



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**RECEIVED**

JUL 26 2019

F2019-0446  
7/26/19 4:52 PM Page 1 of 1  
CAMP \$0.00  
Barb Byrum, Ingham County Clerk



**CANDIDATE COMMITTEE STATEMENT INGHAM COUNTY CLERK'S OFFICE  
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 1-14-19 to 7-20-19

1. Committee I.D. Number  
46798

2. Committee Name  
SCOTT Hughes for  
LANSING CITY COUNCIL

4. Candidate Last Name HUGHES First Name SCOTT M.I. M

4a. Office Sought Including District # or Community Served (if applicable)  
LANSING CITY COUNCIL 1ST WARD

4b. County of Residence INGHAM

5. Committee's Mailing Address  
228 LESLIE ST.  
LANSING MI 48912

Area Code and Phone 517 755 6438  
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.

6. Treasurer's Name & Residential Address  
SCOTT HUGHES  
228 LESLIE ST.  
LANSING MI 48912

Area Code & Phone 517 755 6438

7. Treasurer's Business Address  
INGHAM CO. PROSECUTOR'S OFFICE  
303 W. KALAMAZOO ST., 4TH FL.  
LANSING MI 48933

Area Code and Phone 517 483 6253

8. Designated Record Keeper's Name and Address (if the committee has a Designated Record Keeper)

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  
AUG, 6, 2019

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

July Quarterly  
 October Quarterly

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

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

9e. Dissolution of Candidate Committee

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

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

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

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

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

Current Treasurer or Designated Record keeper SCOTT Hughes, [Signature] Date 7-25-19  
Type or Print Name Signature

Candidate SCOTT Hughes, [Signature] Date 7-25-19  
Type or Print Name Signature



1. Committee I.D. Number 46798

2. Committee Name SCOTT HUGHES for Lansing City Council

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>10 175</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>10 175</u>	(18.) \$ <u>10 175</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>10175</u>	(20.) \$ <u>10175</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>200</u>	(21.) \$ <u>200</u>
<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 6)	(8a.) \$ <u>8347.32</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>8347.32</u>	(23.) \$ <u>8347.32</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.) \$ <u>N/A</u>	(24.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>N/A</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><del>N/A</del> 0</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>10 175</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>10 175</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>8347.32</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>1827.68</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46798  
2. Committee Name SCOTT HUGHES for Lansing City Council

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 1-14-19  
Name & Address: SCOTT Hughes  
228 Leslie St.  
Lansing MI 48912

6. Amount \$ 5 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 7.15

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  
(Includes \$2011 In-kind)

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 6-6-19  
Name & Address: JACOB Linder  
124 Oxford Rd.  
E. Lansing MI 48823

6. Amount \$ 250 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 250

5. If over \$100.00 cumulative, please provide:  
Occupation CONSULTANT Employer Self  
Business Address 124 Oxford Rd. E. Lansing MI 48823  
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 6-6-19  
Name & Address: D.W. Sheets  
2718 Collier Rd.  
Holt, MI 48842

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

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 #4 PAC Receipt?  YES 4. Date of Receipt 3-27-19  
Name & Address: STUART CHARIS  
3422 Inverary  
Lansing MI 48911

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

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

Page Subtotal 3085 455  
Grand Total of All Schedules 1A (Complete on last page of Schedule) 10,175

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 45798  
2. Committee Name SCOTT HURON for Lansing City Council

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: <u>Mallory Smith</u> <u>225 Leslie St.</u> <u>Lansing MI 48912</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-8-19</u>	\$ <u>20</u>	\$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: <u>Mark Grebner</u> <u>615 Glenmoor, 1-B</u> <u>E. Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-7-19</u>	\$ <u>25</u>	\$ <u>125</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Political Consultant</u> Employer <u>Practical Political Consulting</u> Business Address <u>920 W. Washington, Lansing MI 48933</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 Name & Address: <u>Teri Bernerd</u> <u>3000 N. Cambridge Rd.</u> <u>Lansing MI 48911</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>400</u>	\$ <u>400</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>Lansing School District</u> Business Address <u>519 W. Kalamazoo St Lansing MI 48933</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 Name & Address: <u>Ryan Basore</u> <u>6228 Brookline Ct.</u> <u>E. Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>1,000</u>	\$ <u>1,100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Michiganbase, LLC</u> Business Address <u>6228 Brookline Ct. E. Lansing MI 48823</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 1,445  
Grand Total of All Schedules 1A 10175  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 45798  
2. Committee Name SCOTT HANCOX for Lansing City Council

