



SEP 07 2017

**CANDIDATE COMMITTEE  
COVER PAGE**

INGHAM COUNTY CLERK

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: <u>07/24/2017</u> to <u>08/28/2017</u>	
4. Candidate Last Name <b>Dunbar</b>	First Name <b>Kathie</b> M.I.
4a. Office Sought including District # or Community Served (if applicable) <b>Lansing City Council At-Large</b>	
4b. County of Residence <b>INGHAM</b>	
6. Treasurer's Name & Residential Address <b>Candidate</b>	
Area Code & Phone _____	
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  
**45899**

2. Committee Name  
**People for Kathie Dunbar**

5. Committee's Mailing Address  
**1334 Boston Blvd.  
Lansing MI 48910**

Area Code and Phone: (517) 614-9035  
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

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

**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  
08/08/17

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.)

**F2017-1126**  
9/7/17 8:21 AM Page 1 of 1  
CAMP \$0.00  
Barb Byrum, Ingham County Clerk

**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 later 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 18 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	_____	Date	_____
	Type or Print Name	Signature	
Candidate	<b>Kathie Dunbar</b>	<i>Kathie Dunbar</i>	Date <b>09/6/2017</b>
	Type or Print Name	Signature	



1. Committee I.D. Number 45899

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name People for Kathie Dunbar

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>9,735.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>9,735.00</u>	(18.) \$ <u>27,805.00</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ _____	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>9,735.00</u>	(20.) \$ <u>27,805.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ _____	(21.) \$ _____
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 8)	(8a.) \$ <u>19,823.78</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>532.53</u>	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>20,356.31</u>	(23.) \$ <u>33,588.05</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ <u>\$2,017.40</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$444.72</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>13,945.92</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>9,735.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>23,680.92</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>20,356.31</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>3,324.61</u>	



**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 <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>8/9/2017</u></p> <p>Name &amp; Address: Dominic Cochran 624 W. Grand River Ave. Williamston, MI 48895</p> <p>6. Amount: \$ <u>35</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Film Maker</u> Employer <u>Ahptic Film &amp; Digital</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)</p> <p>Click Here for Memo Itemization <input type="checkbox"/></p>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/9/17</u></p> <p>Name &amp; Address: Ken Theis 6535 S. Airport Rd. St. Johns, MI 48879</p> <p>6. Amount: \$ <u>150</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>President CEO</u> Employer <u>Dewpoint</u></p> <p>Business Address <u>300 S. Washington Sq, Lansing MI 48933</u></p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>Click Here for Memo Itemization <input type="checkbox"/></p>
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/7/2017</u></p> <p>Name &amp; Address: Brant Johnson 4515 Oakwood Dr. Okemos, MI 48864</p> <p>6. Amount: \$ <u>100</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Self</u></p> <p>Business Address <u>same</u></p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>Click Here for Memo Itemization <input type="checkbox"/></p>
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/7/2017</u></p> <p>Name &amp; Address: Brent Forsberg 4729 Mohican Lane Okemos, MI 48864</p> <p>6. Amount: \$ <u>150</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>T.A. Forsberg Inc.</u></p> <p>Business Address <u>2422 Jolly Rd. Ste 200, Okemos, MI 48864</u></p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>Click Here for Memo Itemization <input type="checkbox"/></p>

Page Subtotal **435**

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 <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>8/8/2017</u>	
Name & Address: Timothy Addy 19811 Ridgemonte St. Clair Shores, MI 48080		\$ <u>1,000</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Self</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>same</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/25/17</u>	
Name & Address: Jason Schreiber 430 Oxford Rd. East Lansing MI 48823		\$ <u>250</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner CEO</u> Employer <u>Lightspeed</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>4942 Dawn Ave, East Lansing MI 48823</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/28/17</u>	
Name & Address: Barbara Roberts Mason 6835 Landsdown Dr. Dimondale, MI 48821		\$ <u>250</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/28/17</u>	
Name & Address: Paul Covert 11340 W. Clark Rd. Eagle, MI 48822		\$ <u>300</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>VP</u> Employer <u>Kentwood Office Furniture</u>		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address <u>2101 W. Willow St. Lansing MI 48917</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **1,800**  
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 <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 checked="" type="checkbox"/> YES	4. Date of Receipt <u>8/7/17</u>	
Name & Address: Miller Canfield PAC 150 W. Jefferson, Ste 2500 Detroit, MI 48226		\$ <u>500</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>8/8/17</u>	
Name & Address: UAW Michigan V-PAC 8000 E. Jefferson Detroit, MI 48214		\$ <u>750</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>8/16/17</u>	
Name & Address: UAW Michigan V-PAC 8000 E. Jefferson Detroit, MI 48214		\$ <u>500</u>	\$ <u>1250</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>8/7/17</u>	
Name & Address: LRC PAC 500 E. Michigan Ave., Ste 500 Lansing MI 48912		\$ <u>2500</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization <input type="button" value="v"/>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 4250

