

CANDIDATE COMMITTEE COVER PAGE

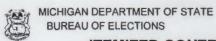
FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and of	d signed by andidate.	3. This Statement covers:	rom	to 7/20	/14
1. Committee I.D. Number		4. Candidate Last Name	Fire	st Name	M.I.
c-2014-015		McMullen	Samue		J
2. Committee Name		4a. Office Sought Including D City Council, Ward 3	istrict # or Communi	ty Served (If applic	able)
Committee to Elect Samuel Me	cMullen	4b. County of Residence W	ASHTENAW		
5. Committee's Mailing Address		6. Treasurer's Name & Resid	lential Address		
P.O. Box 2116		Samuel McMullen			
Ann Arbor, MI, 48106		701 E. University			
		Ann Arbor, MI, 4810	09		
Area Code and Phone (734) 834-9339 If the address in this box is different from the commailing address on the Statement of Organization, be sent to this address by the filing official.		Area Code & Phone (734) 8	334-9339		
7. Treasurer's Business Address		8. Designated Record Keepe	er's Name and Mailir	ng Address (If the c	committee has a
N/A		Designated Record Keeper)			
Area Code and Phone		Area Code and Phone			
9. TYPE OF STATEMENT		Alea Code and Filone	9e. Dissolution	of Candidate Con	nmittee
9a. X Pre-Election OR 9b. Post-Election		NLY if candidate e ballot for the	By checking	this item IANe certi	fy any outstanding debt
	current yea		by the committee	to the candidate or	r his or her spouse is here onger collectible from
Pre-Election or Post-Election Statement relates to:	July Qua	rterly	the committee. T	he committee has	no outstanding assets,
Primary			owes no lates fee	s or has any outsta	inding debt.
General	October	Quarterly	Further, if the diss	solution cannot be	granted, that this be
Convention			considered a requ	lest for the Reportin	ng Waiver.
Special	9c. 🗖 🗛 🗀	rel Chatamant (
School	LAnnu	ral Statement () Coverage Year	Effectiv	e date of dissolution	n
	ad Ame	ndment to Campaign Statement			_
Caucus	(Con indic	nplete Item 9a, 9b, 9c or 9e to ate which Statement is being inded.)	Note: The disposi	ition of residual fun the Summary Pag	ids must be reported on e.
Date of Election, Convention or Caucus					
08/05/14					
00/00/14					
10. Verification: I\We certify that all reasonable diligmy\our knowledge and belief the contents are true, Current Treasurer or Designated Record Keeper Samuel McM	accurate and	d in the preparation of this stater complete.	ment and attached so		7/25/14
Type or Print Name		Signature	11		
Candidate Samuel McMullen		, Surual MMA	Men	Date	7/25/14
Type or Print Name	•	Signature			

1. Committee I.D. Number __c-2014-015

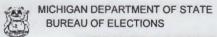
SUMMARY PAGE CANDIDATE COMMITTEE

RECEIPTS COMMITTEE	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 5,315.20	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 5,315-20	(18.)\$ 5,315.20
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.)\$ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 5, 315-20	(20.) \$ 5,315.20
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 30.00	(21.)\$ 30.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	-11-0-11	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 3927.09	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$O_O	2022 00
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 3927.09	(23.)\$ 3927.09
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$O.OO	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	A 00	000
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$ 0.00
12. Debts and Obligations	5 03	
a. Owed by the Committee (Schedule 1E)	(12a.)\$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$O_O	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 0.00	
(Enter zero if no previous reports have been filed.)	(14)+\$ 5.315-20	
 Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 	(14.)+\$ 5,313-20	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ 5,315-20	
16. Amount expended during reporting period	2 127 00	
(Add lines 9 and 11)	(16.) - \$	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 1,388.11	
(555,561,000,100,100,10)	· · · · · · · · · · · · · · · · · · ·	