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: <u>Susan Anderson</u> <u>4205 Shoals Dr.</u> <u>Okemos MI 48864</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-21-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>25</u>	\$ <u>25</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: <u>RYAN BASOFF</u> <u>6228 Brookline Cr.</u> <u>E-Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-21-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3 Name & Address: <u>JOYCE DRAGANCHUK</u> <u>313 W. Kalamazoo St.</u> <u>Lansing MI 48933</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-10-19</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Judge</u> Employer <u>30th Judicial Circuit</u> Business Address <u>313 W. Kalamazoo St. Lansing MI 48933</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>250</u>	\$ <u>250</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4 Name & Address: <u>Eric Ederer</u> <u>4446 Seneca Dr</u> <u>Okemos MI 48864</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-21-19</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		\$ <u>25</u>	\$ <u>25</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 400  
Grand Total of All Schedules 1A 10175  
(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 46798  
2. Committee Name Scott Hughes for Lansing City Council

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: <u>David Jordan</u> <u>506 Belmonte Cir</u> <u>E-Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-11-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: <u>Mike Hughes</u> <u>1149 Woodside Dr.</u> <u>Hastott MI 48840</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>1-18-19</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>writer</u> Employer <u>TU America</u> Business Address <u>1149 Woodside Dr. Hastott MI 48840</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>250</u>	\$ <u>250</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 Name & Address: <u>Linda Hughes</u> <u>1149 Woodside Dr</u> <u>Hastott MI 48840</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>1-18-19</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>250</u>	\$ <u>250</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 Name & Address: <u>Nell Kuhnvench</u> <u>812 Applegate Ln.</u> <u>E. Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>1-28-19</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		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal

~~700~~

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

10175

Enter this total on line 3a of Summary Page.

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

46798

1. Committee I.D. Number \_\_\_\_\_  
2. Committee Name Scott Huleas for Lansing City Council

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: <u>Neil Kuhnreich</u> <u>812 Applegate</u> <u>E. Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-21-19</u>	\$ <u>100</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>Carol Simon</u> <u>303 W. Kalamazoo St. 4th Floor</u> <u>Lansing MI 48933</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-21-19</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Ingham County Prosecutor</u> Employer <u>Ingham County</u>		Click Here for Memo Itemization	
Business Address <u>303 W. Kalamazoo St, 4th Fl. Lansing MI 48933</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: <u>Lothar Konietzko</u> <u>534 High St.</u> <u>Charlotte, MI 48813</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-21-19</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>Michael Larkich</u> <u>1425 Foxcroft</u> <u>E. Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-15-19</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 720  
Grand Total of All Schedules 1A 10175  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

46798

1. Committee I.D. Number \_\_\_\_\_  
2. Committee Name Scott Hines for Lansing City Council

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: <u>Dan Doyle</u> <u>PO Box 10147</u> <u>Lansing MI 48901</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-22-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>100</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Liz Schweitzer</u> <u>1216 Tanager Ln.</u> <u>E. Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-22-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>100</u>
		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Amy Moore</u> <u>PO Box 294</u> <u>E. Lansing MI 48826</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-22-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u>
		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Zyaco Investments, LLC</u> <u>Simon Zeinich, sole owner</u> <u>1908 E. Michigan Ave, Lansing 48912</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-22-19</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>owner/Investor</u> Employer <u>Zyaco Investments, LLC</u> Business Address <u>1908 E. Michigan Ave, Lansing MI 48912</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>150</u>	\$ <u>150</u>
		Click Here for Memo Itemization	

Page Subtotal

~~350~~ ← 350

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

10175

Enter this total on  
line 3a of Summary  
Page.

6 16

Page 6 of 16





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46798  
2. Committee Name Scott Hughes for Lansing City Comm

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: <u>Jane Larson</u> <u>229 Leslie St</u> <u>Lansing MI 48912</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-25-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>25</u>	\$ <u>25</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: <u>Jessica Yunko</u> <u>815 Bancroft</u> <u>Lansing MI 48915</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-22-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 Name & Address: <u>Edward Ziermel</u> <u>2027 Little Hickory</u> <u>Lansing MI 48911</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>3-22-19</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 Name & Address: <u>Yanice Jackson-Long</u> <u>534 E. Mt Hope</u> <u>Lansing MI 48910</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 195  
Grand Total of All Schedules 1A 10175  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

46798

1. Committee I.D. Number \_\_\_\_\_  
2. Committee Name Scott Hughes for LANSING CITY COUNCIL

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 6-6-17  
Name & Address: Kyle Corey  
4353 N. Williamston RD.  
Williamston MI 48895

