

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

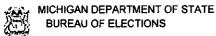
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and co	signed by andidate.	3. This Statement covers From	06/24/19	to 07/25/19	
1. Committee I.D. Number		4. Candidate Last Name	Firs	st Name	M.I.
46804		Ross	Dan		Α
		4a. Office Sought Including Dis	trict # or Communi	ty Served (If applicable)	<u></u>
2. Committee Name		Board Member - Local			_
Dan Ross For City Council: Breaking Bread & Building Bridges Comm	nittee	4b. County of Residence ING	нам	▼	
5. Committee's Malling Address 835 Louisa St. Ste. 205A Lansing, MI 48911	•	6. Treasurer's Name & Reside Elizabeth Ross 523 E. Edgewood Bl Lansing, MI 48911		RECEI	/ED
				JUL 26 21	019
Area Code and Phone (517) 528-3487 If the address in this box is different from the comm	ittee			INGHAM COUNTY CLER	K'S OFFICE
mailing address on the Statement of Organization, r be sent to this address by the filing official.	nail may	Area Code & Phone (517) 6	19-9259		
7. Treasurer's Business Address Not Applicable		8. Designated Record Keeper' Designated Record Keeper' Rahila Kato 2065 Hamilton St. Holt, MI 48842		ss (If the committee has a	3
Area Code and Phone		Area Code and Phone (517) 918-3113		
9. TYPE OF STATEMENT			9e. Dissolution	of Candidate Committee	,
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to:		LY if candidate ballot for the	by the committee by discharged and	this item I/We certify any of to the candidate or his or d forgiven, and no longer	her spouse is here collectible from
<u>L</u>	XJuly Quart	erly		he committee has no oust s or has any oustanding d	•
⊠Primary ☐General	October C	·	Further, if the diss	olution cannot be granted est for the Reporting Wai	l, that this be
Convention			Considered a requ	est for the reporting war	761.
Special School	9c. 🔀 Annus	l Statement (2019) Coverage Year	Effective	e date of dissolution	
	9d. Amen	dment to Campaign Statement		07/25/19	
Caucus	(Com	olete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)		ition of residual funds mus the Summary Page.	st be reported on
Date of Election, Convention or Caucus		019-0439			
08/06/19	CAM	6/19 2:51 PM Page 1 of 1 P \$0.00 b Byrum, Ingham County Cle	erk		
				Jakob Ariabbak 🔣 🛮	
10. Verification: I/We certify that all reasonable dllig my/our knowledge and belief the contents are true,	ence was used accurate and co	in the preparation of this statement	ent and attached so	chedules (if any) and to th	e best of
Current Treasurer or Designated Record keeper		Shill to	<u> </u>	Date	2019
Type or Print Name		Signature	1	, ,	
Candidate Dan Ross		(1)		Date	5/2019
Type or Print Name		Signature			

1	Committee	ιD	Number	4680

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Dan Ross For City Council: Breaking Bread & Building Bridges Committee

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Cumulaire una election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1,594.44</u>	.
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	_
c. Subtotal of "Contributions"	(3c.) \$ \$1,654.81	(18.) \$ \$1,654.81
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$1,654.81	(20.) \$ \$1,654.81
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$25.00	(21.) \$ \$25.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$1,594.44	_
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	-
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$60.37	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$1,654.81	(23.) \$ \$1,654.81
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	-
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) \$ _\$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.)	
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _\$0.00	_
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _\$0.00	
// F	BALANCE STATEMENT	-
13. Ending Balance of last report filed	(13.) \$ \$0.00	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$1,654.81	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$1,654.81	
16. Amount expended during reporting period	(16.) - \$ \$1,654.81	
(Add lines 9 and 11) 17. ENDING BALANCE	60 00	
(Subtract line 16 from line 15)	(17.) \$ \$0.00	—"