CANDIDATE COMMITTEE

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 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: Molly M. Mullen - Laird 820 Granger Ave Am Arbor, M., 4804 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: X Direct Loan from a person X F	7/15/14		s 500.00 or Memo Itemization
3. Contribution #2 Name & Address Steph annie Moore 8198 Cyores Circle Dexter, My 4830 5. If over \$100.00 cumulative, please provide: Business Address			s 5.00 or Memo Itemization
Direct Loan from a person B. Contribution # 3 PAC Receipt? YES 4. Date of Receipt And Arbor, M., 4804 Solution # 3 PAC Receipt? YES 4. Date of Receipt And Arbor, M., 4804 Solution # 3 PAC Receipt? YES 4. Date of Receipt Arbor, M., 4804 Solution # 3 PAC Receipt? YES 4. Date of Receipt Arbor, M., 4804 Solution # 3 PAC Receipt? YES 4. Date of Receipt Arbor, M., 4804 Solution # 3 PAC Receipt? YES 4. Date of Receipt Arbor, M., 4804 Solution # 3 PAC Receipt? YES 4. Date of Receipt Arbor, M., 4804 Solution # 3 PAC Receipt? YES 4. Date of Receipt PAC Receipt PAC Receipt? YES 4. Date of Receipt PAC PAC Receipt PAC	Fund Raiser	\$ 100.00 Click Here fo	s 100.00 r Memo Itemization
Business Address Type of Contribution: Direct Loan from a person B. Contribution # 4 Name & Address Waren Totten 2377 Leslie Circle Awn Arbour, MI, U8105	Fund Raiser S/9/14	\$20.00	\$ 20.00
5. If over \$100.00 cumulative, please provide: Occupation Employer		Click Here fo	r Memo Itemization
	Fund Raiser		
	Page Subtotal Total of All Schedules 1A on last page of Schedule)	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 4/22/14 Name & Address: Samuel McMullen 701 E. University Ann Arbor, MI, 48109	§ 200.00	s Z00.00
5. If over \$100.00 cumulative, please provide: Occupation Student Employer University of Michigan Business Address 500.5. State, Ann Arbor, MI, 48109	Click Here fo	r Memo Itemization
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution #2 Name & Address Rifa Hench 2915 Leslie Park cir	s 20.00	20.00
1 1 LESITE PAINE	\$	\$ 0
Ann Arbor, M1, 48105	Click Hore for	Mome Itemization
5. If over \$100.00 cumulative, please provide:	Click Here to	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person		
Name & Address. 865 Brookside Ann Arbor MI, 48105 5. If over \$100.00 cumulative, please provide: Occupation	Click/Here for	\$ 2.00 Memo Remization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? TYES 4. Date of Receipt 1/27/11 Name & Address Samuel McMullen 701 E. University Any Arbor, M., 48109	\$5.00	, 205.00
5. If over \$100.00 cumulative, please provide:	Oliale Have fau	Mana Haminatian
Occupation Student Employer VOF M	Click Here for	Memo Itemization
1 1 - N A A A A A A A A A A A A A A A A A A	4	
Dusiness Address	ı	
Type of Contribution:	14 000 AN	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 2 of 24	4 /2	

fundrazv



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

2. Committee Name Committee to Flect Source Middlen CANDIDATE COMMITTEE Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) PAC Receipt? 3. Contribution # 1 4. Date of Receipt Name & Address: nristopher McMulle nneve Wiener Str. , 20.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer_ **Business Address** Type of Contribution: Loan from a person **Fund Raiser** 4. Date of Receipt S PAC Receipt? 3. Contribution #2 Name & Address ,50.00 , SO.00 Granger 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer_ Occupation _ Business Address Type of Contribution: Direct Fund Raiser Loan from a person 4. Date of Receipt 5 PAC Receipt? 3. Contribution #3 Name & Address: green dry cleaners Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer_ Occupation **Business Address** Type of Contribution: Direct Loan from a person **Fund Raiser** 4. Date of Receipt 5/12/10 3. Contribution # 4 PAC Receipt? YES Name & Address ridge Club Gr Apt. 206 \$10.00 \$ 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation. Employer _ **Business Address** Type of Contribution: Direct Fund Raiser Loan from a person Page Subtotal

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

Enter this total on line 3a of Summary Page.

Page 3 of 24



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number <u>C-2014-015</u>

2. Committee Name Committee to Elect Samuel N' Mullen CANDIDATE COMMITTEE Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Contributor (Through Committee (PAC) Report all contributions regardless of amount. date of receipt) 3. Contribution # 1 PAC Receipt? 4. Date of Receipt Name & Address: ew Nazzaro , SO.00 , SO.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer_ **Business Address** Type of Contribution: **Fund Raiser** Loan from a person 3. Contribution #2 PAC Receipt? 4. Date of Receipt Name & Address s 50.00 s S0.00 Ann Arbor, M1, 48103 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer_ Occupation _ Business Address Type of Contribution: V Direct Fund Raiser Loan from a person 3. Contribution #3 PAC Receipt? 4. Date of Receipt Name & Address: Camille Vettra ino \$ 5.00 . S.00 P.O. Box 598, Bellah, MI Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer_ Occupation_ **Business Address** Direct Type of Contribution: Loan from a person **Fund Raiser** 3. Contribution # 4 PAC Receipt? 4. Date of Receipt Name & Address O E. Aun St. Apt 7 s 20.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_ Employer _ **Business Address**

Page Subtotal

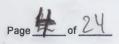
Grand Total of All Schedules 1A (Complete on last page of Schedule)

Fund Raiser

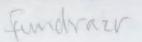
Loan from a person

\$ 125.00

Enter this total on line 3a of Summary Page.



Type of Contribution: X Direct





MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

Committee To Elect Samuel McMullen

Hartmut Junge 2 Hillcrest dv. Paso Robles, CA, 93446 5. If over \$100.00 cumulative, please provide: Click Coccupation		
Name & Address: Hartmut Junge 2 Hillcrest dv. Paso Robles, CA, 93446 5. If over \$100.00 cumulative, please provide: Cocupation		7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 Name & Address Zac Evans - Golden 1598 Jones Ann Arbor, MI, 48105 5. If over \$100.00 cumulative, please provide: Click Occupation		\$ 35.00 r Memo Itemization
According to the state of the s		
Occupation	00_	s_10.00
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/14/14 3. Keppler Court Supplement	lere for	Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/14/14 3. Keppler Court Ann Arbor, MI, 48103 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 5/14/14 Margaret Erlewine 315 Marion Big Rapids, MI, 49 307 5. If over \$100.00 cumulative, please provide:		.
3. Contribution # 3 Name & Address: Linda Diame Feldt 3 Keppler Court Ann Arbor MI, 48103 5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 Name & Address Margaret Erlewine 315 Marion Big Rapids, MI, 49 307 5. If over \$100.00 cumulative, please provide:		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 Name & Address PAC Receipt? YES 4. Date of Receipt 6/14/14 Margaret Erlewine 3.5 Marion Big Rapids, MI, 49 307 5. If over \$100.00 cumulative, please provide:		\$ 10.00 Memo Itemization
3. Contribution #4 Name & Address Margaret Erlewine 315 Marion Big Rapids, MI, 49 307 5. If over \$100.00 cumulative, please provide:		
Of it of the follow continue to provide.	20	, 15.00
	lere for	Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		

