# **CANDIDATE COMMITTEE**

FOR OFFICIAL USE ONLY

COVER PAGE					
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	1-1-19 10 7.21.19		
1. Committee 1.D. Number		4. Candidate Last Name	First Name M.I.		
46544		spitzley Patercia A.			
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable)			
Friends of Patric	AL	Lansing City Council At. Large			
5. Committee's Mailing Address		4b. County of Residence Inche 6. Treasurer's Name & Residential Address			
3. Continuee's Mailing Address		6. Treasurer's Name & Residential Address			
2622 Victor Ave		Patricia Spitzley			
LansingmI		2622 Victor Ave			
Area Code and Phone 517.763.1  If the address in this box is different from the comm		Lansing, mI 48911			
be sent to this address by the filing official.	mail may	Area Code & Phone			
7. Treasurer's Business Address		8. Designated Record keeper's Designated Record keeper)	RECEIVE On mittee has a		
NIA		NIA	JUL 26 2019		
			INGHAM COUNTY CLERK'S OFFICE		
Area Code and Phone	<del></del>	Area Code and Phone			
9. TYPE OF STATEMENT	Remained ON	II V if namelidate	9e. Dissolution of Candidate Committee		
9a. Pre-Election OR 9b. Post-Election	is not on the current year.		By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here		
Pre-Election or Post-Election Statement relates to:			by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets,		
<b>X</b> Primary	July Quarte	•	owes no lates fees or has any oustanding debt.		
General	October Quarterly		Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.		
Convention	]		excisioned a request for the Reporting Walver.		
Special	9с. Даллиа	Statement ()	Effective data of Year 1 y		
School	Amon	Coverage Year	Effective date of dissolution		
Caucus ·	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
Date of Election, Convention or Caucus		F2019-0444	1		
August 6,2019		7/26/19 4.42 PM Page 1 of CAMP \$0.00 Barb Byrum, Ingham County	1 / Clerk 		
Verification: I\We certify that all reasonable dilige ny\our knowledge and belief the contents are true, a	nce was used in ccurate and con	n the preparation of this statement	ent and attached schedules (if any) and to the best of		
current Treasurer or	_		$\sim 10^{\circ}$		
Designated Record keeper	a Sout	zley Jal	Mars 27-19		
Type or Print Name	1	Signature			
Candidate Ruteron A.Sp. 4	eley	( yaluais x	Date 7-27-19		
Authority granted under P.A. 388 of 1976	$\longrightarrow$	Signature	101		
	_				



**SUMMARY PAGE** 

1. Committee 1.D. Number 46544

2. Committee Name Friends of Patricia Sutates

CANDIDATE COMMITTEE	2. Committee Name TILLENCIS &	
RECEIPTS	Column I	Column II Cumulative this election cycle
3. Contributions	This Period	Cumbiable and disease
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 2500.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	
c. Subtotal of "Contributions"	(3c.) \$ <u>2500.00</u>	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>2500.00</u>	(20.) \$ 7500.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <b>  <del>60.00</del></b>	(21.) \$
7. in-Kind Expenditures (Schedule 1B-lK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	107.80	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ (8a.)	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	Lot CO
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$	104.80
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$ <del>\$0.</del> \$=0
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	·
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.)\$ 2155.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	(12b.) \$BALANCE STATEMENT	<del></del>
13. Ending Balance of last report filed	(13.) \$ 250.00	
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.)+\$ <u>2500.00</u>	<u>.</u>
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$ 3.000.00	
16. Amount expended during reporting period		7.80
(Add lines 9 and 11) 17. ENDING BALANCE	(17.) \$ 2892.20	
(Subtract line 16 from line 15)	(11.) 3 60 14. 20	<b>_</b>



## ITEMIZED CONTRIBUTIONS SCHEDULE 1A

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 46544
2 Committee Name FO 18 Nols of Patricia Spital

	ENTENCISO.	1 100 HISTORIAS
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 6 15 19	]	
Geoffrey B. Sangent		
3862 Trady Drive, Sterling Heights,	s 1,000.0	20 s
	Click Here f	or Memo Itemization
Occupation attorned Employer Self	-	
Business Address 3185 Two claus ham blue Sterly Type of Contribution: Direct Loan from a person X Fund Raiser	ing height	s <sub>1</sub> MJ
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/6/19		<del></del>
Michael Dohenty		
738 E halamazoosi	\$ 1,000.	ාධා
Landing, mt. USal O  5. If over \$100.00 cumulative, please provide;		
^ ^	Click Here f	or Memo Itemization
Occupation Business & Employer Self		
Business Address 738 12 Kalamazoo, Lansing M	£	
Type of Contribution: Direct Loan from a person Fund Raiser		
. Contribution #3 PAC Receipt? YES 4. Date of Receipt	1_	
Joel ferguson	2600 -	
12 23 lurno / street dute so	s 250.0	<u>o</u> s
I anoing, MJ LL8906 If over \$100.00 comulative, please provide:	Click Here for	or Memo Itemization
ccupation Quiner Employer Ferguson Develop	ment	
usiness Address 1223 Turner 8 trees Lensing Mit	t 48906	
Contribution #4 PAC Receipt? YES 4. Date of Receipt 6/6/19		
atrick Gillespie		
30 Marghall street Suite 100	s 250 o	5
If over \$100.00 ownulative, please provide:		
ccupation and Employer Gillespie (910up	Click Here f	or Memo Itemization
isiness Address 330 Marshalls Weet Soute 100	0	
ype of Contribution: Direct Loan from a person Fund Raiser		
Page Subt	total 2500.0	6
Grand Total of All Schedules (Complete on last page of Sched	fule) 23 3 00 · 01	
	Enter this total or line 3a of Summa Page.	
geof	. 454.	



