



**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 08/26/14 to 07/17/16

4. Candidate Last Name KAILASAPATHY First Name SUMANGALA M.I. \_\_\_\_\_

4a. Office Sought Including District # or Community Served (If applicable) **ANN ARBOR CITY COUNCIL MEMBER WARD 1**

4b. County of Residence **WASHTENAW**

6. Treasurer's Name & Residential Address  
ALPA PARIKH  
3225 ROCKCRESS CT  
ANN ARBOR, MI 48103

Area Code & Phone (734) 663-1507

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

Area Code and Phone \_\_\_\_\_

1. Committee I.D. Number  
**C-2010-012**

2. Committee Name  
**COMMITTEE TO ELECT SUMANGALA KAILASAPATHY**

5. Committee's Mailing Address  
**2530 MALLARD CT**  
**ANN ARBOR, MI 48105**

Area Code and Phone (734) 769-5698  
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.

7. Treasurer's Business Address  
**3225 ROCKCRESS CT**  
**ANN ARBOR, MI 48103**

Area Code and Phone (734) 663-1507

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

Primary  
 General  
 Convention  
 Special  
 School  
 Caucus

Date of Election, Convention or Caucus  
08/02/16

Required ONLY if candidate is not on the ballot for the current year:

July Quarterly  
 October Quarterly

9c.  Annual Statement ( \_\_\_\_\_ ) Coverage Year

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

9e. Dissolution of Candidate Committee

By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution  
\_\_\_\_\_

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

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

Current Treasurer or Designated Record keeper ALPA PARIKH Type or Print Name Alpa Parikh Signature Date 7/20/16

Candidate SUMANGALA KAILASAPATHY Type or Print Name S. Kailasapathy Signature Date 7/20/16

FILED  
 WASHTENAW COUNTY, MI  
 2016 JUL 20 P 4:30  
 LAURENCE WESTERDAUM  
 COUNTY CLERK/REGISTRAR



1. Committee I.D. Number C-2010-012

2. Committee Name Committee To Elect Sumangala Kailasapathy

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>5,485.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>5,485.00</u>	(18.) \$ <u>5,485.00</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ <u>                    </u>	(19.) \$ <u>0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>5,485.00</u>	(20.) \$ <u>5,485.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>225.00</u>	(21.) \$ <u>225.00</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ <u>                    </u>	(22.) \$ <u>0.00</u>
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1,579.84</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>                    </u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>                    </u>	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>1,579.84</u>	(23.) \$ <u>1,579.84</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>                    </u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>                    </u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>                    </u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>                    </u>	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>780.21</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>5,485.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>6,265.21</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>1,579.84</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>4,685.37</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES      4. Date of Receipt <u>04/13/16</u> Name & Address: <b>SEETOO AMY D.</b> 3111 CEDARBROOK RD. ANN ARBOR 48105-3407		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/15/16</u> Name & Address: <b>RABHI PEGGY D.</b> 1991 UPLAND DR ANN ARBOR, MI 48105		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/15/16</u> Name & Address: <b>NAGOURNEY PETER</b> LINCOLN AVENUE ANN ARBOR, MI 48104		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/15/16</u> Name & Address: <b>SCHRIBER ANN SNEED</b> 2116 DORSET RD. ANN ARBOR, MI 48104		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$300.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/16/16</u></p> <p>Name &amp; Address: SHAFFRAN EDWARD A. 209 S. FOURTH AVENUE, 1C ANN ARBOR, MI 48104</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>	\$ <u>95.00</u>	\$ <u>95.00</u>
Click Here for Memo Itemization <input type="button" value=""/>		
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/17/16</u></p> <p>Name &amp; Address: YORK CYNTHIA M. 710 NORTHSIDE AVE. ANN ARBOR, MI 48105-1135</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>	\$ <u>100.00</u>	\$ <u>100.00</u>
Click Here for Memo Itemization <input type="button" value=""/>		
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/17/16</u></p> <p>Name &amp; Address: MITCHELL RITA L. 621 5TH ST ANN ARBOR, MI 48103</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u>      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>	\$ <u>150.00</u>	\$ <u>150.00</u>
Click Here for Memo Itemization <input type="button" value=""/>		
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/17/16</u></p> <p>Name &amp; Address: ECKSTEIN PETER C. 2551 LONDONDERRY RD ANN ARBOR, MI 48104-4017</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u>      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>	\$ <u>105.00</u>	\$ <u>105.00</u>
Click Here for Memo Itemization <input type="button" value=""/>		