Page 5 of 24

Enter this total on line 3a of Summary Page.

fundrazi

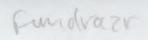


MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

CANDIDATE COMMITTEE

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 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: Carlene and Miron Stolar 566 McLachlam Pt Evant, MI, 49631 5. If over \$100.00 cumulative, please provide:			\$ SO . OO
Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person F	und Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Susann Eddy 25525 Ormand Dr. South Field, MI, 48033	5/15/14	<u>\$ 20.00</u>	\$ 20.00
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
'3usiness Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt Name & Address: Kerry Molloy 9 Harbor Heights Dr. Centerport, Ny, 117 21 5. If over \$100.00 cumulative, please provide: Employer	5/15/14		\$ 20.00 Memo Itemization
Business Address Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #4 Name & Address Claudia Browne 2847 white wood St. Ann Arbor, MI, 48104	5/15/14	s 20.00	s 20.00
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
	Fund Raiser		
	Page Subtotal	\$ 110	
	Total of All Schedules 1A on last page of Schedule)	Enter this total on line 3a of Summary Page.	



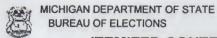


MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

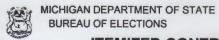
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 5/15/14 Name & Address: Penny and Jerry Kruse 919 Pleasant dr. 48197	<u>\$ 20.00</u>	s 20.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/15/14 Name & Address Margaret Wessel Walker		
3007 Gedd es Ave. Ann Arbor, MI, 48104	\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:	•	
3. Contribution #3 Name & Address: Heidi and Fric Sproull 6650 Joy rd. Dexter, MI, 48130 5. If over \$100.00 cumulative, please provide: Occupation Employer		\$ 25.00 r Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 Name & Address Enily Weinstein 82 westland Ave. West Hartford, CT, 06107 5. If over \$100.00 cumulative, please provide:		\$ 25.00
Occupation Employer	Click Here lo	Weillo Reilization
Business Address		
Page Subtotal	\$ 120.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
7 7 V	Enter this total on line 3a of Summary	



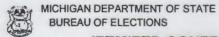
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first middle initial. Check box to indicate if contribution is from a Political Committee or an Independe Committee (PAC) Report <u>all</u> contributions regardless of amount.		7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 5/21/10 Name & Address: Mary Hirzel 1101 Baldwin Ave Ann Arbor, MI, 48104 5. If over \$100.00 cumulative, please provide:	\$100,00) \$100.00
	Click Here t	or Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 Name & Address James and Lori Belanger 3211 Creston Circle Superior TWSP., M1, 48198		; 25.00
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Employer	Allena .	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: PAC Receipt? YES 4. Date of Receipt \$\frac{15\text{E}}{25/\text{\frac{14}{4}}}\$ Noah Burns 2372 Lesli e Circle Ann Arbor, MI, 48105 5. If over \$100.00 cumulative, please provide:	\$ 17.00 Click Here fo	\$ 17.00 or Memo Itemization
Occupation Employer	_	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #4 Name & Address Samoutha Pavich 417 Harriet Are Monea Polis, MN, 55419 5. If over \$100.00 cumulative, please provide: Description Employer	\$ 10.00	\$ 10.00
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page	Subtotal \$ 152.00	
Grand Total of All Scher (Complete on last page of S	A STATE OF THE STA	



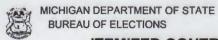
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Matt and Jen Pavich UNIVER Paper MINN eapolis, MN, SSY19 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	Ψ	s 20.000 or Memo Itemization
3. Contribution #2 Name & Address PAC Receipt? YES 4. Date of Receipt O5/28/19 Septimental Pack Receipt O5/28/19 Robert V V V V V V V V V V V V V V V V V V V		s
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 Name & Address: Fund Raiser Tom Members PAC Receipt? YES 4. Date of Receipt OS/28/14 Tom Members Packet Pack		\$ 50.00 Memo Itemization
3. Contribution #4 Name & Address AnneMarie Torresen 4645 Alton Place NW Washington DC 20016 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		\$ 100.00 Memo Itemization
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 9 of 24	Enter this total on line 3a of Summary Page.	