6. Amount \$ 50 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 50

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 2 PAC Receipt?  YES 4. Date of Receipt 6-6-17  
Name & Address: Justin Sealy  
633 Kendon Dr.  
Lansing MI 48910

6. Amount \$ 200 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 200

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)  
Occupation Lieutenant Employer General Motors  
Business Address PO Box 33170, Detroit MI 48232-5170  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 3 PAC Receipt?  YES 4. Date of Receipt 2-13-17  
Name & Address: Arash Noorai  
1229 N. CAPITAL AVE.  
Lansing MI 489

6. Amount \$ 660 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 660

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)  
Occupation owner operator Employer HD Accounting  
Business Address PO Box 4464, E. Lansing MI 48826  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 4 PAC Receipt?  YES 4. Date of Receipt 4-18-17  
Name & Address: Chris Martin  
524 Woodland  
E. Lansing MI 48823

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

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 1010  
Grand Total of All Schedules 1A (Complete on last page of Schedule) 10175

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 45798  
2. Committee Name SCOTT HANES for Lansing City Council

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: <u>Michael Doherty</u> <u>738 E. Kalamazoo</u> <u>Lansing MI</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner/operator</u> Employer <u>M.D. Industries</u> Business Address <u>1305 S. Cedar ST. Lansing MI 48910</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 2 Name & Address: <u>JAMIE LOWELL</u> <u>1509 McKinley</u> <u>Bay City MI 48705</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>100</u>	\$ <u>100</u>
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 checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3 Name & Address: <u>Lisa Riley</u> <u>1915 E. Michigan, STE B</u> <u>Lansing MI 48912</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Part. Act. Specialist</u> Employer <u>Southern Glazes with + SP. NJS</u> Business Address <u>39303 Country Club Dr STE A-11, Farmington Hills MI 48331</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4 Name & Address: <u>JUNE BRIXIE</u> <u>2294 Hamilton Rd.</u> <u>Okemos MI 48864</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>50</u>	\$ <u>50</u>
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 checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 1210

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

10175

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46798  
2. Committee Name SETS Hours for Lansing City Council

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: <u>James Giddins</u> <u>6000 Lounsbery</u> <u>Williamston MI 48895</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-5-19</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>self</u> Business Address <u>6000 Lounsbery, Williamston MI 48895</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: <u>Andy Manni</u> <u>4149 Luff Ct.</u> <u>Okeanos MI 48864</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>self-employed</u> Employer <u>Treasurers Government Consulting</u> Business Address <u>4149 Luff Ct Okeanos MI 48864</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 Name & Address: <u>Laurence Jaramillo</u> <u>2314 Knob Hill, Apt. 7</u> <u>Okeanos MI 48864</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>self-employed</u> Employer <u>sets attorney</u> Business Address <u>2314 Knob Hill, #7, Okeanos MI 48864</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 Name & Address: <u>Nickolas Calkins</u> <u>6234 Coleman RD</u> <u>E-Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-6-19</u>	\$ <u>140</u>	\$ <u>140</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Law Clerk</u> Employer <u>COVERT Law office</u> Business Address <u>1129 N. Washington Ave, Lansing 48906</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 740  
Grand Total of All Schedules 1A 10175  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

46798

1. Committee I.D. Number \_\_\_\_\_  
2. Committee Name SCOTT HUBBY FOR LANSING CITY COUNCIL

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 6-27-19  
Name & Address:  
Thomas Hamp  
11683 Hidden Springs Tr.  
DeWitt, MI 48820

6. Amount \$ 200 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 200

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization  
Occupation Business Consultant Employer ADW Coach  
Business Address 11683 Hidden Springs Tr  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 6-6-19  
Name & Address:  
Jamie Norberg  
415 N. Hurford  
Lansing MI 48912

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 5-6-19  
Name & Address:  
David Anderson  
320 W Ottawa  
Lansing MI 48915

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 6-6-19  
Name & Address:  
Michael Pettwell  
608 E. Geneva Rd  
DeWitt MI 48820

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

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 500  
Grand Total of All Schedules 1A 10175  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

