01/31/2012



RECEI

F2012-0041 1/31/12 5:05 PM Page 1 of I CAMP \$0 00 Mike Bryanton: Ingham County Clerk

Candidate Virg Rent Name

INGHAM COUNTRY OF

COVER PAGE	TYM COOM LA CI	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 co	overs From: 01/01/2011 To: 12/31/2011 Mo Day Year Mo Day Year
1. Committee J.D. Number	4. Candidate Last	Name First Name M.I.
TC TZH R-OYAM00	R	Kro Virz P
2. Committee Name		cluding District # or Community Served (If applicable)
MAYOR V.C. BROOKED		
MAYOR Virg Brogersta	4b. County of Res <u>id</u>	ence Driver License # (Optional) Thy ham
E. Committoo's Mailing Address	6. Treasurer's Name	a & Residential Address Joseph McDonald
3000 Cambridge Lansing MF 48911		907 Smith
Area Code and Phone Lansing MF 48911	Area code & Phone	Lans: J MI 48910
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.	Driver License # (C	Optional)
7. Treasurer's Business Address	8. Designated Rec Designated Rec	ordkeeper's Name and Mailing Address (If the committee has a ordkeeper)
W4		
Area Code and Phone	Area Code and Ph	one Driver License # (Optional)
	<u> </u>	
9. TYPE OF STATEMENT 9a. Pre-Election OR 9b. Po	ost-Election	9c. Annual Statement (Coverage Year)
Pre-Election or Post-Election Statement relates to:		9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
☐ Primary ☐ Gen	eral	9e. Dissolution of Candidate Committee
☐ Convention ☐ Sch	loci	Effective Date of Dissolution
☐ Special ☐ Cau	cus	Mon Day Year
Date of Election, Convention or Caucus		By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary
Month Day Year	-	Page.
A committee that does not have a Reporting Waiver must file Schedules. Direct contributions, in-kind contributions, loans, If any of the information listed in items 2, 4, 5, 6, 7, or 8 has amendment to the Statement of Organization should accomp on or before the filing deadline of a required campaign st	anv uus Gambalun St	n Statements. The Campaign Statements must include all applicable istanding debts count against the \$1,000 Reporting Waiver threshold. ormation was shown on the committee's Statement of Organization, an atement. If a request for a Reporting Waiver is not received sign statement can not be waived.
Verification: I certify that all reasonable diligence was use my knowledge and belief the contents are true, accurate	d in the preparation o and complete.	f this statement and attached schedules (if any) and to the best of
Current Treasurer or Designated Recordkeeper	Sidastin	Date

1. Committee I.D. Number <u>00MAYO-R</u>	Merts Plus
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2. Committee Name MAYOR

SUMMARY PAGE CANDIDATE COMMITTEE

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	i ilis renou	Summanve tina alcohori oyole
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>23700.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	
c. Subtotal of "Contributions"	(3c.) \$ <u>23700.00</u>	(18.) \$ 23700.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 23700.00	(20.) \$ 23700.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.)\$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$ 22570.41
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	
(Add Line 10a + Line 10b)	(11.)\$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ 7305.08	
14. Amount received during reporting period (Line 5. Total Contributions & Other Receipts)	(14.) +	
15. SUBTOTAL Add Lines 13 and 14	(15.) = 31005.08	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - 22570.41	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 8434.67	•

1. Committee I.D. Number	00MAYO-R	
- Committee Name MAY	OR .	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees 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 01/22/2011	200.00	500.00
Name: Michael Yankowski Address:4260 Chancellor Dr		
Dewitt MI 48820 5. If over \$100.00 cumulative, please provide:		
Occupation <u>Lieutenant</u> Employer <u>Lansing Police Department</u>		
Business Address Lansing Mi 48910		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 2 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
3. Communicity 2	300.00	450.00
Name: James M Cash Address:500 Kedzie St		
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide: Occupation Vice President Employer Christman Company		
Business		
Address Lansing Mi 48933 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Type of Contribution: Direct Li Loan from a person Li Fund Raiser 3. Contribution # 3 PAC Receipt? X YES 4. Date of Receipt 01/22/2011	2000.00	4400.00
Name: Miller Canfield Pac Address:120 N Washington Sq	2000.00	17700.00
Lansing MI 48933 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
J. Continuation in 4	200.00	950.00
Name: Joe P Maguire Address:		
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation President Employer Wolverine Development		
Business Address Fast Lansing Mi 48823		
Type of Contribution: Direct		
Page Subtotal	2700.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



1. Committee I.D. Nur	mber _	00MAYO-	₹	<u> </u>	
2. Committee Name_	MAYO	DR			

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 5 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Gary J Mcray Address:313 S Washington Sq	255.55	
Lansing MI 48933 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Gary J Mcray		
Business Address Lansing Mi 48933		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 6 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011	200.00	500.00
Name: Michael E Flowers Address:3015 Appaloosa Way	200.00	300.00
Lansing MI 48906 5. If over \$100.00 cumulative, please provide:		
Occupation Human Resources Employer Lbwl		
Business 1232 Haco Dr Address Lansing Mi 48912 Type of Contribution: M Direct		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 7 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011	000.55	050.00
Name: Teresa A Szymanski	200.00	850.00
Address: 10359 Blackberry Ln		
Haslett MI 48840		
5. If over \$100.00 cumulative, please provide:		
Occupation Chief Of Police Employer Lansing Police Dept.		
Business Address Lansing Mi 48933		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 8 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	400.00	900.00
Name: Elizabeth Haar		
Address:		
Lansing MI 48933 5. If over \$100.00 cumulative, please provide:		
Occupation Ceo Employer Accident Fund		
Business Address Lansing Mi 48933		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	1000.00	