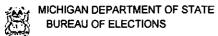
1. Com

mittee	I.D.	Number	•	46	8	Į

CANDIDATE COMMITTEE

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 06/29/19 Name & Address:		
Steve Monti		
1712 Stanley Ct.	250.00	250.00
Lansing, MI 48912	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:	Clieb Hara 6	or Memo Itemization
Occupation Caregiver Employer Self	UIIÇK Mere to	or wemo itemization
Business Address 1712 Stanley Ct. Lansing, MI 48912		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/19 Name & Address	_	
Shunkea Brown 3941 Hunters Ridge #2 Lansing, MI 48911	_{\$} 20.00	ş 20.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/28/19 Name & Address:		
Kemal Maley 1025 Gould Rd. Lansing, MI 48917	\$ 50.00	§ 50.00
5. If over \$100.00 cumulative, please provide:	Click Here to	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 07/01/19 Name & Address	_	
Otia Jenkins (Via CashApp)	_{\$} 1.00	_{\$_} 1.00
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer	_	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subto	otal \$321.00	
Grand Total of All Schedules (Complete on last page of Schedu	1A le) Enter this total on]
Page	tine 3a of Summary Page.	

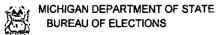


1. Committee I.D. Number 46804

CANDIDATE COMMITTEE

2. Committee Name

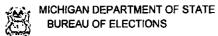
Enter contributor's name and address. If middle initial. Check box to indicate if cor Committee (PAC) Report all contributions	tribu	dion is from a Political Com		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? Name & Address:		YES 4. Date of Rec	eipt 07/01/19		
Alicia Glasscoe					
(via CashApp)				_{\$} 2.00	_{\$} 2.00
5. If over \$100.00 cumulative, please pr	pvid	e:		Click Here fo	r Memo Itemization
Occupation		Employer		Click nere id	i weno temization
Business Address					
Type of Contribution: Virect		Loan from a person	Fund Raiser		•
3. Contribution #2 PAC Receipt? Name & Address		YES 4. Date of Rec	eipt 07/01/19		
Eddie Mallet 5635 Schafer Rd. Lansing, MI 48911				<u>\$</u> 2.00	_{\$} 2.00
5. If over \$100.00 cumulative, please pro	vid	9:		Click Here for	r Memo Itemization
Occupation	_				Wome nomeanon
Business Address					
Type of Contribution:		Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt? Name & Address:		YES 4. Date of Rec	eipt 07/02/19		
Jack Hamma (Profile Name) (via CashApp)				<u>\$ 5.00</u>	_{\$} 5.00
				Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please pro	vid	9 :		Office Total	Wello Remization
Occupation	- 1	Employer			
Business Address		Loon from a narrow T	F 4 D1		
·,,		Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	L	YES 4. Date of Re	ceipt 07/02/19		
Teyon Harmon 603 W. Main St.				_{\$} 150.00	_s 150.00
Fruitland, MD 21826 5. If over \$100.00 cumulative, please pro	vid	n.			
Occupation CDL-A O/O		Employer Self- TM H	armon LLC	Click Here for	Memo Itemization
Business Address 603 W. Main St.	Fru	itland, MD			
Type of Contribution: Direct		Loan from a person	Fund Raiser		
			Page Subtotal	\$159.00	
		G	Grand Total of All Schedules 1A	N	1
			plete on last page of Schedule)	Enter this total on	J
Page _ 2 _ of _ 6				line 3a of Summary Page.	