45798

1. Committee I.D. Number \_\_\_\_\_  
2. Committee Name Scott Hayes for Lansing City Council

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: <u>Liz Schweitzer</u> <u>1216 Tanner Ct</u> <u>E Lansing MI 48823</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-17-19</u>	\$ <u>20</u>	\$ <u>120</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Ayanna + Rocio Neal</u> <u>2212 Rossiter Pl</u> <u>Lansing MI 48217</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-17-19</u>	\$ <u>40</u>	\$ <u>40</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Mike Pentz</u> <u>226 Leslie St.</u> <u>Lansing MI 48912</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-17-19</u>	\$ <u>20</u>	\$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Mallory Smith</u> <u>226 Leslie St.</u> <u>Lansing MI 48912</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-17-19</u>	\$ <u>20</u>	\$ <u>45</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 100  
Grand Total of All Schedules 1A 10175  
(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 46798  
2. Committee Name Scott Hughes for Lansing City Council

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: <u>Timothy Basore</u> <u>3316 Shearhelm RD.</u> <u>Dansville MI 48819</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-17-19</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Home Inspector</u> Employer <u>Basore Inspections</u> Business Address <u>3316 Shearhelm RD Dansville MI 48819</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Linda Hughes</u> <u>1149 Woodside Dr</u> <u>Haslett MI 48840</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-17-19</u>	\$ <u>100</u>	\$ <u>350</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Mike Hughes</u> <u>1149 Woodside Dr</u> <u>Haslett MI 48840</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-17-19</u>	\$ <u>100</u>	\$ <u>350</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>WRITER</u> Employer <u>TV AMERICA</u> Business Address <u>1149 Woodside Dr Haslett MI 48840</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Jon Beard</u> <u>212 Leslie St</u> <u>Lansing MI 48912</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-17-19</u>	\$ <u>25</u>	\$ <u>25</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 725

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

10175

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46798  
2. Committee Name Scott Hume, for LANSING CITY COUNCIL

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 7-5-19  
Name & Address: Nell Kuhnmuensch  
812 Applegate  
E. Lansing MI 48823

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 300

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

Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 7-10-19  
Name & Address: Robert Baldori  
2719 W Mt. Hope  
Okeanos MI 48864

6. Amount \$ 600 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 800

5. If over \$100.00 cumulative, please provide: Occupation Attorney Employer Baldori + Associates Click Here for Memo Itemization  
(Includes In-kind of \$200)

Business Address 2719 W Mt. Hope, Okeanos MI 48864  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 7-10-19  
Name & Address: Rock Cole  
460 Piper Rd.  
Hastings MI 48840

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

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 7-11-19  
Name & Address: Rennae Runtrek  
177 W. Lake St.  
Excelsior, MN 55331

6. Amount \$ 50 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 50

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 850  
Grand Total of All Schedules 1A 10175  
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

46798

1. Committee I.D. Number \_\_\_\_\_  
2. Committee Name Scott Huns for Lansing City Council

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 4-20-19  
Name & Address:  
Mark Grebner  
615 Glenmoor, 1-B  
E. Lansing MI 48823

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

5. If over \$100.00 cumulative, please provide:  
Occupation Political Consultant Employer Practical Political Consulting Click Here for Memo Itemization  
Business Address 920 N Washington Lansing MI 48906  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 4-18-19  
Name & Address:  
Vic Loomis  
965 Pebblebrook  
E. Lansing MI 48823

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

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 # 3 PAC Receipt?  YES 4. Date of Receipt 3-23-19  
Name & Address:  
John Perry  
1416 N Genesee  
Lansing MI 48915

6. Amount \$ 25 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25

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 3-25-19  
Name & Address:  
Mike Cheltenham  
444 Parker  
E. Lansing MI 48823

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 100

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 325  
Grand Total of All Schedules 1A 10175  
(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 46798  
2. Committee Name Scott Hayes for Lansing City Council

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 5-5-19  
Name & Address: Ryan Basore  
6228 Brookline  
E. Lansing MI 48823  
6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 1,200  
5. If over \$100.00 cumulative, please provide: Occupation Consultant Employer Michiganbase Click Here for Memo Itemization  
Business Address 1129 N. Washington Ave, Lansing MI 48906  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 6-6-19  
Name & Address: CHRIS SILVA  
3100 O'Brien RD.  
E. Lansing MI 48823  
6. Amount \$ 50 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 50  
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 #3 PAC Receipt?  YES 4. Date of Receipt 6-5-19  
Name & Address: David Mittleman  
1700 Old Mill Rd.  
E. Lansing MI 48823  
6. Amount \$ 250 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 250  
5. If over \$100.00 cumulative, please provide: Occupation Attorney Employer Church Wylie, PC Click Here for Memo Itemization  
Business Address 2827 E. Saginaw, Lansing MI 48912  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 2-5-19  
Name & Address: Liz Schweitzer  
1216 Tanager Ln.  
E. Lansing MI 48823  
6. Amount \$ 50 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 50  
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 450  
Grand Total of All Schedules 1A 10175  
(Complete on last page of Schedule)