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

1. Committee I.D. Nu	mber	00MAYO-R	 	·
2. Committee Name_	MAYO	OR	 	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 9 PAC Receipt? □ YES 4. Date of Receipt 01/22/2011	200.00	600.00
Name: George Stojic Address:3927 Cloverdale Ave	200.00	
Okemos MI 48864 5. If over \$100.00 cumulative, please provide:		
Occupation Asst. General Manager Employer Lansing Board Of Water And Ligh		
Business 1232 Haco Or Address Lansing Mi 48912		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 10 PAC Receipt? ☑ YES 4. Date of Receipt 01/22/2011	250.00	250.00
Name: Ford Ford Motor Company Civic Action Address:		
Lansing MI 48933 5. If over \$100.00 cumulative, please provide: Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 11 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011	<u></u>	
3. Contribution # 11 PAC Receipt? YES 4. Date of Receipt U1/22/2011 Name: Mindy Biladeau	200.00	600.00
Address: 347 Split Rail Rdg		
Williamston MI 48895 5. If over \$100.00 cumulative, please provide:		
Occupation Exe. Dir. Employer Principal Shopping District		
Business Address Lansing Mi 48933		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 12 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011	200.00	500.00
Name: Susan C Devon Address:26 S Hughes Rd		
Howell MI 48843 5. If over \$100.00 cumulative, please provide:		
Occupation Finance Director Employer Lbwl		
Business 1232 Haco Dr Address Lansino Mi 48912		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	850.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nu	mber	00MAYO-R	 	
2. Committee Name_	MAYO	R	 	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 13 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	600.00
Name: Robert Ford Address:10367 S Bay Dr		
Laingsburg MI 48848 5. If over \$100.00 cumulative, please provide:		
Occupation Architect Employer Landscape Architects And Planni]	
Business 809 Center St 1 Address Lansing Mi 48906		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 14 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: James L Herbert Address:620 Lesher Pl		
Lansing MI 48912 5. If over \$100.00 cumulative, please provide:		
Occupation President Employer James Herbert		
Business 620 Lesher PI Address Lansing Mi 48912		
Type of Contribution: Direct Loan from a person Fund Raiser		
J. Communication 15 (7.0) recoupts a 125	200.00	200.00
Name: Frederick Sparrow Address:2700 Maritime Dr		
Lansing MI 48911 5. If over \$100.00 cumulative, please provide: Occupation Advertising Employer Barron Enterprises, Llc		
Business 2700 Maritime Dr		
Address Lansing Mi 48911		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 16 PAC Receipt? ☑ YES 4. Date of Receipt 01/22/2011	1000.00	2200.00
Name: Honig Honigman Miller Scwartz & Cohn Address:222 N Washington Sq 400	1000.00	2200.00
Lansing MI 48933 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	1	
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	1600.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee ↓.D. Numb	er 00MAYO-R
Committee Name N	1AYOR

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 17 PAC Receipt? YES 4. Date of Receipt 01/22/2011	200.00	500.00
Name: Douglas Wood Address:1232 Haco Dr	200.00	
Lansing MI 48912 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Lansing Board Of Water & Light		
Business 1232 Haco Dr Address Lansing Mi 48912		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 18 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Jeffrey Benson Address:5883 Printemp Dr		
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 19 PAC Receipt? YES 4. Date of Receipt 01/22/2011	50.00	300.00
Name: Harold J Leeman		
Address:529 N Francis Ave		
Lansing MI 48912 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Retired		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 20 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	500.00	500.00
Name: Ronnie J Boji		
Address:28948 Hearthstone Dr		1
Novi MI 48377 5. If over \$100.00 cumulative, please provide:		
Occupation President Employer Boji Group	:	
Business Address Lansing Mi 48915		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔲 Fund Raiser		
Page Subtotal	950.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nu	mber	00MAYO-R	 	
2. Committee Name_	MAYOF	₹	 	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 21 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	600.00
Name: Calvin L Jones Address:5518 River Ridge Dr		
Lansing MI 48917 5. If over \$100.00 cumulative, please provide:		
Occupation Community Outreach Employer Board Of Water & Light		
Business Address Lansing Mi 48901		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 22 PAC Receipt? ☒ YES 4. Date of Receipt 01/22/2011		
S. Contribution 22 Trice records	2000.00	5400.00
Name: Blue Cross & Blue Shield Of Mi Address:		
Lansing MI 48933 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 23 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
o. domination 20	400.00	400.00
Name: Gregory Minshall Address:7170 Fhaner Hwy		
Potterville MI 48876 5. If over \$100.00 cumulative, please provide:		
Occupation Engineer Employer Fitzgerald Henne		
Business 4063 Grand Oak Dr Address Lansing Mi 48911		
Address Lansing Mi 48911 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 24 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	600.00	900.00
Name: Patrick M Mcpharlin Address:8920 W Lake Pointe Dr		
Laingsburg MI 48848 5. If over \$100.00 cumulative, please provide: Occupation President/ceo Employer Msu Federal Credit Union		
000 0		
Business 600 Crescent Rd Address Fast Lansing Mi 48823		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	3200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nui	mber(0MAYO-R	 	
2. Committee Name	MAYOR		 	<u>-</u>

	1	
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 25 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	500.00
Name: Paul H Baerman Address: 2818 N Cambridge Rd	200.00	300.00
Lansing MI 48911 5. If over \$100.00 cumulative, please provide:		
Occupation Engineer Employer Wilcox Professional Servies Lic		
Business Address Lansing Mi 48911		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 26 PAC Receipt? ☑ YES 4. Date of Receipt ☐ 01/22/2011		
3. Contribution # 20 17/0 (1000)pt. B (100)	1000.00	5400.00
Name: Blue Cross & Blue Shield Of Mi		
Address:		
Lansing MI 48933 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		1
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 27 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	350.00
Name: Salvatore Castronovo		
Address:10610 Bobsyl Ln		
Grand Ledge MI 48837		
5. If over \$100.00 cumulative, please provide: Occupation Civil Engineer Employer Salvatore Castronovo		
Business 822 Centennial Way 250 Address Lansing Mi 48917		
Address Lansing Mi 48917 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 28 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Peter Cronk	200.00	
Address:13209 Watercrest Dr		
Dewitt MI 48820 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Plunkett Cooney		
Business Address Fast Lansing Mi 48823		
Address <u>Fast Lansing Mi 48823</u> Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	1600.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nur	mber 00MA	YO-R	<u></u>	
2. Committee Name_	MAYOR			

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3. Contribution # 29 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	550.00
Name: William Hamilton Address:1831 Haslett Rd Williamston MI 48895	200.00	350.00
5. If over \$100.00 cumulative, please provide:		
Occupation President Employer Techsmith		
Business 2405 Woodlake Dr Address Okemos Mi 48864		
Type of Contribution: Direct	<u> </u>	
3. Contribution # 30 PAC Receipt? D YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Steve Serkaian Address:3770 Chippendale Cir		
Okemos MI 48864 5. If over \$100.00 cumulative, please provide:		
Occupation President Employer Steve Serkaian		
Business 120 N Washington Sq 805 Address Lansing Mi 48933		:
Type of Contribution: Direct Loan from a person Fund Raiser		· · · · · · · · · · · · · · · · · · ·
3. Contribution # 31 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Peter W Kramer		
Address:1701 Nottingham Rd		
Lansing MI 48911 5. If over \$100.00 cumulative, please provide:		
Occupation Project Manager Employer	1	
Business 1737 Rockdale Ave		
Address Lansing Mi. 48917		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 32 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011	200.00	350.00
Name: Michael Kettlewell		
Address:4730 W Howe Rd		
Dewitt MI 48820 5. If over \$100.00 cumulative, please provide:		
Occupation Manager Employer Christman Company		
Rusingss 324 E South St		į
Business 324 E 300ff 31 Address Lansing Mi 48910		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	800.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nur	mber00	MAYO-R	
2. Committee Name_	MAYOR		