CANDIDATE COMMITTEE

2. Committee Name

	box to inc	dicate if con	tribu	ition is from a Political Co		nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PA	C Receipt?		YES 4. Date of Re	eceipt	07/08/19		
Granisha Adar	ns							
(via Cash App)							_{\$} 5.00	_{\$} 5.00
5. If over \$100.00 cu	mulative	, please pro	ovid	e:			Click Horo fo	r Memo Itemization
Occupation			_	Employer			Click Here it	r wemo itemization
Business Address								
Type of Contribution:	Dire	ect		Loan from a person		Fund Raiser		
Contribution #2 Name & Address	PAC	Receipt?		YES 4. Date of Re	eceipt	07/08/19		
Angela Austin 4221 Delta Riv Lansing, MI 48							<u>\$ 100.00</u>	<u>s 100.00</u>
5. If over \$100.00 cu	mulative,	please pro	vide	a:			Click Here fo	r Memo Itemization
Occupation			_ Er	nployer				
Business Address								
Type of Contribution:	Dire	ct		Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC	Receipt?		YES 4. Date of Ro	eceipi	07/10/19		.
Andrew Brewer 3121 Lucie St.							<u>\$ 100.00</u>	_{\$} 100.00
Lansing, MI 48		_1					Click Here for	Memo Itemization
5. If over \$100.00 cu								
			- E	Employer				
Business Address Type of Contribution:	 ✓ Dire	ect	П	Loan from a person	П	Fund Raiser		
Contribution # 4 Name & Address	PAC	C Receipt?		YES 4. Date of R	Receip	t 07/03/19	<u> </u>	
Ranjean Larkin 1127 Durango Lansing, MI 489							§ 25.00	<u>\$_25.00</u>
5. If over \$100.00 cu	mulative,	, please pro	vide	9:			Click Here for	Memo Itemization
Occupation			_	Employer	-			
Business Address								
Type of Contribution	: 🗸 Dir	rect		Loan from a person		Fund Raiser		
						Page Subtotal	\$230.00	
						d Total of All Schedules 1A		
Page 3 of 6				(Cc	mple	te on last page of Schedule)	Enter this total on line 3a of Summary Page.	

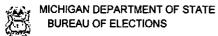


1. Committee I.D. Number 46804

CANDIDATE COMMITTEE

2. Committee Name

Enter contributor's name and address. If middle initial. Check box to indicate if con Committee (PAC) Report all contributions	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of Re	eceipt <u>07/18/19</u>		
James Pyle				
1900 Wood St.			50.00	, 50.00
Lansing, MI 48912			_{\$} 50.00	§ 30.00
5. If over \$100.00 cumulative, please pro	ovide:		Click Here fo	or Memo Itemization
Occupation	Employer		Ollok Fiere it	A Memo Remization
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Re	eceipt 07/22/19		
Dephanie Young (via CashApp)			_s 25.00	, 25.00
(via Gasiii (pp)				V
5. If over \$100.00 cumulative, please pro	ovide:		Click Here fo	r Memo Itemization
Occupation	_ Employer			
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser	_	
3. Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of R	deceipt 07/20/19		
Arianna Anderson			_s 20.00	20.00
4880 Waverly Rd.			\$ 20.00	_{\$} 20.00
Lansing, MI 48911			Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please pro	ovide:			
Occupation	_ Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Recelpt? Name & Address	YES 4. Date of F	Receipt 07/17/19		
Larry Kirchoff				
300 W. Jennison Ave.			_s 40.00	_s 40.00
Lansing, MI 48915				V
5. If over \$100.00 cumulative, please pro	ovide:		Click Here for	Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Virect	Loan from a person	Fund Raiser		
		Page Subtotal	\$135.00	
		Grand Total of All Schedules 1A		
	(C	omplete on last page of Schedule)	Enter this total on	ا
Page			line 3a of Summary Page.	

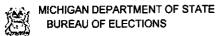


CANDIDATE COMMITTEE

1. Committee I.D. Number 46804

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Comm. Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt Address:	pt 07/20/19		····
Mary Ann Moore (via CashApp)		_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		Click Horo f	or Memo Itemization
Occupation Employer	-	Click nere i	or ivienso itemization
Business Address			
Type of Contribution: ✓ Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Recei Name & Address	pt 07/18/19		
Vashti Hale 206 Orile Rd. Matteson, IL 60443		_s 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		Click Here fo	or Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser	_	
Contribution # 3 PAC Receipt? YES 4. Date of Receipt Address:	of 07/18/19		
Eddie & Rozetta Mallet 5635 Schaffer Rd. Lansing, MI 48911		\$ 45.00	ş 47.00
5. If over \$100.00 cumulative, please provide:		Click Here to	r Memo Itemization
Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person	1		
	Fund Raiser	.	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Address	upt 07/18/19		
Random Contribution		_{85.00}	. 85.00
5. If over \$100.00 cumulative, please provide:		¥	3
Occupation Employer		Click Here to	r Memo Itemization
Business Address			
Type of Contribution: ☐ Direct ☐ Loan from a person ✓	Fund Raiser		
	Page Subtotal and Total of All Schedules 1A lete on last page of Schedule)	\$255.00 Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number 46804