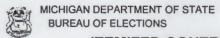
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt OS/18/19 Name & Address: Carole Courter 2557 W bel hi Ann Arbor, MI, 48103 5. If over \$100.00 cumulative, please provide:		\$ 20.00
Occupation Employer Business Address Type of Contribution:		
3. Contribution #2 Name & Address PAC Receipt? YES 4. Date of Receipt OS/ 29/14 Zione Grosshue Sch 719 Spring St. Ann Arbor, M1, 4810 3 5. If over \$100.00 cumulative, please provide:		s 5.00
Occupation Employer Business Address Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 Name & Address: PAC Receipt? YES 4. Date of Receipt O6/1/14 Avery Luck II O4 willow brook Dr. Potomac, MD, 20854 5. If over \$100.00 cumulative, please provide:		\$ 20.00 Memo Itemization
Occupation Employer Business Address Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/1/14 Name & Address Marco Campos 602 Cam Nence St. Ann Arbor, M1, 48104 5. If over \$100.00 cumulative, please provide:		s (00.00
Occupation Employer	Click Here los	Wemo temization
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal	\$ 145.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 10 of 24	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	ommittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Avery Luck IIIO4 Willow brook Dr Potomac, MD, 20854 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: X Direct Loan from a person			\$ \$ 25.00 or Memo Itemization
Type of Contribution: Direct Loan from a person 3. Contribution #2 PAC Receipt? YES 4. Date of F Name & Address Many garlet Rembost 885 Oak date Rd. Ann Arbor M 48105 5. If over \$100.00 cumulative, please provide: Occupation Employer	-/ 1/ 1		\$ 30.000 or Memo Itemization
Rusiness Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Name & Address: Moird Walsh Shittler str. 15 Stuttyart DE, 7cd 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person			\$ 35.00 r Memo Itemization
Hame & Address 4315 W Liberty Vol. Ann Arbor, M1, 4810; 5. If over \$100.00 cumulative, please provide: Occupation Employer	Receipt 6/2/14	-	\$ 50.00 r Memo Itemization
Type of Contribution: Direct Loan from a person	Fund Raiser		
Direct Coan from a person	Page Subtotal	\$ 120.00	
Page V of 24	Grand Total of All Schedules 1A Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



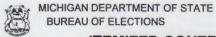
CANDIDATE COMMITTEE

2. Committee Name Committee To Elect Samuel McMullen

Enter contributor's name and address. If contribution is from an individual middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	The state of the s	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of F Name & Address: Karen Levin 393 Park lake Are Ann Arbor, MI, 48103 5. If over \$100.00 cumulative, please provide:	Receipt 6/2/14		\$20.00
Occupation Employer		Click Here fo	or Memo Itemization
Business Address Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of R Name & Address Diana Laird 21 Cumberland St. Boston, MA, 02115	eceipt <u>6/2/14</u>	\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide:		Click Here fo	r Memo Itemization
Occupation Employer	44.4		
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address: Elizabeth Mcorm 2936 Weatherly Ct Blacks burg, VA, 2406 5. If over \$100.00 cumulative, please provide:	ick		\$ 50.00 Memo Itemization
Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address Forrest Hej Kal 5780 W Liberty rd Ann Arbor MI, 4810 5. If over \$100.00 cumulative, please provide:	Receipt 6/2/14	\$30.00	\$ 30.00
5. If over \$100.00 cumulative, please provide:	3	000000000000000000000000000000000000000	A
Occupation Employer		Click Here for	Memo Itemization
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal Grand Total of All Schedules 1A	\$ 150-00	-
(0	Complete on last page of Schedule)	Enter this total on	

Page 12 of 24

Page.

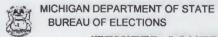


CANDIDATE COMMITTEE

2. Committee Name

Committee To Elect Samuel McMullen

	to indicate if contri		nittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
- 11	ative, please prov	Brown st. MI, 48103	Fund Raiser		s 30.00
3. Contribution #2 Name & Address Contribution #2 Name & Address Scontribution #2 Address 5. If over \$100.00 cumulation Occupation Business Address	PAC Receipt? [Ura h L 3 24 Co M Arbor ative, please prov	YES 4. Date of Reco ewis - Crow mterbury Ro MI, U8104 ide:	eipt 6/2/14		\$ 10.00 or Memo Itemization
5. If over \$100.00 cumula Occupation Business Address	PAC Receipt? YMThia Y93 Su NWWY, ative, please prov	Loan from a person YES 4. Date of Rec Wilson Ourthout MI, U8169 ide: Employer	Fund Raiser peipt 6/3/14	\$ 20.00 Click Here fo	\$ 20.00 r Memo Itemization
Type of Contribution: 3. Contribution # 4 Name & Address 5. If over \$100.00 cumulation Occupation Business Address	PAC Receipt? USa K D North Cago, IL attive, please prov	spaulding Ave. 3	Fund Raiser ceipt 6/6/14 3R	\$SO.00 Click Here fo	s 50,00 r Memo Itemization
Type of Contribution:	Direct [Loan from a person	Fund Raiser Page Subtotal	# 110 00	
Page 13 of 24			Grand Total of All Schedules 1A applete on last page of Schedule)	Enter this total on line 3a of Summary Page.	