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 o more, 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 from committees regardless amount.	al	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 33 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	_ 200.00	350.00
Name: Anthony Pecchio Address:3608 Snowden Ln	200.00	000.00
Howell MI 48843 5. If over \$100.00 cumulative, please provide:		
Occupation Manager Employer Christman Co.		
Business Address Lansing Mi 49833		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 34 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011		300.00
Name: Paul C Jacob Address:1298 Sebewaing Rd	200.00	
Okemos MI 48864 5. If over \$100.00 cumulative, please provide:		
Occupation Architect Employer		
Business Address Lansing Mi 48933		<u> </u>
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 35 PAC Receipt? X YES 4. Date of Receipt 01/22/2011 Name: Dykema Go Dykema Gossett Federal Pac Address:201 Townsend St 900 Lansing MI 48933	400.00	700.00
5. If over \$100.00 cumulative, please provide:		1
Occupation Employer	_	
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 36 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011	200.00	200.00
Name: Jeffrey D Padden Address:4288 Cherry Hill Dr		
Okemos MI 48864 5. If over \$100.00 cumulative, please provide: Occupation Public Policy Associa- Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtota	1000.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule		_

1. Committee I.D. Nu	mber	00MAYO-R		<u></u> .	
2. Committee Name_	MAYC	DR			

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 37 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	750.00
Name: Mark Nixon Address:11624 Wilbur Hwy	200.00	, , , , , ,
Eaton Rapids MI 48827 5. If over \$100.00 cumulative, please provide: Occupation Communications Direct-Employer BWI		
Business 1232 Haco Dr Address Lansing Mi 48912 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 38 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	400.00	250.00
Name: William T Cochran Address:418 Coppersmith Dr	100.00	250.00
Mason MI 48854 5. If over \$100.00 cumulative, please provide: Occupation Chief Employer Lfd		
Business Address Lansing Mi 48933 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 39 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: J Peter Lark Address:1401 Dennison Rd		
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Bwl		
Business Address Lansing Mi 48911 Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 40 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Michael J Bryanton Address:523 Bainbridge Dr 42		
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation Clerk Employer Mr. Michael Bryanton		
Business 315 S Jefferson St Address Mason Mi 48854		
Type of Contribution: Direct		
Page Subtotal	700.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Number	00MAYO-R	
2. Committee Name Mi	YOR	

		1	
Enter contributor's name and address. If contribution if from an individual and the more, enter last name, first name, middle initial. Check box to indicate if contributions from committee or an independent Committee. (PAC) Report all contributions from community.	ution is from a Political ommittees regardless of	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 41 PAC Receipt? ☐ YES 4. Date of Receipt	01/22/2011	200.00	200.00
Name: Roger Marks Address:2020 Parnell Ave		200.00	
Ada MI 49301			
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Type of Contribution: Direct	☐ Fund Raiser 01/22/2011		
3. Contribution # 42 PAC Receipt? ☐ YES 4. Date of Receipt	U 1/22/2U11	200.00	500.00
Name: Charles Owens			
Address:326 Williamsburg Rd			
Lansing MI 48917 5. If over \$100.00 cumulative, please provide:			
Occupation Retired Employer			
Business Address	<u> </u>		
Type of Contribution: ☐ Direct ☐ Loan from a person	☐ Fund Raiser 01/22/2011		
3. Contribution # 43 PAC Receipt? ☐ YES 4. Date of Receipt	UIIZZIZUII	200.00	500.00
Name: Kenneth G Lawless			
Address:531 Grape St			
Portland MI 48875 5. If over \$100.00 cumulative, please provide:			
Occupation Vp Employer Clark Construction			
2525 Magrap Biyar Dr			
Address Lansing Mi 48911			
Type of Contribution: Direct Loan from a person	☐ Fund Raiser		
3. Contribution # 44 PAC Receipt? YES 4. Date of Receipt	01/22/2011	200.00	500.00
Name: Charles J Clark			
Address:11451 S Forest Hill Rd			
Eagle MI 48822 5. If over \$100.00 cumulative, please provide:			
Occupation President Employer Clark Construction			
Business 3535 Moores River Dr Address Lansino Mi 48911			
Type of Contribution: ☑ Direct ☐ Loan from a person	☐ Fund Raiser		
	Page Subtotal	800.00	
	al of All Schedules 1A]

1. Committee I.D. Nui	mber 00MAYO-F	R	
2. Committee Name_	MAYOR		

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 45 PAC Receipt? YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: David J Houston Address:915 Westlawn Ave	200.00	200.00
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Dickinson Wright		
Business Address Lansing Mi 48933		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 46 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
3. Contribution # 46 PAC Receipt? YES 4. Date of Receipt U1/22/2011 Name: Christopher Thompson	200.00	500.00
Address: 1232 Haco Dr		
Lansing MI 48912 5. If over \$100.00 cumulative, please provide:		
Occupation Manager Employer Lansing Board Of Water And Ligh		
Business 1232 Haco Dr Address Lansing Mi 48912		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 47 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
5. Completion # 47	200.00	500.00
Name: Judith Horning Address:5200 W Clark Rd	1	
Lansing MI 48906 5. If over \$100.00 cumulative, please provide: Occupation Police Officer Employer Lansing Police Department		
Business 120 W Michigan Ave Address Lansing Mi 48933		
Type of Contribution: Direct		
3. Contribution # 48 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	1000.00	1000.00
Name: Thomas Hofman Address:3101 E Mount Hope Ave		
Lansing MI 48910 5. If over \$100.00 cumulative, please provide:		
Occupation Manager Employer Granger lij		
4000 11 15 1		
Business 16980 Wood Rd Address Lansing Mi 48906		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	<u> </u>	
Page Subtotal	1600.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		_