CANDIDATE COMMITTEE

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first nam 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.	ne, 6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 07/20/19		
Name & Address: PTs Kustom Kreations		
4880 Waverly Rd.	460.00	168 በበ
Lansing, MI 48911	_{\$} 168.00	_{\$} 168.00
5. If over \$100.00 cumulative, please provide:	Click Horn fo	r Memo Itemization
Occupation Auto Body Technician Employer Self- PTs Kustom Kreations	— Click Here to	i weno lemzation
Business Address 4880 Waverly Rd. Lansing, MI 48911		
Type of Contribution: Direct Loan from a person Fund Raiser		···
Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/20/19 Name & Address	_	
Dan A Ross (Self)	_{\$} 386.81	_s 386.81
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation 1099 Employer Butler & The Maid Lifestyle Services LLC		
Business Address 835 Louisa St, Lansing, MI 48911		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt	,	
Name & Address:		
	e	_
	Ψ	\$
5 If over \$100 00 cumulative please provide:	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	•	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt		
Name & Address		
	\$	\$
5. If over \$100.00 cumulative, please provide:		Manage 10 1 12 12
	Click Here for	Memo Itemization
Occupation Employer		
Business Address	-	
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Su	\$554.81	_
Grand Total of All Schedule (Complete on last page of Sche		_
Page 6 of 6	Enter this total on line 3a of Summary Page.	



ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 46804

		2. Committee NameDan Ross For City Councit: Breaking Bread & Building Bridges Committee
3. Name & Address	From Whom Received 4. Date of Receipt	
Receipt #1 Name & Address:	Date of Receipt	Loan from a Lending Institution
, ramo a , idaroso.		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest
		Refund Webate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #3 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #4 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund Nebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #5 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #6 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #7 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
	— — ———	Page Subtotal
		Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)
		Enter this total on

Enter this total on line 4 of Summary Page

Page 1 of 1



Page 1 of 1

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number

4	6	8	0	4

CANDIDATE COMMITTEE	2. Committee Name	Dan Ross For City Council: Breat	king Bread & Building l	Bridges Committee
				1

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).	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)
Report all in-kind contributions.		<u> </u>	
Contribution #1 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	.=	25
Lashawn Curtiss	\$ 2	<u>25 </u>	25
ladykfashions@gmail.com	Goods or Services Purchased by Candidate or Others		
	Goods or Services Purchased by Candidate or Others- LOAN		
If over \$100.00 cumulative, please provide: Occupation:	Description Exhibition Booth		
Employer Name & Business Address:	5. Date Of Receipt: 07/27/19		
	6. Vendor Name & Address:	k Here for Memo Ite	emization
	Lady K Fashions Quality Inn Suites 3121 E Grand River Lansing, MI 48912	Chicle for Memo III	
Fund Raiser Contribution			
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan		
	Goods Donated or Loaned Services Donated	\$	
	Goods or Services Purchased by Candidate or Others		
	Goods or Services Purchased by Candidate or Others- LOAN		
If over \$100.00 cumulative, please provide:	Description		
Occupation:	5. Date Of Receipt:		
Employer Name & Address:	6. Vendor Name & Address:		
	Click	k Here for Memo Ite	emization
Fund Raiser Contribution			!
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan		1
Name & Address:	Goods Donated or Loaned Services Donated \$	\$	
	Goods or Services Purchased by Candidate or Others		
	Goods or Services Purchased by Candidate or Others- LOAN		
If over \$100.00 cumulative, please provide:	Description		
Occupation:	5. Date Of Receipt:		
Employer Name & Address:	6. Vendor Name & Address:		
	Clic	k Here for Memo It	emization
Fund Raiser Contribution			
	Page Subtotal	\$25.00	\$25.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$25.00	
		Enter this total	man.