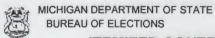


CANDIDATE COMMITTEE

1. Committee I.D. Number _____C-2014-015

Committee To Elect Samuel McMullen

CANDIDATE CONNITTIEE 2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: ES Ther Centers 4. Date of Receipt 6/19/19 ES Ther Centers 124 National Santa Cruz, CA, 95060 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 20.00 Click Here f	\$ 20.00 or Memo Itemization
3. Contribution #2 Name & Address Martha McDowell 66 23 Sweezy Lake vd. Brooklyn M, 49230 5. If over \$100.00 cumulative, please provide: Occupation Employer Type of Contribution: Direct Loan from a person Fund Raiser		\$ 100.00 or Memo Itemization
3. Contribution #3 Name & Address: PAC Receipt? YES 4. Date of Receipt 5/24/14 Tobriand Schumonn 105 Highlake Ave Ann Actor, M, 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	s 1.00 Click Here fo	\$ 1.00 r Memo Itemization
3. Contribution # 4 Name & Address Tabriana Schumann 105 High lake Ave Ann Arbor, MI,48103 5. If over \$100.00 cumulative, please provide: Occupation Employer	s 1.00 Click Here fo	s_2.00 r Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	5 100 00	
Page 14 of 24	Enter this total on line 3a of Summary Page.	



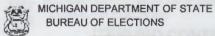
CANDIDATE COMMITTEE

2. Committee Name Committee To Elect Samuel McMullen

Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5/26/14 Name & Address: Alexander Wiener 3666 Frederick dr. Aum Arbor, M, 48105 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	\$ 50-00 Click Here	\$ 50.00 for Memo Itemization
Ann Arbor M, 48105 If over \$100.00 cumulative, please provide: Occupation Employer Business Address Loan from a person Fund Raiser		s 2 - 10 for Memo Itemization
Ann Arbor, MI, 98105 If over \$100.00 cumulative, please provide: Discrete Contribution #3 PAC Receipt? YES 4. Date of Receipt 6/14/14 Ann Arbor, MI, 98105 Employer Business Address	\$ <u>50.00</u> Click Here fo	s 50.00 or Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6/14/14 Name & Address Stein 205 Pine ridge Aum Arbor, M, 48105 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		\$ 35.00 or Memo Itemization
Page Sub Grand Total of All Schedules (Complete on last page of Sched	1A	

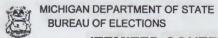
Page 15 of 24

line 3a of Summary Page.



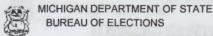
CANDIDATE COMMITTEE

	to indicate if contri	bution is from a Political Com	II, enter last name, first name, mittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
2.7 Ans 5. If over \$100.00 cumul	,	ylor ord M, 48104 ide:	Seipt 6/14/14	\$ 50.00 Click Here fo	s 50.00 or Memo Itemization
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Name & Address 111 0	PAC Receipt? [lifer Au by Willow to Mac, 1	TYES 4. Date of Reconstruction Luck who was dr. 40, 20854	(s 500.00
5. If over \$100.00 cumul	ative, please prov	stephen 1	R. Glaser MD P.C.	Click Here to	r Memo Itemization
Occupation 71- 0- Susiness Address 152	35 Shall	by Grove vd. #	R. Glaser MD. P.C.	20850	
Type of Contribution:		Loan from a person	Fund Raiser		
5. If over \$100.00 cumul Occupation	ative, please prov	ide: Employer		\$Click Here fo	\$r Memo Itemization
Business Address	1				
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of Re	eceipt	\$	\$
5. If over \$100.00 cumul	ative, please prov	ide:			
Occupation		Employer		Click Here fo	r Memo Itemization
Type of Contribution:	70	Loan from a person	Fund Raiser		
Type of Contribution.	Direct	Loan from a person		PCA OA	
Page 10 of 24			Page Subtotal Grand Total of All Schedules 1A mplete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

ZATO DATE COMMITTEE		VIII VIII VIII VIII VIII VIII VIII VII
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 Name & Address: James and Loni Belanger 3211 Creston circle Superior twsp. M1, 48198 5. If over \$100.00 cumulative, please provide: Occupation Employer	s 50.00 Click Here fo	75.00 \$ 50.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 Name & Address Roger and Victoria Evans 2016 Anderson Ave. Am Arbor, MI, 48104	<u>\$50.00</u>	\$ 50.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer Business Address	-	
Type of Contribution: Direct Loan from a person Fund Raiser		
Vickie Wellmam and Iam Keith Ma 246 towner blvd. Ann Arbor, MI, 48 104 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: \(\mathbb{D} \) Direct \(\mathbb{L} \) Loan from a person \(\mathbb{T} \) Fund Raiser	\$ 100-00	\$
3. Contribution #4 Name & Address DWIGHT Lang and Sylvia Lang 1118 Wells St. Ann Arbor, MI, 48104	s 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$ 300.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number C-2014-015

2. Committee Name Committee to Elect Samuel McMulla Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? 4. Date of Receipt Name & Address: Yumiko Harris, 739 Rose dr. \$ 20.00

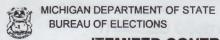
5. If over \$100.00 cumulative, please provide: Ann Arbor, MI, 48103 . 20.00 Click Here for Memo Itemization Occupation _ Employer_ **Business Address** Type of Contribution: Fund Raiser Loan from a person 3. Contribution #2 PAC Receipt? 4. Date of Receipt Name & Address Norma Penncraft Ct. \$ 5.00 . 5.00 Arbor, MI, 481033 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer_ Occupation _ **Pusiness Address** Type of Contribution: X Direct Fund Raiser Loan from a person PAC Receipt? 3. Contribution #3 4. Date of Receipt Name & Address: Doug and Margarete Miller \$ 20.00 \$ 20.00 birchwood Dr. Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer_ Occupation **Business Address** Type of Contribution: N Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES Name & Address Mara Chobanian Gibson 2435 Newbury Ct. ,100.00 ,100.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer _ **Business Address** Type of Contribution: Fund Raiser Direct Loan from a person Page Subtotal

Page 18 of 24

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

Enter this total on line 3a of Summary

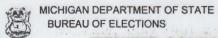
Page.