1. Committee I.D. Nur	nber	00MAY	O-R	 <u> </u>	
2. Committee Name	MAYO	DR			

	T	
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 49 PAC Receipt? ✓ YES 4. Date of Receipt 01/22/2011	1000.00	1900.00
Name: Tetr Tetra Tech Mps Seperate Segrega Address:710 Avis Dr	1000.00	1555.55
Ann Arbor MI 48108 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		<u> </u>
3. Contribution # 50 PAC Receipt? X YES 4. Date of Receipt 01/22/2011	400.00	400.00
Name: Michigan Credit Mi Credit Union Pac Address: Po Box 8054		
Plymouth MI 48170 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 51 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
3. Contribution # 51 PAC Receipt? YES 4. Date of Receipt 01/22/2011 Name: John A Holmstrom Address: 1856 Heatherton Dr	200.00	350.00
Holt MI 48842 5. If over \$100.00 cumulative, please provide:		
Occupation Construction Executive Employer Christman Company		
Business 1737 Rockdale Ave		
Address Lansing Mi 48917		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 52 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011	200.00	200.00
Name: Angela Bailey Address: 4318 Oakcrest Dr		
Lansing MI 48917		
If over \$100.00 cumulative, please provide: Occupation Sales Assistant Employer The Christman Company		
Business Address Lansing Mi 48933		
Type of Contribution: Direct	1	
Page Subtotal	1800.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nui	mber(00MAYO-R	•	 	_
2. Committee Name_	MAYOR			 	

	T	I
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 53 PAC Receipt? D YES 4. Date of Receipt 01/22/2011	300.00	450.00
Name: Steven F Roznowski Address:2675 Maritime Dr	300.00	100.00
Lansing MI 48911 5. If over \$100.00 cumulative, please provide:		
Occupation Ceo Employer Christman Company		
Business Address Lansing Mi 48933		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 54 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
5. Continuation # 34 176 Hocopy. II 120 11 120 11 120 11 120 11	200.00	700.00
Name: Kerri L Trezise		
Address:1705 Opaline Dr		
Lansing MI 48917 5. If over \$100.00 cumulative, please provide:		
Occupation Homemaker Employer Mrs. Kerri L. Trezise		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 55 PAC Receipt? D YES 4. Date of Receipt 01/22/2011	200.00	500.00
Name: Robert E Johnson		
Address:800 W Shiawassee St		
Lansing MI 48915 5. If over \$100.00 cumulative, please provide:		
Occupation Planning Director Employer City Of Lansing		
Business		
Business Address Lansing Mi 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 56 PAC Receipt? YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Anastasios Malvetis	1	
Address:4272 Mar Moor Dr		
Lansing MI 48917 5. If over \$100.00 cumulative, please provide:		
Occupation Engineer Employer City Of Lansing		
Business		
Address Lansing Mi 48933		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	900.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(Outplete of last page of outedate)		

1. Committee I.D. Number	00MAYO-R	
2 Committee Name MAY	OR	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 57 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: David Otis Address:325 E Grand River Ave 250	200.00	200.00
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Plunkett & Cooney P.c.		
Business 325 E Grand River Ave 250 Address Fast Lansing Mi 48823		
Address Fast Lansing Mi 48823 Type of Contribution: Direct		
3. Contribution # 58 PAC Receipt? YES 4. Date of Receipt 01/22/2011		4000.00
G. Continuation in Co.	1000.00	1000.00
Name: Lauren Ciesa Address:541 Durand St		
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation President Employer Ciesa Design		
Business 200 E Grand River Ave		
Address Lansing Mi 48906 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 59 PAC Receipt? YES 4. Date of Receipt 01/22/2011		000.00
Name: Patricia A Baines-lake Address: 1303 Tavistock Pl	100.00	600.00
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation Director Employer Lansing Housing Commission		
Business Address Lansing Mi 48933		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3 Contribution # 60 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011		
3. Contribution # 60 PAC Receipt? YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Steven C Hess		
Address:5290 Park Lake Rd		
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation Exec Vp/general Couns- Employer Accident Fund		
Business 232 S Capitol Ave Address Lansing Mi 48933		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
	1500.00	
Page Subtotal	1500.00	4
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nu	ber 00MAYO-R	 · · · · · -
2. Committee Name_	MAYOR	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 61 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	600.00
Name: Charles A Janssen	200.00	000.00
Address: 1805 Moores River Dr		
Lansing MI 48910 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 62 PAC Receipt? YES 4. Date of Receipt 01/22/2011	200.00	500.00
Name: Ralph Shaheen	200.00	330.00
Address:2757 Dobie Rd		
Mason MI 48854 5. If over \$100.00 cumulative, please provide:		
Occupation Owner Employer Shaheen Chevrolet		
Business Address Lansing Mi 48910		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 63 PAC Receipt? YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Phillip Erickson		
Address:2098 Butternut Dr		
Okemos MI 48864 5. If over \$100.00 cumulative, please provide:		
Occupation Partner Employer Plunkett Cooney		
Business Address East Lansing Mi 48823		}
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 64 PAC Receipt? YES 4. Date of Receipt 01/22/2011	200.00	1200.00
Name: Kelly G Keenan	200,20	
Address: Po Box 30013		
Lansing MI 48909 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer State Of Michigan		
Business Po Box 30013 Address Lansing Mi 48909		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	800.00	
Grand Total of All Schedules 1A]

1. Committee I.D. Number	00MAYO-R
2. Committee Name MAYO	OR

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 65 PAC Receipt? YES 4. Date of Receipt 01/22/2011	100.00	100.00
Name: Christopher J Swope Address:1402 N Genesee Dr	100.00	
Lansing MI 48915 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 66 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Stephen Purchase Address:	200.00	25510
5. If over \$100.00 cumulative, please provide:		
Occupation Student Employer Mr. Stephen Purchase		
Business Address	:	
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 67 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
Name: Fritz Klinger Address: 3765 Boulder Dr	200.00	700.00
Troy MI 48084 5. If over \$100.00 cumulative, please provide:		
Occupation Senior Vice President Employer Nth Consultants Ltd		
Business Address Detroit Mi 48226		
Address <u>Detroit Mi 48226</u> Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 68 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: John B Stadnicar	200.00	200.00
Address:		
Detroit MI 48226 5. If over \$100.00 cumulative, please provide:		
Occupation Engineer Employer Nth Consultants		
Business Address Detroit Mi 48226		
Address <u>Detroit Mi 48226</u> Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
The state of the s		
Page Subtotal	700.00	
Grand Total of All Schedules 1A		1
(Complete on last page of Schedule)		