Page Subtotal **\$450.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES      4. Date of Receipt <u>04/18/16</u> Name & Address: <b>POTTS ETHEL K.</b> <b>1014 ELDER BLVD.</b> <b>ANN ARBOR, MI 48103</b>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/21/16</u> Name & Address: <b>STROWE LAURA</b> <b>1327 BROADWAY ST.</b> <b>ANN ARBOR, MI 48105</b>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/21/16</u> Name & Address: <b>BORIS KATHERYN A.</b> <b>P.O. BOX 8117</b> <b>ANN ARBOR, MI 48107-8117</b>		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/21/16</u> Name & Address: <b>WILLIAMS MARIAN L.</b> <b>1836 SAXON</b> <b>ANN ARBOR, MI 48103</b>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$200.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

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**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES      4. Date of Receipt <u>04/24/16</u> Name & Address: <b>RALPH ALICE J.</b> <b>1607 E. STADIUM BLVD.</b> <b>ANN ARBOR, MI 48104</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>40.00</u>	\$ <u>40.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/24/16</u> Name & Address: <b>HATHAWAY MARY A.</b> <b>1407 WAKEFIELD AVE.</b> <b>ANN ARBOR, MI 48103-4630</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/25/16</u> Name & Address: <b>QUINN WILLIAM J.</b> <b>3001 BARCLAY WAY</b> <b>ANN ARBOR, MI 48105-9464</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/27/16</u> Name & Address: <b>BANNISTER ANNE L.</b> <b>612 N. MAIN STREET</b> <b>ANN ARBOR, MI 48104</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>75.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$315.00**  
 Grand Total of All Schedules 1A  
 (Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES      4. Date of Receipt <u>04/27/16</u> Name & Address: <b>ANNIS THEODORE C.</b> <b>414 SOUTH MAIN ST, # 808</b> <b>ANN ARBOR, MI 48104</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____  Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>250.00</u>
Click Here for Memo Itemization		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/28/16</u> Name & Address: <b>HOLSINGER KAY</b> <b>2300 KENT ST.</b> <b>ANN ARBOR, MI 48103</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____  Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>150.00</u>	\$ <u>150.00</u>
Click Here for Memo Itemization		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/28/16</u> Name & Address: <b>MICHENER ANNA JANE</b> <b>2115 DEVONSHIRE RD.</b> <b>ANN ARBOR, MI 48104-4059</b>  5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____  Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
Click Here for Memo Itemization		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/30/16</u> Name & Address: <b>ARMENTROUT VIVIENNE N.</b> <b>920 VESPER RD.</b> <b>ANN ARBOR, MI 48103</b>  5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____  Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
Click Here for Memo Itemization		

Page Subtotal **\$550.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES	4. Date of Receipt <u>05/01/16</u>	
Name & Address: <b>EDWARDS ANN</b> 6857 ALDEN DRIVE WEST BLOOMFIELD, MI 48324		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/01/16</u>	
Name & Address: <b>KAPLAN NANCY</b> 3065 HUNTING VALLEY DR. ANN ARBOR, MI 48104-2842		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/01/16</u>	
Name & Address: <b>LUMM JANE B.</b> 3075 OVERRIDGE DR. ANN ARBOR, MI 48104		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CITY COUNCIL MEMBER</u> Employer <u>CITY OF ANN ARBOR</u> Business Address <u>301 E. HURON ST, ANN ARBOR, MI 48107</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/02/16</u>	
Name & Address: <b>PERRY SUSAN A.</b> 1708 FAIR STREET ANN ARBOR, MI 48103-4150		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE BROKER</u> Employer <u>SUE PERRY REAL ESTATE</u> Business Address <u>1708 FAIR ST, ANN ARBOR, MI 48103-4150</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$700.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES	4. Date of Receipt <u>05/02/16</u>	
Name & Address: <b>GLORIE CATHERINE</b> 827 BROOKS ST. ANN ARBOR, MI 48103		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization 	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/03/16</u>	
Name & Address: <b>WHITE DOUGLAS K.</b> 330 S. SEVENTH ST. ANN ARBOR, MI 48103-4339		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization 	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/03/16</u>	
Name & Address: <b>DETTER RAYMOND A.</b> 120 N. DIVISION, APT.1 ANN ARBOR, MI 48104		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization 	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/03/16</u>	
Name & Address: <b>HOLLAND MAURITA PETERSON</b> 2701 LOWELL RD. ANN ARBOR, MI 48103-2249		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization 	