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 6/14/14 Name & Address: Jeannine C. Palms 2656 Easy St- Ann Arbor, MI, 48104 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	s 100,00	s /00, 00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/14/14/ Name & Address Mary Goode and Lewis Kellum 16866 well wood Rd. tipton, MI, 49287	s 25.00	\$25.00
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Employer		
Rusiness Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: Name & Address: Nama Chobanian Gibson 2435 Newbury Ct. Ann Arbor MI, 48103 5. If over \$100.00 cumulative, please provide:	s 100-00 Click Here for	\$ 200-00 r 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 6/25/19 Name & Address 5. If over \$100.00 cumulative, please provide: Odcupation Employer Business Address	\$28.00 Click Here for	z/S/Ø∂
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$ 225.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS

CANDIDATE COMMITTEE

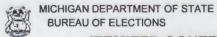
2. Committee To Elect Samuel McMullen

way way on the was taken

Car the water that the	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/20/14 Name & Address: Pwight Lang 1118 Wells st. Ann Arbor M, 48104 5. If over \$100.00 cumulative, please provide: Occupation Professor Employer University of Michigan Business Address	s 100.00 Click Here f	s ZO .00 or Memo Itemization
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/14/14 Name & Address Judith Enb Z740 Cowell rd. Ann Anbor, M, 4803 5. If over \$100.00 cumulative, please provide:	\$ 20.00 Click Here fo	\$ 70.00 or Memo Itemization
OccupationEmployer		
Rusiness Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #3 Name & Address: Ruby Av 865 Brook side dr- Avm Arbor, MI, U8105 5. If over \$100.00 cumulative, please provide:	\$ 10.00 Click Here fo	s 12.10 or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Name & Address Navgaret Rumion 3916 Banks St. New Orleans, LA, 70119 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 20.00 Click Here fo	s 20.00 or Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution:	IN ICA OO	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	3 100 00	

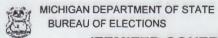
Page 20 of 24

line 3a of Summary Page.



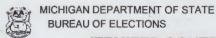
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 6/10/14 Name & Address: Harry G. Lawd III 185 S. Sea Ave. West Yarmouth, MA, 02673 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address		s SO.00 or Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
Name & Address Thomas J McQuade 2307 Parkwood Ann Arbor, M1, 48104	s_100.00	s 100.00
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
219 N Normal St. YPSilanti, MI, 48197 5. If over \$100.00 cumulative, please provide: Description Employer		\$ 30.00 or Memo Itemization
Business Address		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 6/20/14 Name & Address John + Christine Scherding 27 Lincoln St. Woodstock, NT, 05091 5. If over \$100.00 cumulative, please provide:		\$50.00
Occupation Employer	Click Here fo	or Memo Itemization
Cooperation		
Business Address Fund Beiger		
Type of Contribution: Loan from a person Fund Raiser	mail 220 00	
Page Su Grand Total of All Schedule (Complete on last page of Schedule) Page 21 of 24	es 1A	<u></u>



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribut middle initial. Check box to indicate if contribution Committee (PAC) Report all contributions regardle	is from a Political Committee		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YE Name & Address: Gregory Laird 12 Pine wood Sara toga SAr 5. If over \$100.00 cumulative, please provide:		366		s 100 . DO
Occupation Emp	oloyer		Click nere ic	or Memo Remization
Business Address				
	an from a person	Fund Raiser		
B. Contribution #2 PAC Receipt? YES	S 4. Date of Receip	\$ 7/20/14	71.00	110.00
2915 Leslie park Ann Arbor, Ml, U8			\$ 20.00	s 40.00
5. If over \$100.00 cumulative, please provide:	.00		Click Here fo	r Memo Itemization
Occupation Emplo	yer			
Business Address				
Type of Contribution: Direct Los	n from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YE Name & Address: Carolyn Hejk 5780 W Liber Ann Arbor, M, 40 5. If over \$100.00 cumulative, please provide: Occupation Emp	ed ty ord.	42911	\$ 5.00 Click Here for	\$ S.OO Memo Itemization
Business Address Direct Los	an from a person			
3. Contribution # 4 Name & Address Patrick J. 1211 Traver Ann Arbor, M	ES 4. Date of Recei Bocheim	Fund Raiser	\$ 30-00	,30.00
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation	imployer			
Business Address	E71			
Type of Contribution: Direct Lo	an from a person	Fund Raiser	# 15= 47	T
		Page Subtotal and Total of All Schedules 1A ete on last page of Schedule)	\$ 155.00	-
Page 22 of 24			line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number <u>C-2014-01S</u>
2. Committee Name <u>Committee to Flect Samuel McMillen</u>