1. Committee I.D. Nu	mber 00MAYO-R	
2. Committee Name_	MAYOR	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 69 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2011	200.00	700.00
Name: Keith M Swaffar Address:18440 Chatham St	200.00	, , , , , , , , , , , , , , , , , , , ,
Riverview MI 48193 5. If over \$100.00 cumulative, please provide:		
Occupation Engineer Employer Nth		
Business 2000 Brush St 480 Address Detroit Mi, 48226		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 70 PAC Receipt? D YES 4. Date of Receipt 01/22/2011	200.00	200.00
Name: Kevin B Hoppe Address:35222 Pleasant Valley Ct		
Farmington Hills MI 48331 5. If over \$100.00 cumulative, please provide:		
Occupation Engineer Employer Kevin B. Hoppe		
Business Address Northville Mi 48168		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 71 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		
3. Contribution # 11 Trico resolution in Trico	200.00	200.00
Name: William Kimble Address:11880 Rachel Ln		
Dewitt MI 48820 5. If over \$100.00 cumulative, please provide:		
Occupation President Employer C2ae		
Business 725 Prudden St		
Address Lansing Mi 48906		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 72 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011	200.00	700.00
Name: David Gregory Address:608 E Geneva Dr		
Dewitt MI 48820		
5. If over \$100.00 cumulative, please provide:		
Occupation Lobbyist Employer Kelley Cawthorne		
Business Address Lansing Mi		
Type of Contribution: Direct		
Page Subtotal	800.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nu	mber	00MAYO-R	 	
2. Committee Name_	MAYC	DR	 	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 73 PAC Receipt? YES 4. Date of Receipt 01/22/2011	200.00	500.00
Name: Mark E Alley Address:6734 Seka Dr Lansing MI 48911	200.00	300.00
5. If over \$100.00 cumulative, please provide:		
Occupation Police Chief Employer Lpd		
Business Address Lansing Mi 48911 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser 3. Contribution # 74 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 01/22/2011		000.00
G. Gombaden 7,7	200.00	200.00
Name: Rishan Butler Address:1476 Stonegate Ln		
	!	
East Lansing MI 48823 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Ms. Rishan Butler		
Business Po Box 40010 Address Lansing Mi 48901		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		1
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Page Subtotal of All Schedules 1A

400.00

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

23700.00



1. Committee I.D. Number <u>00MAYO-R</u>

2	Committee Name	MAYOR
2.	Committee Name	WATOR

3. Name and	address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure	# 1)	09/15/2011	100.00
Name: F	People For Nicole Armbruster	Purpose:	03/10/23//	, 5 1.5 5
Address: 3	3031 S. Cambridge	5 5 mar da ma Octa - DI		
L	ansing MI 48911	Expenditure Code <u>DI</u>		
☐ Fund Rai	-	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure	# 2		03/22/2011	1421.46
Name: K	Keystone	Purpose: Invites	03/22/2017	1421.40
Address: 1	15400 N. Us 27	Funnsitive Code PA	Ļ	
L	_ansing MI 48906	Expenditure Code PA		
		Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund Rai	iser	statement		
Expenditure	# 3		03/23/2011	100.00
Name: (Curtis Hertel Ffor Register Of Deeds	Purpose:		
Address: 2	2747 Southwood	Expenditure Code DI		
1	East Lansing MI 48823	Check box if this expenditure is payment		
☐ Fund Ra	iser	of debt or obligation reported on previous statement		
Expenditure	:#4		03/29/2011	100.00
Name:	People For Eric Schertzing	Purpose:		
Address:	236 Kedzie	Expenditure Code DI		
	East Lansing MI 48823		ļ	
		Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund Ra		statement	<u> </u>	
Expenditure			03/29/2011	100.00
Name:	Friends For Paul Wojno	Purpose:		
Address:	32025 Margaret Ct.	Expenditure Code DI		,
	Warren MI 48093	☐ Check box if this expenditure is payment		
☐ Fund Ra	aiser	of debt or obligation reported on previous statement		
		Subtotal this	s page	1821.46

Enter this total on line 8a of Summary Page

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

1. Committee I.D. Number	00MAYO-R

2. Committee Name MAYOR

3. Name and address of person or vendor to who	n paid 4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 6		05/05/2011	100.00
Name: Dwight Rich Pta	Purpose:		
Address: 2100 Hampden	Expenditure Code CC	:	
Lansing MI 48911	Check box if this expenditure is payment		
☐ Fund Raiser	of debt or obligation reported on previous statement		
Expenditure # 7		05/18/2011	50.00
Name: Children's Miracle Network	Purpose:		
Address: 1215 E. Michigan Ave.	Expenditure Code <u>CC</u>		
Lansing MI 48912			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure # 8		05/25/2011	100.00
Name: Leeman For Lansing	Purpose:]	
Address: 435 N. Francis	Expenditure Code DI		
Lansing MI 48912	☐ Check box if this expenditure is payment		
☐ Fund Raiser	of debt or obligation reported on previous statement		
Expenditure # 9		07/27/2011	85.00
Name: Usps	Purpose:		
Address: 4800 Collins Rd.	Expenditure Code MA_		
Lansing MI 48910	-		
	 Check box if this expenditure is payment of debt or obligation reported on previous 		
Fund Raiser	statement	<u> </u>	
Expenditure # 10		07/15/2011	100.00
Name: Wriggelsworth For Sheriff	Purpose:		
Address: Po Box 581	Expenditure Code DI		
Holt MI 48842	Check box if this expenditure is payment		
☐ Fund Raiser	of debt or obligation reported on previous statement		
	Subtotal this	page	435.00
	Grand Total of all Schedu (Complete on last page of Sch	les 1B edule)	
	(Complete on last page of och	/	



1. Committee I.D. Number 00MAYO-R	1. Committee I.D. Number	00MAYO-R
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2. Committee Name MAYOR

