI 48197	C(28/17 \$ 2037. 34
Address 105 w Michgon	Purpose: Direct Mail Date \$ 2031. 1
Yps:lants, MJ 48197	Click Here for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous statement
	Subtotal this page 33>0.77
	Grand Total of all Schedules 1B 8817.09

ITEMIZED EXPENDITURES	1 - 7 as 5	01
SCHEDULE 1B	Committee I. D. Number <u>C- てのいち~の</u>	
CANDIDATE COMMITTEE 2.0	Committee Name CTE Zachary	Adrennem
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		· · · · · · · · · · · · · · · · · · ·
Name Aless Verkey	staff Paul	<u> </u>
Address 3658 Vrew Dr	Purpose: Staff Pay	
Descher, MI 48130	Click H	lere for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #2		
Name Josh La Haye		<u>7/29/17</u> \$ 178.00
Address 1429 Bind Rd	Purpose: Graphic Design	
Ann Arbor, MI 48103	Click H	ere for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #3		
Name Direct Connect	Purpose: Donation Procession	7(3/17 \$72.74
Address 3901 Centerview # W	Purpose: Donation Procession	S Date
Chantilly, VA 20151	Click He	ere for Memo Itemization Type
Fund Raiser	LCheck box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #4		
Name Ann Arbor Democratic Address Party	Purpose: Event Spansor	7/4/17 Date \$ 50.00
PO Box 7497 Ann Arbor, MI 48106		ere for Memo Itemization Type
Ann Arbor, Mid 10106		are for memo itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #5		
Name NGP VAN	a lun Duda haa	7/7/17 \$ 150,00
Address 1445 New York NW #200 Washington, DC 20005	Purpose: Online Database	Date ———
Washington, DC COURS	Click He Click box if this expenditure is payment of	ere for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous statement	
	Subtota	al this page 850.74
	Grand Total of all S (Complete on last page	

ITEMIZED EXPENDITURES	(- 2015-20)
	Committee I. D. Number <u>(- 20, 3-00)</u>
CANDIDATE COMMITTEE 2. C	Committee Name CTE Zachary Ackernan
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	
Name Cottage Inn	Purpose: Volumteer Food Date \$ 51.34
Address 546 Packand St	· · · · · · · · · · · · · · · · · · ·
Am Arbor, MI 48104	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #2	
Name Ales Verkey	$\frac{7/!!/17}{\text{Date}}  \$ \frac{700.c0}{c}$
Address 3658 View Dr	Purpose: Starff Pary Date
Dexter, MI 48132	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #3	
Name Pizza Hause	Volumteer Ford $\frac{7/u/17}{Date} \pm \frac{55.71}{}$
Address 618 Church St	Purpose: Volunteer Food Date
Ann Arbor, MI 48204	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #4	saonen
Name Frazer's Pub Address 20115 Padeard Rd	Purpose: Voluntaer Food 7/12/17 \$ 104.80 Date \$ 104.80
Ann Arbor, MI 40104	
	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #5	
Name Sawicki & Son Address	Purpose: Yard Signs 7/12/17 \$ 807.95
1521 w Lafayette	Purpose:
Address 1521 W Lafayette Blotroit, MI 48216	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
	Subtotal this page 1214.30
	Grand Total of all Schedules 1B 812.09 (Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

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ITEMIZED EXPENDITURES					
	1. Committee I. D. Number (- 2015 - 001				
CANDIDATE COMMITTEE 2.	Committee Name CTE Zachany Acterman				
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount				
Expenditure #1					
Name Grange F. Johan	Fundraiser 7/14/17 \$ 56.34 Purpose: Food Date				
Address 113 w L. Doorty	Click Here for Memo Itemization Type				
Ann Arbor, MI 40104					
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement				
Expenditure #2					
Name Grange Ertchan	Fundrasser <u>7/14/17</u> \$ 74.33 Purpose: <u>Vanne</u> <u>Date</u>				
Address 118 ~ Liberty	Click Here for Memo Itemization Type				
Ann Arbon, MI 43104	Check box if this expenditure is payment of				
Fund Raiser	debt or obligation reported on previous statement				
Expenditure #3					
Name United Sone	7/24/17 \$ 1391.17				
Address 105 W Michingan Vps:lamti, MI 48197	Purpose: Direct Mail Date				
Mps: lamti, MI 48197	Click Here for Memo Itemization Type				
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement				
Expenditure #4	outonon				
Name Blue Tractor	Volunterer <u>7/24/17</u> \$ 71.00 Date <u>71.00</u>				
Address 207 E Washington	Purpose: Food Date				
Ann Arbor, MI 47104	Click Here for Memo Itemization Type				
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement				
Expenditure #5					
Name Alex Yerkey	7/26/17				
Name Alex Vertey Address 3658 V.ew Dr Deather, MI 48130	Purpose: Staff Pay Date \$ 2000				
-	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous				
Fund Raiser	statement				
	Subtotal this page 2.29.2.34				
	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	1. Committee I. D. Number <u>C- 2015-001</u>
CANDIDATE COMMITTEE	2. Committee Name CTE Zachary Action
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	
Name Alex Yerkey Address 3658 vrew Dr Dester, MI 48130	Staff Gas <u>7/26/17</u> \$ 200.00 Purpose: <u>k Mileage</u> Date
Address 3658 vous Dr	Purpose:
Dester, MI 40130	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #2	
Name	
Address	Purpose: Date Date
	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #3	
Name	\$
Address	Purpose: Date
	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #4	
Name	
Address	Date \$
	Click Here for Memo Itemization Type
	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #5	
Name	
Address	Purpose: \$
	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
	Subtotal this page Z00.00
	Grand Total of all Schedules 1B 8812.09 (Complete on last page of Schedule)
	Enter this total on line 8a of Summary Page

### FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number <u>C- 2015-001</u>

2. Committee Name <u>CTE</u> Zachang Ackerman

- USE A SEPARATE SHEET FOR EACH EVENT -					
3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.		
7/14/17	245	Meet to Great	Grange terten 118 E Liberty Ann Arbon mI Private Residence 40104		
7. Total Contributions	\$73				
8. Other Receipts	\$950				

 9. Gross Receipts (Add lines 7 and 8)
 9. 023

 10. Total Cost of Event
 9.74.33

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
Zachary Ackerman	<u> </u>	33 %
Chip smAh	33 %	33%
Jason Frenzel	34 %	34 %
	W-10111-011-011-011-011-011-011-011-011-	
		·

• 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.

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### **FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE**

1. Committee I.D. Number <u>C-ZOIS-OOI</u> 2. Committee Name <u>CTE</u> Zachary Actor

- USE A SEPARATE SHEET FOR EACH EVENT -						
3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater) $\sim 40$		5. Type of Fund Raising Activity K・こko-GF	6. Address and Name (If any) of the place where the activity was held. Morgan & York 1923 Packard St Ann Arbon MI		
				Private Residence 418104		
7. Total Contributions	_	41295				
8. Other Receipts	-	٥Ę				
9. Gross Receipts (Add lines 7	Bross Receipts (Add lines 7 and 8)					
10. Total Cost of Event (Total Cost includes In-Kind Contributions and All Expo		z د 5. z nd All Expenditures				
11. 🗌 Check if event was a jo	nt fund raise	er and complete the	following:			
Co-Sponsor(s)		Contribution S (%)	plit	Expenditure Split (%)		
		· · · · · · · · · · · · · · · · · · ·				
		······				
<b>.</b>						

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.

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