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 <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: Jack Davis 3010 Staten Ave, Apt 6 Lansing MI 48910	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/7/17</u>	\$ <u>250</u>	\$ <u>1,250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Loomis Law Firm</u> Business Address <u>124 W. Allegan Lansing MI 48933</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution #2 Name & Address: Michael Ware 2085 Glenn St. Lansing MI 48906	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/8/17</u>	\$ <u>250</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		Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution #3 Name & Address: Janet Stajos 3366 Remy Dr Lansing MI 48906	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/11/17</u>	\$ <u>250</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Big Fireworks</u> Business Address <u>same</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution #4 Name & Address: James Stajos 3011 Crofton Dr. Dewitt MI 48820	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____	\$ <u>250</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Black Diamond Fireworks</u> Business Address <u>PO Box 566, Dewitt MI 48820</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	

Page Subtotal 1000

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 <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 _____ Name & Address: Bradley Funkhouser 1019 Maplehill Ave. Lansing MI 48910  5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy CEO</u> Employer <u>CATA</u> Business Address <u>4615 Tranter St., Lansing MI 48910</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>250</u>	Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/10/2017</u> Name & Address: Sarah Wodtke 954 Stanford Rochester Hills, MI 48309  5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Keller Williams</u> Business Address <u>30500 Northwestern Hwy, Farmington Hills, MI 48301</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>1000</u>	Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/24/17</u> Name & Address: Bobby Pfauth 840 South Smith Rd Eaton Rapids, MI 48827  5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Pavement Consultants INC</u> Business Address <u>same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>1000</u>	Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address:     5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	Click Here for Memo Itemization <input type="button" value="v"/>

Page Subtotal 2250

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

9735

Enter this total on  
line 3a of Summary  
Page.

**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

45899

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Alec Findlay</b>  Address 538 Willoughby Rd Mason, MI 48854  <input type="checkbox"/> Fund Raiser	Purpose: <u>Field Organizing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/17</u> Date	<u>\$ 624.00</u>  Click Here for Memo Itemization Type
Expenditure #2 Name <b>Candace Mushatt</b>  Address 3438 Rangeley St Flint, MI 48503  <input type="checkbox"/> Fund Raiser	Purpose: <u>Field Organizing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/17</u> Date	<u>\$ 600.00</u>  Click Here for Memo Itemization Type
Expenditure #3 Name <b>Charles Miller</b>  Address 610 W Ottawa Lansing, MI 48933  <input type="checkbox"/> Fund Raiser	Purpose: <u>Field Organizing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/17</u> Date	<u>\$ 576.00</u>  Click Here for Memo Itemization Type
Expenditure #4 Name <b>Los Rancheros</b>  Address 727 E Miller Rd Lansing, MI 48911  <input type="checkbox"/> Fund Raiser	Purpose: <u>Election Party Food</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/17</u> Date	<u>\$ 186.00</u>  Click Here for Memo Itemization Type
Expenditure #5 Name <b>Activate</b>  Address 22760 Galpin Ln Excelsior, MN 55331  <input type="checkbox"/> Fund Raiser	Purpose: <u>Phonebanking Serv</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/25/17</u> Date	<u>\$ 7815</u>  Click Here for Memo Itemization Type

Subtotal this page **9801.00**

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**

45899

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1 Name <b>Chris McClain</b></p> <p>Address <b>P.O. Box 4271 East Lansing, MI 48826</b></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Field Directing</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/17/17</u> Date</p>	<p><u>\$ 1250</u></p>
<p>Expenditure #2 Name <b>Virginia Bernero</b></p> <p>Address <b>5800 Coulson Ct Lansing, MI 48911</b></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Graphic design</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/19/17</u> Date</p>	<p><u>\$ 450.00</u></p>
<p>Expenditure #3 Name <b>Matthew Ward</b></p> <p>Address <b>513 W. 149th St New York, NY 10031</b></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Consulting</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/19/17</u> Date</p>	<p><u>\$ 6894.92</u></p>
<p>Expenditure #4 Name <b>Mitten Media Management</b></p> <p>Address <b>29542 Gramercy Ct Farmington Hills, MI 48336</b></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Data management</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/28/17</u> Date</p>	<p><u>\$ 750.00</u></p>
<p>Expenditure #5 Name <b>Activate</b></p> <p>Address <b>22760 Galpin Ln Excelsior, MN 55331</b></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Auto Dialer</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/14/17</u> Date</p>	<p><u>\$ 677.86</u></p>

Subtotal this page **10,022.78**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **19,823.78**

Enter this total on line 8a 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 endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 8. 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)
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Debt #1 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes  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
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If bank loan, name of endorser or guarantor: \_\_\_\_\_ Amount Endorsed: \$ \_\_\_\_\_

Debt #2 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes  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
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If bank loan, name of endorser or guarantor: \_\_\_\_\_ Amount Endorsed: \$ \_\_\_\_\_

Debt #3 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes  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>5.00</u>  <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: \_\_\_\_\_ Amount Endorsed: \$ \_\_\_\_\_

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

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.