3. Name an	d address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you	5. Date	6. Amount
Expenditure	# 11	may assign an Expenditure Code)		911.05
Name:	Us Postmaster	Purpose:	01/04/2011	911.05
Address:	3600 Colins Road			
I	Lansing MI	Expenditure Code MA Check box if this expenditure is payment		
☐ Fund Ra	aiser	of debt or obligation reported on previous statement		
Expenditure	e # 12		09/15/2011	100.00
Name:	People For Steve Mnchester	Purpose:		
Address:	514 Westmoreland	Expenditure Code DI		<u>'</u>
	Lansing MI 48915	<u> </u>		
☐ Fund Ra	aiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		:
Expenditure	e # 13		09/15/2011	100.00
Name:	Lynn Martinez For City Council	Purpose:	09/13/2011	100.00
Address:	308 Leslie	5 11 0 1 0		
	Lansing MI 48912	Expenditure Code DI		
	Ç	Check box if this expenditure is payment of debt or obligation reported on previous		!
☐ Fund Ra	aiser	statement		
Expenditure	e # 14		11/16/2011	100.00
Name:	Keep Lansing Safe	Purpose:		
Address:	1035 Seymour	Expenditure Code BQ		
	Lansing MI 48906			
☐ Fund Ra	aiser	 Check box if this expenditure is payment of debt or obligation reported on previous statement 		
Expenditure	e # 15		12/01/2011	1486.64
Name:	Best Buy	Purpose:	1.5.6.11.2.1	
Address:	2020 W. Grand River	Expenditure Code <u>CO</u>		
	East Lansing MI 48823			
☐ Fund Ra	aiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
<u> </u>		Subtotal this	page	2697.69
		Grand Total of all Schedu (Complete on last page of Sch		

1. Committee I.D. Number _	00MAYO-R
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2. Committee Name MAYOR

3. Name and address of person or vendor to whom paid 4. Purpose (Describe specific purpose and you may assign an Expenditure Code) 5. Date 6. Amount 6. Amount 911.05 Name: Us Postmaster Address: 3600 Collins Road Lansing MI 48901 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 17 Name: A'lynne Robinson For City Council Address: 2515 Victor Lansing MI 48911 Check box if this expenditure is payment of debt or obligation reported on previous Expenditure Code DI Check box if this expenditure is payment of debt or obligation reported on previous
Name: Us Postmaster Address: 3600 Collins Road Lansing MI 48901 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 17 Name: A'lynne Robinson For City Council Address: 2515 Victor Lansing MI 48911 Check box if this expenditure is payment of debt or obligation reported on previous Expenditure CodeDI
Name: Us Postmaster Address: 3600 Collins Road Lansing MI 48901 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 17 Name: A'lynne Robinson For City Council Address: 2515 Victor Lansing MI 48911 Check box if this expenditure is payment of debt or obligation reported on previous Expenditure Code DI Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure Code MA □ Check box if this expenditure is payment of debt or obligation reported on previous statement □ Fund Raiser □ Check box if this expenditure is payment of debt or obligation reported on previous statement □ Check box if this expenditure is payment of debt or obligation reported on previous □ D1/20/2011 □ Check box if this expenditure is payment of debt or obligation reported on previous
Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous statement 17
□ Fund Raiser of debt or obligation reported on previous statement Expenditure # 17 Name: A'lynne Robinson For City Council Purpose: Address: 2515 Victor Expenditure Code □1 Lansing MI 48911 □ Check box if this expenditure is payment of debt or obligation reported on previous
Name: A'lynne Robinson For City Council Address: 2515 Victor Lansing MI 48911 Check box if this expenditure is payment of debt or obligation reported on previous
Name: A'tynne Robinson For City Council Address: 2515 Victor Lansing MI 48911 Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure Code D1 Lansing MI 48911 Check box if this expenditure is payment of debt or obligation reported on previous
Lansing MI 48911 Check box if this expenditure is payment of debt or obligation reported on previous
Check box if this expenditure is payment of debt or obligation reported on previous
of debt or obligation reported on previous
☐ Fund Raiser statement
Expenditure # 18 01/20/2011 4775.00
Name: Lansing Center Purpose:
Address: 333 E Michigan Ave Expenditure Code RE
Lansing MI 48933
☐ Check box if this expenditure is payment of debt or obligation reported on previous statement
Evpanditure # 10
01/03/2011 16.95
Name: Efax Purpose:
Address: 6922 Hollywood Expenditure Code OE
Los Angelos CA 90028 ☐ Check box if this expenditure is payment
of debt or obligation reported on previous statement
Expenditure # 20 01/06/2011 80.00
Name: Constant Contact Purpose: 01/06/2011 80.00
Address: 000 Street
Waltham MA 4000 Expenditure Code CO
Check box if this expenditure is payment of debt or obligation reported on previous statement
Subtotal this page 5883.00

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



1. Committee I.D. Number	00MAYO-R	

2. Committee Name MAYOR

3. Name a	nd address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditur	re # 21	may assign an expenditure code)	04/00/0044	41 DE
Name:	Godaddy.com	Purpose:	01/20/2011	41.05
Address:	0000 Street			
, , , , , , , , , , , , , , , , , , , ,	Cedar Rapids MI	Expenditure Code <u>CO</u>		:
	,	Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund R	daiser	statement		
Expenditu	re # 22		02/03/2011	16.95
Name:	Efax	Purpose:		
Address:	6922 Hollywood	Expenditure Code EQ		
	Los Angelos CA 90028			
_		Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund R		statement	<u></u>	
Expenditu	re # 23		03/03/2011	16.95
Name:	Efax	Purpose:		
Address:	6922 Hollywood	Expenditure Code EQ		
	Los Angelos CA 90028	<u>"</u>		
_		Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund F		statement		
Expenditu	re # 24		04/03/2011	16.95
Name:	Efax	Purpose:		
Address:	6922 Hollywood	Expenditure Code <u>EQ</u>		
	Los Angelos CA 90028		:	
		Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund F		statement	<u> </u>	
Expenditu	re # 25		05/03/2011	16.95
Name:	Efax	Purpose:		
Address:	6922 Hollywood	Expenditure Code EQ_		
	Los Angelos CA 90028			
l	Dela co	Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund F	raiser	statement	<u></u>	
		Subtotal this	page	108.85
		Grand Total of all Schedul (Complete on last page of Sch		