**ITEMIZED IN-KIND CONTRIBUTIONS**  
**SCHEDULE 1-IK**  
**CANDIDATE COMMITTEE**

46798

1. Committee I. D. Number \_\_\_\_\_  
2. Committee Name ~~800~~ SCOTT HUGHES for Lansing City Council

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: ROBERT BALOUNI 2714 W. MT. HOPE OKemos MI 48864 If over \$100.00 cumulative, please provide: Occupation: ATTORNEY Employer Name & Business Address: BALOUNI + ASSOCIATES 2714 W. MT. HOPE OKemos MI 48864 <input checked="" 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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description SUPPLIES for fundraiser 5. Date Of Receipt: 6-6-19 6. Vendor Name & Address: ALDI 5165 MARSH RD. OKemos, MI 48864 Click Here for Memo Itemization	\$ 200	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: SCOTT HUGHES 228 LESLIE ST. LANSING MI 48912 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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description POSTER BOARD 5. Date Of Receipt: 1-20-19 6. Vendor Name & Address: STAPLES 3003 E. MICHIGAN AVE. LANSING MI 48912 Click Here for Memo Itemization	\$ 2.11	\$ 2.11
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 ~~202.11~~  
202.11  
Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) ~~202.11~~

Enter this total on line 6 of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name Scott Hawkes for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>ACT BLUE</u> Address <u>PO BOX 441146 Somerville MA 02144-0031</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraising service</u>	<u>1.50</u> Date	\$ <u>1.50</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #2 Name <del>STAPLES</del> Address <u>3003 E. Michigan Ave. Lansing MI 48912</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>office supplies</u>	<u>2-3-19</u> Date	\$ <u>3.50</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #3 Name <u>Ryan Basore</u> Address <u>6228 Brookline E. Lansing MI 48823</u>  <input type="checkbox"/> Fund Raiser	Purpose: <del>Ret</del> <u>return of contribution</u>	<u>7-20-19</u> Date	\$ <u>100</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #4 Name <u>ACT BLUE</u> Address <u>PO BOX 441146 Somerville MA 02144-0031</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraising service</u>	<u>4-9-19</u> Date	\$ <u>10.98</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #5 Name <u>ACT BLUE</u> Address <u>PO Box 441146 Somerville MA 02144-0031</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraising service</u>	<u>7-9-19</u> Date	\$ <u>46.93</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			

Subtotal this page 162.91

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name SCOTT HEALES for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>KEYSTONE MILLBROOK</u> Address <u>3540 JEFFERSON HWY</u> <u>GRAND LANE MI 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <u>Voter mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-24-19</u> Date	<u>\$ 327.17</u>
Expenditure #2 Name <u>KARIE HOBSON</u> Address <u>15857 BROOK RD.</u> <u><del>48906</del> MI 48906</u> <u>LANSING</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PHOTOGRAPHY</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-26-19</u> Date	<u>\$ 250</u>
Expenditure #3 Name <u>KEYSTONE MILLBROOK</u> Address <u>3540 JEFFERSON HWY</u> <u>GRAND LANE MI 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-14-19</u> Date	<u>\$ 1508.24</u>
Expenditure #4 Name <u>CAPITAL AREA DISTRICT LIBRARY</u> Address <u>401 S. CAPITAL</u> <u>LANSING MI 48933</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-11-19</u> Date	<u>\$ 7.35</u>
Expenditure #5 Name <u>NAME.COM</u> Address <u>414 14TH ST, #200</u> <u>DENVER CO 80202</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Web services -</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-8-19</u> Date	<u>\$ 3.99</u>

Subtotal this page 2096.75  
 Grand Total of all Schedules 1B (Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name SCOTT HUSLEY for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>ACT BLUE</u> Address <u>PO Box 441146</u> <u>Somerville MA 02144-0031</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraising services</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-11-19</u> Date	<u>\$ 0.50</u>  Click Here for Memo Itemization Type
Expenditure #2 Name <u>Staples</u> Address <u>3003 E. Michigan</u> <u>Lansing MI 48912</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Office supplies</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-10-19</u> Date	<u>\$ 6.36</u>  Click Here for Memo Itemization Type
Expenditure #3 Name <u>Capitol Area District Library</u> Address <u>401 S. Capitol</u> <u>Lansing, MI 48933</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-10-19</u> Date	<u>\$ 16.35</u>  Click Here for Memo Itemization Type
Expenditure #4 Name <u>Capitol Area District Library</u> Address <u>401 S. Capitol</u> <u>Lansing MI 48933</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-31-19</u> Date	<u>\$ 8.70</u>  Click Here for Memo Itemization Type
Expenditure #5 Name <u>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy.</u> <u>Graw ledge MI 48837</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-24-19</u> Date	<u>\$ 1300.50</u>  Click Here for Memo Itemization Type

