

RECEIVED

AUG 30 2017

Clear Form



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

INGHAM COUNTY CLERK

1. Committee I.D. Number 45899

2. Committee Name People for Kathie Dunbar

**SUMMARY PAGE
CANDIDATE COMMITTEE**

	Column I This Period	Column II Cumulative this election cycle
RECEIPTS		
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>\$17,540.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$17,540.00</u>	(18.) \$ <u>\$18,070.00</u>
4. Other Receipts (Schedule 1A-1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$17,540.00</u>	(20.) \$ <u>\$18,070.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$350.00</u>	(21.) \$ <u>\$350.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$3,640.43</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$226.08</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$3,866.51</u>	(23.) \$ <u>\$13,231.74</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ <u>\$2,017.40</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$444.72</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$272.43</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$17,540.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$17,812.43</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$3,866.51</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$13,945.92</u>	

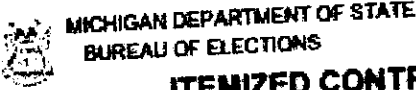
F2017-1120

8/30/17 8:59 AM Page 1 of 1

CAMP \$0.00

Barb Byrum, Ingham County Clerk





ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 45899
2. Committee Name People for Kathie Dunbar

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/18/17

Name & Address:
Susan Perrone
1986 S. Pere Marquette Hwy
Ludington MI 49431

6. Amount \$ 25 \$ _____

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) _____

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

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/21/17

Name & Address:
John Pence
11690 Prestle Ct
Dewitt MI 48820

6. Amount \$ 100 \$ _____

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) _____

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

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Click Here for Memo Itemization

3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/21/17

Name & Address:
Jillian Bashi
3271 Lynhurst Ct.
Rochester MI 48306

6. Amount \$ 2000 \$ _____

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) _____

5. If over \$100.00 cumulative, please provide:
Occupation Contract Therapist Employer Lake Orion Counseling Center
Business Address 3604 Clarkston Rd, Village of Clarkston, MI 48348

Type of Contribution: Direct Loan from a person Fund Raiser

Click Here for Memo Itemization

3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 07/10/17

Name & Address:
Eihab Kinaia
4575 Northridge Ct.
W. Bloomfield MI 48325

6. Amount \$ 2000 \$ _____

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) _____

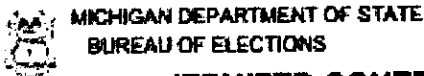
5. If over \$100.00 cumulative, please provide:
Occupation President Employer Ultrasonic Wireless
Business Address same

Type of Contribution: Direct Loan from a person Fund Raiser

Click Here for Memo Itemization

Page Subtotal 4125
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 45899
2. Committee Name People for Kathie Dunbar

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/10/17

Name & Address:
Manoj Sethi
6154 Graebear Trail
East Lansing MI 48823

6. Amount \$ 150

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation President Employer DLZ Michigan Inc Click Here for Memo Itemization

Business Address 1425 Keystone Ave, Lansing MI 48911

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/05/17

Name & Address:
Charles Moore
803 Sparrow Ave.
Lansing MI 48910

6. Amount \$ 250

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation Owner Employer Charles Moore & Associates Click Here for Memo Itemization

Business Address 530 S, Pine, Lansing MI 48933

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt _____

Name & Address: _____

6. Amount \$ _____

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____ Click Here for Memo Itemization

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt _____

Name & Address: _____

6. Amount \$ _____

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____ Click Here for Memo Itemization

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal **400**
Grand Total of All Schedules 1A **17540**
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 45899

CANDIDATE COMMITTEE

2. Committee Name People for Kathie Dunbar

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: Dylan Rogers 1105 1/2 S. Washington Ave Lansing MI 48910 If over \$100.00 cumulative, please provide: Occupation: <u>Owner, Robin Theater</u> Employer Name & Business Address: Robin Theater 1105 S. Washington Ave. Lansing MI 48910 <input checked="" type="checkbox"/> Fund Raiser Contribution	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>Space for Fundraiser</u> 5. Date Of Receipt: <u>07/19/17</u> 6. Vendor Name & Address: Robin Theater 1105 S. Washington Ave. Lansing MI 48910 Click Here for Memo Itemization	\$ <u>250</u> \$ <u>250</u>	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Patrick Gillespie 16946 Thorngate East Lansing MI 48823 If over \$100.00 cumulative, please provide: Occupation: <u>Owner, Gillespie Group</u> Employer Name & Address: <input checked="" type="checkbox"/> Fund Raiser Contribution	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>Food for Fundraiser</u> 5. Date Of Receipt: <u>07/20/17</u> 6. Vendor Name & Address: Lansing Brewing Company 518 E. Shiawassee Lansing MI 48912 Click Here for Memo Itemization	\$ <u>100</u> \$ <u>100</u>	
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input 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 _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: Click here for Memo Itemization	\$ _____ \$ _____	

Page Subtotal \$350.00 \$350.00

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$350.00

Enter this total on the 6 of Summary Page



**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number 45899
2. Committee Name People for Kathie Dunbar

This Schedule itemizes:

a. Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Kathie Dunbar 1334 Boston Blvd. Lansing MI 48910	4. Type: <u>IK Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>01/02/13</u> 6. <u>Original Amount of Debt:</u> <u>\$ 254.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>254.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Kathie Dunbar 1334 Boston Blvd. Lansing MI 48910	4. Type: <u>IK Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>1/28/13</u> 6. <u>Original Amount of Debt:</u> <u>\$ 185.72</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>185.72</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Kathie Dunbar 1334 Boston Blvd. Lansing MI 48910	4. Type: <u>IK Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>1/30/13</u> 6. <u>Original Amount of Debt:</u> <u>\$ 212.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>207.00</u>	\$ <u>5.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$444.72**
Grand Total of all Schedules 1E **\$444.72**
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 45899
2. Committee Name People for Kathie Dunbar

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>07/20/17</u>	4. Number of Individuals Attending or Participating (whichever is greater) 30	5. Type of Fund Raising Activity Breakfast	6. Address and Name (if any) of the place where the activity was held. The View 310 N. Cedar St. Lansing MI 48912 <input type="checkbox"/> Private Residence
---	--	---	--

7. Total Contributions \$3,250.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$3,250.00

10. Total Cost of Event \$100.00
(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 (%)
<u>People for Kathie Dunbar</u>	<u>50</u>	<u>50</u>
<u>Committee to Re-elect Tina Houghton</u>	<u>50</u>	<u>50</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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 (1-1K), 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.