1. Committee I.D. Number	00MAYO-R

2. Committee Name MAYOR

	CANDIDATE COMMITTEE			
3. Name ar	nd address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure	e # 26		06/03/2011	16.95
Name:	Efax	Purpose:	00,00,2011	.0.00
Address:	6922 Hollywood		!	
	Los Angelos CA 90028	Expenditure CodeEQ		
	EUS Aligelus CA 90020	☐ Check box if this expenditure is payment		
☐ Fund Ra	aiser	of debt or obligation reported on previous statement		
Expenditure	e # 27		02/07/2011	155.00
Name:	Constant Contact	Purpose:	02.01.02.1	
Address:	000 Street			
	100 H	Expenditure Code <u>CO</u>		
	Waltham MA 4000	☐ Check box if this expenditure is payment		
☐ Fund Ra	aiser	of debt or obligation reported on previous		
		statement	<u> </u>	
Expenditur			03/07/2011	155.00
Name:	Constant Contact	Purpose:		
Address:	000 Street	5		
	Waltham MA 4000	Expenditure Code <u>CO</u>		
	Waltian W. Tool	☐ Check box if this expenditure is payment		
☐ Fund R	aiser	of debt or obligation reported on previous statement		
Expenditur	e # 29		 	455.00
Name:	Constant Contact	Purpose:	04/06/2011	155.00
Address:	000 Street	Expenditure CodeCO		
	Waltham MA 4000			
		Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund R	aiser	statement		
Expenditur	e # 30		05/05/2011	155.00
Name:	Constant Contact	Purpose:		
Address:	000 Street			
	M. W	Expenditure Code CO		
	Waltham MA 4000	☐ Check box if this expenditure is payment		
│ │	laiser	of debt or obligation reported on previous statement	[
	2/4 2/4 2/4 2/4 2/4 2/4 2/4 2/4 2/4 2/4	Statement	<u> </u>	
			636.95	
		Grand Total of all Schedul (Complete on last page of Sch		



1. Committee I.D. Number	00MAYO-R	
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2. Committee Name MAYOR

Expenditure # 31	Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you	5. Date	6. Amount
Name: Constant Contact Address: 000 Street Waltham MA 4000 Fund Raiser Expenditure Code CO Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 32 Name: Constant Contact Address: 000 Street Waltham MA 4000 Purpose: Expenditure Code CO Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure Code CO Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 33 Name: At&t Address: Po Box 9001310 Expenditure Code EQ Expenditure Code EQ Expenditure Code EQ		may assign an Expenditure Code)		
Address: 000 Street Waltham MA 4000 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 32 Name: Constant Contact Address: 000 Street Waltham MA 4000 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure Code CO Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 33 Name: At&t Address: Po Box 9001310 Expenditure Code EQ	Expenditure # 31		06/06/2011	155.00
Waltham MA 4000 Gheck box if this expenditure is payment of debt or obligation reported on previous statement	Name: Constant Contact	Purpose:		
Check box if this expenditure is payment of debt or obligation reported on previous statement	Address: 000 Street			
□ Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 32 07/05/2011 Name: Constant Contact Purpose:	Waltham MA 4000	Expenditure Code CO		
Fund Raiser statement	VValutati IMA 4000			
Name: Constant Contact Address: 000 Street Waltham MA 4000 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 33 Name: At&t Address: Po Box 9001310 Purpose: Expenditure Code CO Check box if this expenditure is payment of debt or obligation reported on previous statement Description: Expenditure Code EQ Expenditure Code EQ Description: Expenditure Code EQ Description: Description: Expenditure Code EQ Description: Description:	☐ Fund Raiser		<u> </u>	
Name: Constant Contact Address: 000 Street Waltham MA 4000 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 33 Name: At&t Address: Po Box 9001310 Purpose: Expenditure Code CO Check box if this expenditure is payment of debt or obligation reported on previous statement 02/08/2011 1510.45	Expenditure # 32		07/05/2011	155.00
Waltham MA 4000 ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 33 Name: At&t Address: Po Box 9001310 Expenditure CodeCO_ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement 02/08/2011 1510.45	Name: Constant Contact	Purpose:		
Waltham MA 4000 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 33 Name: At&t Address: Po Box 9001310 Expenditure CodeEQ_	Address: 000 Street			
Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 33 Name: At&t Purpose:	Waltham MA 4000	Expenditure Code <u>CO</u>		
Fund Raiser Statement	waltham WA 4000	· · · · · · · · · · · · · · · · · · ·		
Name: At&t Purpose: 02/08/2011 1510.45 Address: Po Box 9001310 Expenditure Code _ EQ	☐ Fund Raiser	= '		
Name: At&t Purpose: Address: Po Box 9001310 Expenditure CodeEQ	Expenditure # 33		02/02/2011	1510.45
Expenditure Code EQ	Name: At&t	Purpose:	02/08/2011	1310.43
Expenditure Code EQ	Address: Po Box 9001310			,
Louisville KY 40290		Expenditure CodeEQ		
☐ Check box if this expenditure is payment ☐	Louisville KY 40290	☐ Check box if this expenditure is payment		
of debt or obligation reported on previous	□ Fund Raiser	of debt or obligation reported on previous		
Expenditure # 34		statement		
03/10/2011 84.79			03/10/2011	84.79
Name: At&t Purpose:	Name: At&t	Purpose:		
Address: Po Box 9001310 Expenditure Code EQ	Address: Po Box 9001310	Evpenditure Code FO		
Louisville KY 40290	Louisville KY 40290	Expenditure dodd		
Check box if this expenditure is payment of debt or obligation reported on previous				
Fund Raiser statement	☐ Fund Raiser	_		
Expenditure # 35 04/14/2011 1481.58	Expenditure # 35		04/14/2011	1481 58
Name: At&t Purpose:	Name: At&t	Purpose:	04/14/2011	1400.50
Address: Po Box 9001310	Address: Po Box 9001310			
Expenditure Code EQ		Expenditure CodeEQ		
Louisville KY 40290 ☐ Check box if this expenditure is payment	Louisville KY 40290	☐ Check box if this expenditure is payment		
☐ Fund Raiser of debt or obligation reported on previous statement	☐ Fund Raiser	• ,		
Subtotal this page 3386.82	The state of the s	Subtotal this	s page	3386 82
Grand Total of all Schedules 1B (Complete on last page of Schedule)		Grand Total of all Schedu	les 1B	



1. Committee I.D. Number	00MAYO-R

2. Committee Name MAYOR

3. Name and address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 36		05/16/2011	31.79
Name: At&t	Purpose:	/	
Address: Po Box 9001310	5		
Louisville KY 40290	Expenditure Code <u>EQ</u>		
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure # 37		05/16/2011	565.46
Name: At&t	Purpose:	:	
Address: Po Box 9001310	Expenditure Code <u>EQ</u>		
Louisville KY 40290			
	Check box if this expenditure is payment of debt or obligation reported on previous		ļ
Fund Raiser	statement		
Expenditure # 38		06/21/2011	565.01
Name: At&t	Purpose:		
Address: Po Box 9001310	Expenditure CodeEQ	-	
Louisville KY 40290			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure # 39		07/14/2011	557.95
Name: At&t	Purpose:		
Address: Po Box 9001310	Expenditure Code EQ		
Louisville KY 40290	☐ Check box if this expenditure is payment		
☐ Fund Raiser	of debt or obligation reported on previous		
	statement		
Expenditure # 40		08/24/2011	705.65
Name: At&t	Purpose:		
Address: Po Box 9001310	Expenditure Code <u>EQ</u>		
Łouisville KY 40290	☐ Check box if this expenditure is payment		
│ │ ☐ Fund Raiser	of debt or obligation reported on previous		
3 . 3.3	statement		
Subtotal this page			2425.86
	Grand Total of all Schedul (Complete on last page of Sche		