Page Subtotal \$275.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES      4. Date of Receipt <u>05/03/16</u> Name & Address: <b>EATON JOHN E.</b> <b>1606 DICKEN DRIVE</b> <b>ANN ARBOR, MI 48103</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MARK H. COUSENS</u> Business Address <u>26261 EVERGREEN RD, SUITE 110, SOUTHFIELD, MI 48076</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/03/16</u> Name & Address: <b>HUGONOT-HABER ODILE</b> <b>531 THIRD STREET</b> <b>ANN ARBOR, MI 48103-4956</b>  5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/03/16</u> Name & Address: <b>LIPSON ERIC B.</b> <b>1318 ROSEWOOD ST.</b> <b>ANN ARBOR, MI 48104-8229</b>  5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/03/16</u> Name & Address: <b>LEWIS CHARLES D.</b> <b>330 S. SEVENTH ST.</b> <b>ANN ARBOR, MI 48103</b>  5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>25.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal \$375.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES    4. Date of Receipt <u>05/03/16</u> Name & Address: <b>CARUSO VINCENT P.</b> <b>556 GLENDALE CIR.</b> <b>ANN ARBOR, MI 48103-4177</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>75.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>05/03/16</u> Name & Address: <b>KLINGSTEN JANE UEDA</b> <b>3347 ELSINORE CT</b> <b>ANN ARBOR, MI 48105-9452</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>NONE</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>150.00</u>	\$ <u>150.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>05/06/16</u> Name & Address: <b>POWELL VALERIE J.</b> <b>2940 LAKEHURST CT.</b> <b>ANN ARBOR, MI 48105</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20.00</u>	\$ <u>20.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4    PAC Receipt? <input type="checkbox"/> YES    4. Date of Receipt <u>05/07/16</u> Name & Address: <b>JENSEN SHEILA</b> <b>2950 LAKEHURST CT</b> <b>ANN ARBOR, MI 48105-1282</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$345.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES      4. Date of Receipt <u>05/07/16</u> Name & Address: <b>BJORN LARS</b> 712 E. ANN STREET ANN ARBOR, MI 48104  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/10/16</u> Name & Address: <b>STEPHEN KUNSELMAN FOR COUNCIL</b> 2885 BUTTERNUT ST. ANN ARBOR, MI 48108  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/10/16</u> Name & Address: <b>CARMAN WENDY J.</b> 2340 GEORGETOWN BLVD. ANN ARBOR, MI 48105-2946  5. If over \$100.00 cumulative, please provide: Occupation <u>EPIDEMIOLOGIST</u> Employer <u>OPTUM EPIDEMIOLOGY</u> Business Address <u>315 E. EISENHOWER PKWY SUITE 3050, ANN ARBOR, MI 48108</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>150.00</u>	\$ <u>150.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/10/16</u> Name & Address: <b>RABHI PEGGY D</b> 1991 UPLAND DR ANN ARBOR, MI 48105  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal \$350.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES      4. Date of Receipt <u>05/20/16</u> Name & Address: <b>MARTIN MICHAEL C.</b> <b>115 DEPOT ST.</b> <b>ANN ARBOR, MI 48104</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE DEVELOPER</u> Employer <u>FIRST MARTIN CORPORATION</u> Business Address <u>115 DEPOT ST, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	<u>\$ 500.00</u>	<u>\$ 500.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/28/16</u> Name & Address: <b>READING AGNES</b> <b>161 LAURIN COURT</b> <b>ANN ARBOR, MI 48105</b>  5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	<u>\$ 100.00</u>	<u>\$ 100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/03/16</u> Name & Address: <b>DASCOLA ROBERT M.</b> <b>1815 BALDWIN AVE</b> <b>ANN ARBOR, MI 48104-4446</b>  5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	<u>\$ 100.00</u>	<u>\$ 100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/06/16</u> Name & Address: <b>NYSTUEN GWEN L.</b> <b>1016 OLIVIA</b> <b>ANN ARBOR, MI 48104</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	<u>\$ 200.00</u>	<u>\$ 200.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$900.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