on line 6 of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

46804

1. Committee I. D. No	umber .	
2 Committee Name	Dan Ros	ss For City Council: Breaking Bread & Building Bridges Committe

Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Urban Diversity		06/28/19	\$ 150.00
Address	Purpose: Promotional Flyer / Literature	Date	
1025 Gould Rd.	Click H	lere for Memo I	temization Type
Lansing, MI 48917	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name Coding Kaveman		07/06/19	s 197.88
Address	Purpose:	Date	
	Click H	ere for Memo l	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Best Of Signs		07/05/19	\$ 87.28
Address	Purpose: Promotional Materials	Date	
(Wesbsite) www.bestofsigns.com	Click H	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4	- Section - Sect		
Name Tequila Roby		07/13/19	s 58.50
Address	Purpose: Promotional T-Shirt Print	Date	
3720 Blue River Dr.	Click H	ere for Memo I	lemization Type
Lansing, MI 48911	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Sprint		07/14/19	¢ 67 22
Address	Purpose: Campaign Phone	Date	\$ <u>67.33</u>
(Wesbsite) www.sprint.com	Click H	lere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		··
<u> </u>	<u> </u>	tal this page	\$560.99
	Grand Total of all S (Complete on last page		
		,	

Enter this total on line 8a of Summary Page

Page _____of ____



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

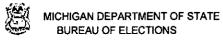
46804

1. Committee I. D. Number Committee Name
 Dan Ross For City Council: Breaking Bread & Building Bridges Committee

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		'	
Name Blessed Seven	3	06/26/19	s 100.00
Address	Promotional Design & Print + T-Shirts (T-Shirt & Flyers) PUITDOSE:	Date	
835 Louisa St.		lara far Mama I	temization Type
Lansing, MI 48911		iere ioi Memo	demization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Gregory's Bar & Grill		07/18/19	s 150.00
Address	Purpose: Fund raiser Dinner	Date	100.00
2510 N. Martin Luther King Blvd.	Click H	ere for Memo I	temization Type
Lansing, MI 48906			•
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Melissa Robinson		07/20/19	\$ 221.89
Address	Purpose: Promotional T-Shirt Print + T-Shirts (Hobby Lobby/ Office)	Date	
5200 Mall Dr. W	Click ∺	ere for Memo l	temization Type
Lansing, MI 48917	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name PT's Kustom Kreations		07/20/19	
		Date	\$ <u>500.00</u>
Address	Purpose: Fund raiser / Voter's Registration Gala		
4880 Waverly Rd.	Click H	ere for Memo l	temization Type
Lansing, MI 48911	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement	<u> </u>	
Expenditure #5			
Name Committee Volunteers		07/20/19	
Address	Purpose: Fuel (7/2, 7/3, 7/4, 7/20)	Date	\$ <u>62.00</u>
Miscellaneous		ara far kkama l	Iomization Time
_	Click H Check box if this expenditure is payment of debt or obligation reported on previous	E1E 101 14(8(1)()	lemization Type
Fund Raiser	statement	<u>-</u>	
	Subtot	al this page	\$1,033.89
	Grand Total of all S		\$1,594.88

Enter this total on line 8a of Summary Page

(Complete on last page of Schedule)