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 5/31/14 Name & Address: Coundid Fourtand [975 Harding YPS anti, M1, 4897	, 2.10	, 2.10
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/22/14 Name & Address Claudutte Stern 341 Evergreen pl. Ann Arbor, Ml, 48104	s 1000.00	s 1000-00
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Artist Employer Metal	Ollok Flore let	Wello Relined
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: PAC Receipt? YES 4. Date of Receipt 5/22/14 Taibranna Schuman 105 High Lake Ave, Aun Andor, Ml, 48103 5. If over \$100.00 cumulative, please provide:	\$ 10.00 \$ TS 700 Click Here for	12.00 \$_ 15.00 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 Receipt		
CCandia Browne, 2847 White about st, Ann A. 5. If over \$100.00 cumulative, please provide: MI, 48104	rbor 5.00	s_ 5.00
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization
Occupation Employer	Click Here for	Memo Remization
Business Address		
Type of Contribution: Loan from a person Fund Raiser	# 15:	
Page Subtotal	\$ 1017.10	

Page 24 of 24

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

Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

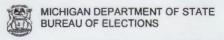
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions. Contribution # 1 PAC Receipt? Yes Name & Address: PAC Receipt Yes Yes	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 7/20/14 6. Vendor Name & Address:	7. Amount or Fair Market Value 8. Cumulative for Election Cycle (Through date in Item 5) \$ 30.00 \$ 30.00
TX 5 A Raines Contribution		
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address: Click	k Here for Memo Itemization
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	k Here for Memo Itemization
Fund Raiser Contribution		
	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	Enter this total on line 6 of Summary
Page of		Page



2. Committee Name Committee to Elect Sanuel McMullen CANDIDATE COMMITTEE 4. Purpose (Required Information) 5 Date 6 Amount 3. Name and address of person or vendor to whom paid Expenditure #1 Kolossos Printing Purpose: business Card Address 1214 S. University Click Here for Memo Itemization Type Ann Arbor, MI, 48104 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser Expenditure #2 Name Elmos T-Shirts Purpose: T-Shints 220 S Main St Click Here for Memo Itemization Type Ann Arbor, MI, 48104 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 City Printing Purpose: Walking Literature Address 411 Cross St. Click Here for Memo Itemization Type Ypsilanti MI, 48197 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Elmo's +-Shirts 220 S. Main St Address Ann Arbor, MI, 48104 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name Sandor Slomovits Purpose: MUSical Preformance 6/14/14 \$ 15000 Address 2021 Demncraft Ct Ann Arbor, M1, 48103 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement 813.02 Subtotal this page

> Enter this total on line 8a of Summary Page

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



1. Committee I. D. Number C-2014-015
2. Committee Name Committee to Elect Samuel McMullen

Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1 Name Taibriana Wilkins Schumann Address 105 11211 1121	Purpose: Manager Pay 7/5/14 \$ 500.00
Address 105 High lawe Ave	
Ann Arbor, M1, 48104	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
Expenditure #2	1.1
Name Sawiki and Son	7/9/14 \$ 548.55
Address 1521 W. La fayette Bltd.	Purpose: 125 Signs Date
Detroit, MI, 48216	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	Statement
Name Elmos T-Shirts	7/9/14 \$ 15.15
Address 220 S. Main St.	Purpose: +-Shirts Date \$ 13.13
	Click Here for Memo Itemization Type
Ann Arbor, M1, 48104	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous
Expenditure #4	statement
Name City Printing Co.	1 Jalving / Stevature 7/10/14 \$ 275.60
Address 411 Cross St.	Purpose: Walking Literature Date \$ 275.60
ypsilanti, Ml, 48197	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 Sawiki and Son	G/G/14 . CUT SC
Address 1521 W Lafayette Blud	Purpose: 125 Caum Signs Date \$ 398.33
Detroit, M1, 48 216	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 1339.3
	Grand Total of all Schedules 1B (Complete on last page of Schedule)
	(Complete on last page of Confedure)

Enter this total on line 8a of Summary Page



1. Committee I. D. No	umber	C-20	14-	- OIS		
2. Committee Name	C	mittee	to	elect	Sauvel	McMiller

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Staples Address 2601 Jackson Aul Ann Arbor, M1, 48103 [Fund Raiser]	Purpose: Click H Click box if this expenditure is payment of debt or obligation reported on previous statement	7/1/4 bate lere for Memo	\$ 10 15
Expenditure #2 Name StapleS Address 2601 Jackson Ave Ann Arbor, M1, 48103 Fund Raiser	Purpose: (MW and paper) Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	7/7/19 Date	\$ <u>4S.06</u> Itemization Type
Expenditure #3 Name ZiP Car Address 35 Thon son Place Boston, MA, 02210 Fund Raiser	Purpose: Zip Car Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	7/7/14 Date	\$ 46.79 temization Type
Expenditure #4 Name Kolossos Printing Address 1214 S. University Ann Arbor, MI, 48104 Fund Raiser	Purpose: Bowner Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	7/2/14 Date	\$ <u>223.66</u> temization Type
Expenditure #5 Name Aum Arbor Jayaes Address P.O. Box 1866 Arm Arbor, MI, 48106 Fund Raiser	Purpose: Parado Fee Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	7/4/14 Date ere for Memo	\$ 50.00 temization Type
	Subtot Grand Total of all S (Complete on last page		375.66

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

2.