Subtotal this page 1332.41  
Grand Total of all Schedules 1B (Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 45798  
2. Committee Name Scott Huntley for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>ARCADIA ALES + SMOKEHOUSE</u> Address <u>2101 E. MICHIGAN AVE.</u> <u>LANSING MI 48912</u> <input type="checkbox"/> Fund Raiser	Campaign event Lunch Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-29-19</u> Date	<u>\$ 138.93</u>
Expenditure #2 Name <u>ACT BLUE</u> Address <u>PO BOX 441146</u> <u>SOMERVILLE MA 02144-0031</u> <input type="checkbox"/> Fund Raiser	Fundraising services Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-9-19</u> Date	<u>\$ 0.50</u>
Expenditure #3 Name <u>NAME.COM</u> Address <u>414 14TH ST. #200</u> <u>DENVER, CO 80202</u> <input type="checkbox"/> Fund Raiser	web services Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-26-19</u> Date	<u>\$ 8.99</u>
Expenditure #4 Name <u>CITY of Lansing - Clerk</u> Address <u>124 W. MICHIGAN AVE.</u> <u>LANSING MI 48933</u> <input type="checkbox"/> Fund Raiser	VOTER LIST Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-16-19</u> Date	<u>\$ 5</u>
Expenditure #5 Name <u>CITY of Lansing - Clerk</u> Address <u>124 W. MICHIGAN AVE.</u> <u>LANSING MI 48933</u> <input type="checkbox"/> Fund Raiser	PETITION COPIES Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-16-19</u> Date	<u>\$ 2.20</u>

Subtotal this page 155.62  
 Grand Total of all Schedules 1B (Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798

2. Committee Name SCOTT HURLEY FOR LANSING CITY COUNCIL

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Habibi Dancers</u> Address <u>4860 Pine Hill Dr Potterville MI 48876</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Booklet Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-29-19</u> Date	<u>\$ 45</u>
Expenditure #2 Name <u>STAPLES</u> Address <u>3003 E. Michigan Ave Lansing MI 48912</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>office supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-27-19</u> Date	<u>\$ 11.65</u>
Expenditure #3 Name <u>STAPLES</u> Address <u>3003 E. Michigan Ave Lansing MI 48912</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>COPIES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-26-19</u> Date	<u>\$ 0.47</u>
Expenditure #4 Name <u>Leo's Outpost</u> Address <u>600 S. Pennsylvania Lansing MI 48912</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser - FOOD</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-22-19</u> Date	<u>\$ 200</u>
Expenditure #5 Name <u>Insty Prints</u> Address <u>215 N Washington Lansing MI 48912</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>office supplies Name tags</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-21-19</u> Date	<u>\$ 6.35</u>

Subtotal this page 263.47

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 8347.32

Enter this total  
on line 8a of  
Summary Page





**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name Scott Hunter for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1 Name <u>Gannett Media</u> Address <del>3100 N. DOUGLASS</del> <del>160 W. FORT ST.</del> <u>160 W. FORT ST.</u> <u>Perrin MI 48225</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Digital Advertising</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>2-28-19</u> Date</p>	<p><u>\$ 200</u></p>
<p>Expenditure #2 Name <u>STEPHANIE DECKERT</u> Address <u>3181 McDowell</u> <u>Waterford MI 48328</u></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>4-8-19</u> Date</p>	<p><u>\$ 402.50</u></p>
<p>Expenditure #3 Name <u>ACT BLUE</u> Address <u>PO BOX 441146</u> <u>Somerville MA 02144-001</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Fundraising services</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>                    </u> Date</p>	<p><u>\$ 3.25</u></p>
<p>Expenditure #4 Name <u>U.S. Postmaster</u> Address <u>4800 COLLINS RD</u> <u>Lansing MI 48901</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Postage-FR</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>3-2-19</u> Date</p>	<p><u>\$ 143</u></p>
<p>Expenditure #5 Name <u>Staples</u> Address <u>3003 E. Michigan</u> <u>Lansing MI 48112</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>office supplies</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>2-4-19</u> Date</p>	<p><u>\$ 9.67</u></p>