ITEMIZED IN-KIND EXPENDITURES

SÇHEDULE 1B – IK

46804

SCHEDOLE IB - IV	Committee I. D. Number		
CANDIDATE COMMITTEE	2. Committee Name Dan Ross For City Co.	ıncil: Breaking Bread & Buildin	g Bridges Committe
Name and Address of person to whom goods or services were donated or transferred.	Type of In-Kind Expenditure (Check appropriate box and fill in description)	5. Date:	6. Fair Market Value
Expenditure #1 Name & Address:	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable Institution Donation of assets to Political Party Committee Other Description	Date Click Here for Memo Item	s nization Type
Expenditure #2 Name & Address:	Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo Item	ization Type
Expenditure #3 Name & Address:	Donation of goods of services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo Item	ization Type
Expenditure #4 Name & Address:	Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo Item	ization Type
Expenditure #5 Name & Address:	Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	\$ Date Click Here for Memo Item	ization Type
		Page Subtotal	· · · · · · · · · · · · · · · · · · ·
		l of all Schedules 1B-IK last page of Schedule)	Enter this total
			Enter this total

enter this total on line 7 of the Summary Page

Page _____ of ____



EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES

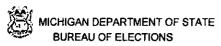
SCHEDULE 1 B - G

1. Committee I.D. Number 46804

GOLLEDOEL I D - G	r. Committee I.D. Mulliber	-
CANDIDATE COMMITTEE		or City Council. Breaking Bread & Building Bridges Committee
USE THIS FORM TO REPORT EXPENDITURES MADE FOR CHALLENGERS, POLL WATCHERS, POLL WORKERS, AN Item 4f. ALL EXPENDITUR	2. Committee Name ELECTION DAY BUSING OF VOTERS TO T D GET-OUT-THE VOTE ACTIVITY. Describe ES ARE REQUIRED TO BE ITEMIZED	THE POLLS, FOR SLATE CARDS, the specific Get-Out-The -Vote activity in
3. Name and address of person or vendor to whom the	4. Type of Activity	5 Date 6. Amount
expenditure was made		5. Date 6. Amount
Expenditure #1	a. Election Day Busing of Voters To T	he Polls
Name & Address:		
	b. Slate Cards c. Chal	lengers
	d. Poli Watchers e. Poli V	Vorkers \$
	f. Get-Out-The Vote Activity (Specify	Date
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Click Here for Memo Itemization Type
For Activity Type b-f, check one: In-Kind Independent		···
If in support of, or in opposition to, a ballot proposal, check one:	Check box if this expenditure is payre debt or obligation reported on previous se	
Support		
Statewide Proposal Name	Local Proposal Name	Indicate County
Expenditure #2		
Name & Address:	a. Election Day Busing of Voters To	
	b. Slate Cards c. Challe	ngers
	d. Poll Watchers e. Poll W	
'	f. Get-Out-The Vote Activity (Specify)	Date
		Click Here for Memo Itemization Type
For Activity Type b-f, check one:		-
In-Kind Independent		
If in support of, or in opposition to, a ballot proposal, check one:	Check box if this expenditure is paym debt or obligation reported on previous sta	ent of
Support Oppose	debt of obligation reported on previous sta	aternerit
	\	
Statewide Proposal Name	ocal Proposal Name	Indicate County
Expenditure #3 Name & Address:	a. Election Day Busing of Voters To	
	b. Slate Cards c. Challengers	
	d Delli Matabasa a Delli Matada	s
	d. Poll Watchers e. Poll Workers	Date
For Activity Type b f, check and	f. Get-Out-The Vote Activity (Specify): Click Here for Memo Itemization Type
For Activity Type b-f, check one:		- Click here for Memo Remization Type
In-Kind Independent	Check box if this expenditure is payme	nt of
If in support of, or in opposition to, a ballot proposal, check one: Support Oppose	debt or obligation reported on previous sta	
Statewide Proposal Name	Local Proposal Name	Indicate County
		Subtotal this page
	Commit To	
		otal of all Schedules 1B-G) on last page of Schedule