Committee Name	0	E	Samue
----------------	---	---	-------

3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 6. Amount Expenditure #1 Mitch Kuhn Name 5241 Spebble creek rd. Click Here for Memo Itemization Type West Bloom Field, M, 48322 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 Name Ann Arbor Friends Meeting Address 1420 Hill Street Click Here for Memo Itemization Type Ann Arbor, MI, 48104 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Kolossos Printing Purpose: Walking Literature 1214 S. University Ann Arbor M, 48104 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Elmo's t-shirts Purpose: + Shirt 770 S. Main SF Ann Arbor, M1, 48104 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Meiler Name Purpose: event supplies 3825 Carpenter rd. Address Click Here for Memo Itemization Type ypsi township, M, 48197 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser Subtotal this page Grand Total of all Schedules 1B

Page 4 of 6

Enter this total on line 8a of Summary Page

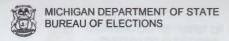
(Complete on last page of Schedule)



1. Committee I. D. Number C-2014-015
2. Committee Name CTE Samuel MyMuller

	ommittee Name		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Meijer Corp.		6/13/14	-60 (10
rieger wif.	Carl .	Data	\$ 52.48
Address 3825 Carpenter rd.	Purpose: 1000	Date	
	Click I	lere for Memo I	temization Type
Am Ypsi township, M1, 48197		iere for Memo i	ternization Type
1 de 2001 (000 2 m) / 1 / 1 / 1 / 1	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Statement		
		-1. 1.	
Name fund razv		7/20/14	\$ 71399
•	Purpose: Online Comission	Date	· <u>CIJI</u>
Address 171 1111 Ct C1 200	Purpose: OMITAL CONTIL STORY		
171 Water St. Suite 200	Click L	loro for Mama I	temization Type
Mana Man DI WARIAT	Olick I	iele ioi Mellio I	ternization Type
Vancouver, BC, VBBA7	Check box if this expenditure is payment of		
Fund Raiser Canada	debt or obligation reported on previous		
Expenditure #3	statement		
0.0			
Name Pay Pall		7/20/14	1510
	Purpose: Online Comission	110919	\$ 12.19
Address 2011 NL Carol Cl	Purpose: Will Could SSION	Date	
2211 N. First St.	Cliale	lara for Maria li	emination Trees
San Jose, CA, 95131	Click H	lere for Memo It	emization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name D AIC DC		-ligher	
Name USPS		7/18/19	· 11(1/)/77
Address	Dected	Date	\$ 970.00
200 Eliberty St.	Purpose: Postage		
LOU Ectioning St.	017-1-11		
1 1 1 11 11 11 11 11	Click H	lere for Memo It	emization Type
Ann Arbor, M1, 48104	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Statement		
Expenditure #5			
Name			
Address		Date	\$
Address	Purpose:	Date	
	Click H	lere for Memo I	temization Type
	Check box if this expenditure is payment of		.,,,-
	debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	771.66
	Constitution of the	Cabadulas 4D	14.00
	Grand Total of all S (Complete on last page		342/114

Enter this total on line 8a of Summary Page



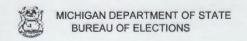
ITEMIZED EXPENDITURES SCHEDULE 1B

1. Committee I. D. Number <u>C-2014-015</u>

CANDIDATE COMMITTEE 2. 0	Committee Name CTE Samuel McMullen
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Name Citgo Address 1500 E Stadium blud. Ann Arbor, MI, 48104	Purpose: 9aS 7_00 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure #2 Name Staples Address 2601 Jackson Ave	Purpose: Walking Literature 7/16/14 \$ 145 Click Here for Memo Itemization Type
Ann Arbor, M. 48103 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #3 Name Address	Purpose: Date
Fund Raiser	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #4	
Name Address	Purpose: \$
Fund Raiser	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #5	Printer Debath So for each hard will be made built excess.
Address 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

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

Enter this total on line 8a of Summary Page



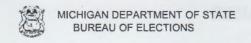
FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

c-2014-015

- USE A SEPARATE SHEET FOR EACH EVENT -3. Date Event Was Held 4. Number of Individuals Attending 5. Type of Fund Raising Activity 6. Address and Name (If any) of the or Participating (whichever is place where the activity was held.
Ann Arbon Friends Nection Mysical preformance greater) Private Residence 7. Total Contributions 8. Other Receipts 9. Gross Receipts (Add lines 7 and 8) 10. Total Cost of Event (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: Contribution Split **Expenditure Split** Co-Sponsor(s) (%) (%) 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

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

Page of 2



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number	
Committee Name	

	- USE A SEPARATE S	HEET FOR EACH EVENT	-	
3. Date Event Was Held 7/20/14	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. Carriage House Theat Private Residence	
7. Total Contributions	655.00			
8. Other Receipts	30.00			
9. Gross Receipts (Add lines 7	and 8) 685.00			
10. Total Cost of Event (Total Cost includes In-Kind Co	30.00 ntributions and All Expenditur	es Made For the Event)		
11. Check if event was a jo	int fund raiser and complete the	he following:		
Co-Sponsor(s)	Contribution (%)	Split	Expenditure Split (%)	
	TELO COU DOS	Complete States		
	and the particular to the second			
	ently greater limit total (a few antitudicance of the state of meanings for all the de-	Mad reversal of selections suggest seeds to the selection to taking book select		

 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.

Page 2 of 2