Subtotal this page 758.42

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 8347.32

Enter this total  
on line 8a of  
Summary Page

**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name Scott Hines for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Art Blue</u> Address <u>Po Box 441146</u> <u>Sonoma MA 02144-</u> <u>0031</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraising services</u>	<u>3-11-19</u> Date	<u>\$ 0.50</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #2 Name <u>staples</u> Address <u>3003 E. Michigan</u> <u>Lansing MI 48912</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>computer service</u>	<u>3-4-19</u> Date	<u>\$ 2.23</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #3 Name <u>staples</u> Address <u>3003 E. Michigan Ave.</u> <u>Lansing MI 48912</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>copies - fundraiser invites</u>	<u>3-3-19</u> Date	<u>\$ 76.44</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #4 Name <u>staples</u> Address <u>3003 E. Michigan Ave.</u> <u>Lansing MI 48912</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>computer service</u>	<u>3-3-19</u> Date	<u>\$ 4.34</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #5 Name <u>staples</u> Address <u>3003 E. Michigan Ave.</u> <u>Lansing MI 48912</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>office supplies</u>	<u>Fundraiser invites</u>	<u>\$ 88.96</u>
Click Here for Memo Itemization Type			
<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement			

Subtotal this page 172.47

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name Scott Humes for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>STAPLES</u> Address <u>3003 E. Michigan Lansing MI 48912</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fliers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-8-19</u> Date	<u>\$48.37</u>
Expenditure #2 Name <u>ACT BLUE</u> Address <u>PO Box 441146 Somerville, MA 02144-0031</u> <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-6-19</u> Date	<u>\$5.63</u>
Expenditure #3 Name <u>STAPLES</u> Address <u>3003 E. Michigan Ave. Lansing MI 48912</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fliers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	<u>\$56.45</u>
Expenditure #4 Name <u>STAPLES</u> Address <u>3003 E. Michigan Ave Lansing MI 48912</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>office supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-28-19</u> Date	<u>\$14.15</u>
Expenditure #5 Name <u>STAPLES</u> Address <u>3003 E. Michigan Ave. Lansing MI 48912</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>office supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-28-19</u> Date	<u>\$3.31</u>

Subtotal this page 127.91  
Grand Total of all Schedules 1B (Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name SCOTT HUGHES for LANSING CITY Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Facebook</u> Address <u>1 Hacker way</u> <u>Menlo Park CA 94025</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>ADVERTISING</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-21-19</u> Date	<u>\$ 250</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <u>The Avenue Cafe</u> Address <u>2021 E. Michigan Ave.</u> <u>Lansing MI 48912</u>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FR</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-17-19</u> Date	<u>\$ 240</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <u>Keystone Mailbrook</u> Address <u>3540 Jefferson Hwy</u> <u>Grand Ledge MI 48937</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>POSTAGE for voter mailings</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-17-19</u> Date	<u>\$ 502.16</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <u>CAPITAL AREA DISTRICT LIBRARY</u> Address <u>401 S. CAPITOL</u> <u>LANSING MI 48912</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-14-19</u> Date	<u>\$ 16.35</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <u>CITY PULSE</u> Address <u>1905 E. Michigan Ave.</u> <u>LANSING MI 48912</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>NEWSPAPER ADVERTISING</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-23-19</u> Date	<u>\$ 284</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page 1292.51  
Grand Total of all Schedules 1B (Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

46798

1. Committee I. D. Number \_\_\_\_\_  
2. Committee Name SCOTT HUGHES for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Facebook</u> Address <u>1 Hacker way Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ADS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-10-19</u> Date	<u>\$ 125</u>
Expenditure #2 Name <u>Facebook</u> Address <u>1 Hacker way Menlo Park, CA 94025</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser invites</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-10-19</u> Date	<u>\$ 50</u>
Expenditure #3 Name <u>Facebook</u> Address <u>1 Hacker way Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ADS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-3-19</u> <del>7-10-19</del> Date	<u>\$ 125</u>
Expenditure #4 Name <u>Facebook</u> Address <u>1 Hacker way Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-29-19</u> Date	<u>\$ 25</u>
Expenditure #5 Name <u>Facebook</u> Address <u>1 Hacker way Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ADS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-24-19</u> Date	<u>\$ 50</u>