Enter total on Line 8b Summary Page

Page ______ of _______



DISBURSEMENTS SCHEDULE 1C

1. Committee I. D. Number

on line 10a of Summary Page

CANDIDATE COMMITTEE (For use by officeholders only)	2. Committee Name	Dan Ross For City Council: Br	eaking Bread & Building	Bridges Committee
3. Name and address of person to whom disbursement was made	(Be specifi	n of Disbursement c & you may assign a ent code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose		_/	\$
			Date Click for Memo Ite	mization Type
Check box if this disbursement is payment of debt or obligati reported on previous statement	Disbursement Co			
Disbursement # 2 Name & Address:	Purpose			\$
			Date	- '
			Click for Memo Iter	nization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	n Disbursement Co			
Disbursement # 3 Name & Address:	Purpose	\		s
	<u> </u>		Date	· ·
			Click for Memo Iten	nization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement C n Fund Rais			
Disbursement # 4 Name & Address:	Purpose			\$
			Date Click for Memo Iten	ોzation Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	n Disbursement Co	 	· .	
			Subtotal this page	
		Grand Total of (Complete on last)	fall Schedules 1C page of Schedule)	Enter this total

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; incidental Office Expense Disbursements ONLY

Page _ \ of _ \



DEBT'S AND	OBLIG	TAE	IONS
SCHEI	DULE '	1E	

1. Committee I.D. Number 46804

CANDIDATE COMMITTEE 2.C	ommittee Name	City Council: Breaking Bre	ad & Building Bride	jes Committee
This Schedule Itemizes:				
a Debts and obligations owed by or forgiven the com	mittee OR b. Debi	s and obligations owed <u>to</u> curpose checked.)	er forgiven <u>by</u> the co	mmittee.
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 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Dubt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$	\$ \$ \$ \$	\$	\$ FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$	\$ \$ \$	\$	\$FORGIVEN
Debt #3 Com? Yes		An	ount Endorsed: \$	
Owed to or by:	4. Type:	\$ \$		
	6. Original Amount of Debt:	\$		\$
	2	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Aı	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	
(Co	emplete on last page of Schedule s	Grand Total showing amounts owed by o	of all Schedules 1E or to the committee)	

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.

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

Enter this total

Page 1 of 1



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number _____

CANDIDATE C	OMMITT	EE 2. Con	nmittee Name Dan Ross For City Council:	Breaking Bread & Building Bridges Committee
	- USE	A SEPARATE SH	EET FOR EACH EVENT	-
3. Date Event Was Held		er of Individuals Attending pating (whichever is	5. Type of Fund Raising Activity	Address and Name (If any) of the place where the activity was held. Gregory's
07/18/19		14	Dinner	2510 N Mik Blvd Lansing, MI 48906 Private Residence
7. Total Contributions		\$250.00		
8. Other Receipts		\$0.00		
9. Gross Receipts (Add lines 7	7 and 8)	\$250.00		
10. Total Cost of Event (Total Cost includes In-Kind C	ontribution	\$150.00 and All Expenditures	s Made For the Event)	
11. Check if event was a j	joint fund r	aiser and complete the	e following:	
Co-Sponsor(s)		Contribution S (%)	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.

Page _1 of _2



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

		46804	
ommittae I D	Number		

CANDIDATE C	OMMITT	EE 2. Con	nmittee Name Dan Ross For City Council: B	reaking Bread & Building Bridges Committee	
	- USE	A SEPARATE SH	EET FOR EACH EVENT -		
		er of Individuals Attending pating (whichever is	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. PT's Kustom Kreations 4880 Waverly Rd Lansing, MI 48911 Private Residence	
		21	Voter Registration/ Fund Raiser Gala		
7. Total Contributions		\$168.00			
8. Other Receipts		<u> </u>			
3. Cross receipts (Add lines / and 0)		\$168.00	168.00		
		\$500.00 s and All Expenditures			
11. Check if event was a j	oint fund r	aiser and complete the	e following:		
Co-Sponsor(s)		Contribution S (%)	Split	Expenditure Split (%)	
	_				
	_				
<u></u>	-	<u> </u>			
	_				
	····	•			
	_				
	_	•		<u> </u>	

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

Page	2	οf	2
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