Fund Raiser

Name

### ITEMIZED EXPENDITURES **SCHEDULE 1B** CANDIDATE COMMITTEE

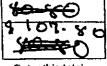
ITEMIZED EXPENDITURES	** * - · · ·
SCHEDULE 1B 1. C	ommittee I. D. Number 465 CLU
CANDIDATE COMMITTEE . 2 C	ommittee Name Forends of Patarcia Sortzle
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	
Name US Postal Service	5 30.80 Date
Address 315 W. allegan	Purpose: 5 CUMPS
Lansingmi	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #2	
Name Cityoflansing	<u>6/27/195 5.00</u>
Address 124 W. Michigan	Purpose: Voter List
Lansing, M I U8933	Click Here for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
Expenditure #3	
Name Fed Exprending Address 7900 Legacy Drive Plano To	<u>6/11:419 = (15.00)</u>
Address 7900 Lenacy DRIVE	Purpose: Note Cards  Date  Date  Date  Date  Date
Plano To	The K Here for Memo Iternization Type
Plano, Tx 75024-4089	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #4	datament
Name Bakes N. Calces South	7-4-19 \$27.00
Address 6030 S. MLK	Purpose: food for parade Date
Langing, m Jul 8910	Click Here for Memo Itemization Type
3 7	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #5	
Name	
	Purpose: \$
Address	
	Click Here for Memo Itemization Type
	Check box if this expenditure is payment of

Subtotal this page

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

debt or obligation reported on previous

statement



Enter this total on line 8a of Summary Page



DEBTS	AND	OBL	IGA	TIONS
s	CHE	DULE	1E	

Formula of Parlacens & 1015

CANDIDATE COMMITTEE 2	2. Committee Name TICI CENT	12 5 1 101 1511	C114 26.	12160		
This Schedule itemizes:				<del></del>		
a Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.  (Check either a or b. Use only for the purpose checked.)						
3. Name and Malling 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, pleas 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: PCHRICIA SpHZICY ZUZZ VILL FOR KLIK LILIGIUM, MI USCII	4. Type: Price Verser State Debt Was Incurred:  10.15-15  6. Original Amount of Debt:  \$ 250.00	11.23.15s 250.00 t s s s	s <u>7,3<i>0</i>,0</u> 0	\$ FORGIVEN		
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$			
Debt #2 Corp? Yes Owed to or by:	PLUTE NESE EST	11.23.15 28596		•		
Fortains Spitzley ZEZZVICLET ROE LOUNSING,INI 48911	5. Date Debt Was Incurred:  (25.15  6. Original Amount of Debt  \$ 755.96	\$ \$ \$ \$	s <u>235.96</u>	\$O FORGIVEN		
If bank loan, name of endorser or guarantor:		Ап	ount Endorsed: S			
Debt#3 Corp? Yes Owed to or by: POCHOLICIA SPITELE Y 26 27 UICLE! AUE LIBERS (YLY) INIUS !!	5. Date Debt Was Incurred:  L-25-15  6. Original Amount of Debt  \$ 1, \L\L\L\L\L\L\L\L\	\$ \$ \$	د ( چ <u>ن / ال</u> دا ک <sup>د</sup> ا	\$FORGIVEN		
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_			
		Page Subtotal	(Outstanding debt)	0		
Grand Total of all Schedules 1E  (Complete on last page of Schedule showing amounts owed by or to the committee)  Ente				Enler this total		
				on line 12a "ow		

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.

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

\_\_Page\_\_\_\_ of \_\_\_\_\_



DEBTS	AND	OBL	JGA	TIONS
5	GHE	DUL	医门腔	

1. Committee I.D. Number	46544
--------------------------	-------

CANDIDATI	e comm	ITTEE
-----------	--------	-------

2 Committee Name for ierries of Pritimin is Soitz ter

This Schedule itemizes:				
Debts and obligations owed by or forgiven the com	mittee OR b. Dab ck either a or b. Use only for the p	is and obligations owed <u>to</u> or urpose checked.)	forgiven <u>bv</u> the cor	nmiltee.
Name and Malling Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation (Description)	7. Date and amount of each payment	8. Cumulative payment to	9. Outstanding Balance at close of this period
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.	incurred 6. Indicate original amount of debt			(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	Hircheise of	s		
Reducin Spitzlicy	5. Date Debt Was Incurred:	s		1755.39
2622 Victor Ave	7.3.15	<u> </u>	\$ <u>0</u>	s
Lansing, MILLSall	6. Original Amount of Debt			FORGIVEN
	s 1715:39	s!		L
If bank loan, name of endorser or guarantor:			unt Endorsed: \$	1
Debt #2 Corp? Yes Owed to or by:	Victoria 14V	11.23:15's 1119.80		
Padricia Spitzie -1	5. Date Debt Was Incurred:	s	الاهابين	4301.61
7627 VICTO/AUR	7.13-15 6. Original Amount of Debt:	<u> </u>	s	\$
(1891) MI (1891)	s ८४५ पा	\$		FORGIVEN
•	•	<u> </u>		
If bank loan, name of endorser or guarantor:		Ame	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Туре:	s		
	5. Date Debt Was Incurred:	s		
	6. Original Amount of Debt	s	e	s
ı	6. Original Amount of Deat.	<u> </u>	>	FORGIVEN
	\$	s		PORGIVEN
if bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
		Page Subtotal (	Outstanding deht)	12155.00
		. ago osostata (		

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)

2155,00

on line 12a "owed by"" or line 12b "OWEd 10" of the Summery Page

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

age 2 of Z