Subtotal this page 425  
Grand Total of all Schedules 1B (Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name SCOTT Hughes for Las Vegas City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Facebook</u> Address <u>1 Hacker way</u> <u>Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-22-19</u> Date	<u>\$ 18.39</u>
Expenditure #2 Name <u>Facebook</u> Address <u>1 Hacker way</u> <u>Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-21-19</u> Date	<u>\$ 35</u>
Expenditure #3 Name <u>Facebook</u> Address <u>1 Hacker way</u> <u>Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-18-19</u> Date	<u>\$ 35</u>
Expenditure #4 Name <u>Facebook</u> Address <u>1 Hacker way</u> <u>Menlo Park, CA 94025</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <u>invite</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-22-19</u> Date	<u>\$ 30.13</u>
Expenditure #5 Name <u>Facebook</u> Address <u>1 Hacker way</u> <u>Menlo Park, CA 94025</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <u>invite</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-16-19</u> Date	<u>\$ 25</u>

Subtotal this page 143.52  
 Grand Total of all Schedules 1B (Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

46798

1. Committee I. D. Number \_\_\_\_\_  
2. Committee Name SCOTT HUGHES for Lansing city council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Facebook</u> Address <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser invite</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-13-19</u> Date	<u>\$ 25</u>
Expenditure #2 Name <u>Facebook</u> Address <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser invite</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-11-19</u> Date	<u>\$ 25</u>
Expenditure #3 Name <u>Facebook</u> Address <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser invite</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-8-19</u> Date	<u>\$ 0.94</u>
Expenditure #4 Name <u>Facebook</u> Address <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser invite</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-8-19</u> Date	<u>\$ 9.06</u>
Expenditure #5 Name <u>U.S. Postal Service</u> Address <u>315 W. Alltech St Ste A</u> <u>Lansing MI 48933</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>STAMPS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-9-19</u> Date	<u>\$ 220</u>

Subtotal this page 280

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 8347.32

Enter this total  
on line 8a of  
Summary Page

**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46798  
2. Committee Name Scott Hulse for Lansing City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>ACT BLUE</u> Address <u>PO Box 441146 Somerville MA 02144-0031</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraising surveys</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-3-19</u> Date	<u>\$ 36.13</u>
Expenditure #2 Name <u>Ryan Basore</u> Address <u>6228 Brookline E. Lansing MI 48823</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Partial return of contribution</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-26-19</u> Date	<u>\$ 50</u>
Expenditure #3 Name <u>KEYSTONE Millbrook</u> Address <u>3540 Jefferson Hwy Grand Ledge MI 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-28-19</u> Date	<u>\$ 970.20</u>
Expenditure #4 Name <u>US Postmaster</u> Address <u>315 W. Allen St. A Lansing MI 48933</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>STAMPS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-27-19</u> Date	<u>\$ 55</u>
Expenditure #5 Name <u>CITY of Lansing - Clerk</u> Address <u>124 W. Michigan Ave Lansing MI 48933</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Voter lists</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-17-19</u> Date	<u>\$ 30</u>

Subtotal this page 1136.33  
Grand Total of all Schedules 1B (Complete on last page of Schedule) 8347.32

Enter this total on line 8a of Summary Page





**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46798  
2. Committee Name SCOTT HUNES FOR LANSING CITY COUNCIL

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

3. Date Event Was Held <u>3-21-19</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>25</u>	5. Type of Fund Raising Activity <u>RECEPTION</u>	6. Address and Name (if any) of the place where the activity was held. <u>Levy's OUTPOST, 500 E. Kalamazoo St LANSING MI 48212</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$2165

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

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

10. Total Cost of Event \$636.45  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-1K), 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.



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 45798

2. Committee Name Scott Hunter for Lansing City Council

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

3. Date Event Was Held <u>6-6-19</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>32</u>	5. Type of Fund Raising Activity <u>Reception</u>	6. Address and Name (If any) of the place where the activity was held. <u>2719 W. MT. HOPE OKemos, MI</u> <input checked="" type="checkbox"/> Private Residence <u>48854</u>
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7. Total Contributions ~~0~~ \$ 5400

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

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

10. Total Cost of Event \$ 200  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-1K), 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.



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46798  
2. Committee Name SCOTT HUGHES FOR LANSING CITY COM.

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

3. Date Event Was Held <u>7-17-19</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>16</u>	5. Type of Fund Raising Activity <u>RECEIPT.UH</u>	6. Address and Name (If any) of the place where the activity was held. <u>THE AVENUE CAFE</u> <u>2021 E. MICHIGAN</u> <u>LANSING MI 4822</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$ 1,020

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

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

10. Total Cost of Event \$ 290  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.