1. Committee I.D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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? <input type="checkbox"/> YES      4. Date of Receipt <u>06/09/16</u> Name & Address: <b>WILLIAMS WARREN</b> <b>2708 LOWELL RD.</b> <b>ANN ARBOR, MI 48103</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/16/16</u> Name & Address: <b>ELDER NANCY</b> <b>175 BRIARCREST DR. #112</b> <b>ANN ARBOR, MI 48104</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>25.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/08/16</u> Name & Address: <b>HATHAWAY WILLIAM</b> <b>3424 STOWE ST.</b> <b>ANN ARBOR, MI 48103</b>  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/10/16</u> Name & Address: <b>DAHLMANN BERNARD CHARLES</b> <b>1552 NEWPORT CREEK DR.</b> <b>ANN ARBOR, MI 48103-2200</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE MANAGEMENT</u> Employer <u>DAHLMANN PROPERTIES</u> Business Address <u>300 S. THAYER ST, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal	\$725.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$5,485.00

Enter this total on line 3a of Summary Page.



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

**C-2010-012**

1. Committee I. D. Number

2. Committee Name Committee To Elect Sumangala Kailasapathy

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>SAWICKI AND SON</b>  Address <b>1521 W. LAFAYETTE DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>YARD SIGNS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/24/16</u> Date	<u>\$ 557.83</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>ANN ARBOR JAYCEES FOUNDATION</b>  Address <b>P.O. BOX 1866 ANN ARBOR, MI 48106</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>4TH OF JULY PARADE</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/25/16</u> Date	<u>\$ 50.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>HEIKKINEN PRODUCTION</b>  Address <b>1410 W. MICHIGAN AVENUE YPSILANTI, MI 48197</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>T-SHIRTS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/31/16</u> Date	<u>\$ 219.42</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>CITY PRINTING COMPANY, INC.</b>  Address <b>411 WEST CROSS ST., PO BOX 980333 YPSILANTI, MI 48198-0333</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>ELECTION CARDS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/16/16</u> Date	<u>\$ 514.10</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <b>BIZZELL DAWN</b>  Address <b>1614 LONGSHORE DRIVE ANN ARBOR, MI 48105</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>REIMBURSEMENT FOR MAIL/STAMPS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/06/16</u> Date	<u>\$ 222.50</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$1,563.85**

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

**C-2010-012**

1. Committee I. D. Number

2. Committee Name Committee To Elect Sumangala Kallasapathy

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>KIM KACHADOORIAN</b>  Address <b>204 E. DAVIS AVE.</b> <b>ANN ARBOR, MI 48104</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Reimbursement for domain name payment</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/19/16</u> Date	<u>\$ 15.99</u>
Expenditure #2 Name _____  Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name _____  Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____  Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____  Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page

**\$15.99**

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

**\$1,579.84**

Enter this total  
on line 8a of  
Summary Page





**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2010-012  
2. Committee Name Committee to elect Sumangala Kailasapathy

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>05/01/16</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>35</u>	5. Type of Fund Raising Activity <u>Meet and Greet</u>	6. Address and Name (If any) of the place where the activity was held. <u>1614 Longshore Dr. Ann Arbor, MI 48105</u> <input checked="" type="checkbox"/> Private Residence
---	---	---	--

7. Total Contributions \$975.00

8. Other Receipts \_\_\_\_\_

9. Gross Receipts (Add lines 7 and 8) \_\_\_\_\_

10. Total Cost of Event \$175.00  
(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 (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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.



**ITEMIZED IN-KIND CONTRIBUTIONS**

**SCHEDULE 1-IK**

1. Committee I. D. Number C-2010-012

**CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect Sumangala Kailasapathy

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 Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>BIZZELL DAWN</b> <b>1614 LONGSHORE DRIVE</b> <b>ANN ARBOR, MI 48105</b> If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Appetizers for fundraiser</u> 5. Date Of Receipt: <u>05/01/16</u> 6. Vendor Name & Address:	\$ <u>100.00</u>	\$ <u>100.00</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>THOMPSON GLENN</b> <b>100 LONGMAN LANE</b> <b>ANN ARBOR, MI 48105</b> If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Office supplies for fundraiser letters</u> 5. Date Of Receipt: <u>04/25/16</u> 6. Vendor Name & Address:	\$ <u>75.00</u>	\$ <u>75.00</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>KAILASAPATHY SUMI</b> <b>2530 MALLARD CT</b> <b>ANN ARBOR, MI 48105</b> If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Office supplies for flyers</u> 5. Date Of Receipt: <u>05/05/16</u> 6. Vendor Name & Address:	\$ <u>50.00</u>	\$ <u>50.00</u>
Click Here for Memo Itemization			
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$225.00**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) **\$225.00**

Enter this total  
on line 6 of Summary  
Page