1. Committee I.D. Number	00MAYO-R	

2. Committee Name MAYOR

Septenditure	3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you	5. Date	6. Amount
Name: AL&I Purpose: 09/88/011 09/88/01 <td>Expenditure # 41</td> <td>may assign an Expenditure Code)</td> <td></td> <td></td>	Expenditure # 41	may assign an Expenditure Code)		
Address		Purposo:	09/26/2011	690.30
Expenditure Code		rurpuse.		
Check box if this expenditure is payment of debt or obligation reported on provious statement	Address: Po Box 9001310	Expenditure Code EQ		
Fund Raiser Statement S	Louisville KY 40290			
Name: At&t Address: Po Box 9001310 Louisville KY 40290	☐ Fund Raiser	of debt or obligation reported on previous		
Name: A&& Purpose:	Expenditure # 42		10/24/2011	607.35
Expenditure CodeEQ Check box if this expenditure is payment of debt or obligation reported on previous statement	Name: At&t	Purpose:	10/2 (120)	
Coulsville KY 40290 Fund Raiser Expenditure # 43 Name: At&t Address: Po Box 9001310 Expenditure # 44 Name: At&t Expenditure # 44 Name: At&t Purpose: Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure Code	Address: Po Box 9001310			
Check box if this expenditure is payment of debt or obligation reported on previous statement	Louisvillo KV 40200	Expenditure Code <u>EQ</u>		
Expenditure # 43 Name: At&t Address: Po Box 9001310 Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Fund Raiser	Louisville K1 40290			
Name: At&t Purpose:	☐ Fund Raiser			
Name: At&t Address: Po Box 9001310 Expenditure Code _EQ _ Check box if this expenditure is payment of debt or obligation reported on previous statement	Expenditure # 43			602.94
Address: Po Box 9001310 Louisville KY 40290 Fund Raiser Expenditure # 44 Name: At&t Address: Po Box 9001310 Louisville KY 40290 Description Raiser Expenditure # 45 Name: At&t Expenditure # 46 Name: At&t Expenditure # 45 Name: At&t Expenditure # 46 Name: At&t Expenditure # 46 Name: At&t Expenditure # 45 Name: At&t Expenditure # 46 Name: At&t Expenditure # 46 Name: At&t Expenditure CodeEQ Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 46 Name: At&t Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure CodeEQ Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure CodeEQ Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure CodeEQ Check box if this expenditure is payment of debt or obligation reported on previous statement	Name: At&t	 Purpose:	11/25/2011	003.64
Expenditure Code _EQ				
Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous statement		Expenditure Code <u>EQ</u>		
Fund Raiser Subtotal this page Caracter Statement Subtotal this page Caracter Statement Caracter Stat	Louisville KY 40290	☐ Check box if this expenditure is payment	İ	
Expenditure # 44 Name: At&t Address: Po Box 9001310 Louisville KY 40290 Expenditure Code EQ Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 45 Name: At&t Address: Po Box 9001310 Expenditure Code EQ Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 45 Name: At&t Address: Po Box 9001310 Expenditure Code EQ Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page 2560.87	☐ Fund Raiser	_ ·		
Name: At&t Address: Po Box 9001310 Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 45 Name: At&t Address: Po Box 9001310 Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure CodeEQ O2/11/2011 31.79 Expenditure CodeEQ Check box if this expenditure is payment of debt or obligation reported on previous statement Subtoal this page2560.87.		Statement	<u> </u>	
Address: Po Box 9001310 Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 45 Name: At&t Address: Po Box 9001310 Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous Expenditure # 25 Name: At&t Address: Po Box 9001310 Expenditure CodeEQ Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page2560.87.		D. T.	12/27/2011	627.59
Expenditure CodeEQ Check box if this expenditure is payment of debt or obligation reported on previous statement		Purpose:	1	
Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure # 45	Address: Po Box 9001310	Expenditure Code EQ		
□ Fund Raiser Expenditure # 45 Name: At&t Address: Po Box 9001310 Expenditure Code EQ Louisville KY 40290 □ Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page 2560.87. Grand Total of all Schedules 1B	Louisville KY 40290			
Expenditure # 45 Name: At&t Address: Po Box 9001310 Expenditure Code EQ Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page Grand Total of all Schedules 1B				
Name: At&t Address: Po Box 9001310 Expenditure CodeEQ Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page2560.87_ Grand Total of all Schedules 1B	Fund Raiser	statement		
Address: Po Box 9001310 Louisville KY 40290	Expenditure # 45		02/11/2011	31.79
Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page 2560.87 Grand Total of all Schedules 1B	Name: At&t	Purpose:		
Louisville KY 40290 Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page 2560.87 Grand Total of all Schedules 1B	Address: Po Box 9001310	Funanditura Coda EO		
Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page 2560.87 Grand Total of all Schedules 1B	Louisville KY 40290	Expenditure Code		
Subtotal this page 2560.87 Grand Total of all Schedules 1B		· · · · · · · · · · · · · · · · · · ·		
Grand Total of all Schedules 1B	☐ Fund Raiser			
Grand Total of all Schedules 1B		Subtotal this	s page	2560.87
(Camplete on lost coop at Cohodula)		Grand Total of all Schedu (Complete on last page of Sch		



1. Committee I.D. Number	00MAYO-R	

2	Committee	Name	MAYOR

3. Name and address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 46		02/15/2011	132.00
Name: Usps	Purpose:		
Address: 4800 Collins Rd.			
Lansing MI 48910	Expenditure Code MA	t İ	
	Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund Raiser	statement		
Expenditure # 47		02/15/2011	318.49
Name: Staples	Purpose:		
Address: 2920 E Michigan	5 19 00 10 05		
Lansing MI 48912	Expenditure Code <u>OE</u>		
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure # 48		02/15/2011	4.31
Name: Staples	Purpose:		
Address: 2920 E Michigan	5		
Lansing MI 48912	Expenditure Code OE		
, and the second	Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund Raiser	statement		
Expenditure # 49		02/16/2011	579.05
Name: Fishbones	Purpose:		
Address: 4000 Monroe	5		
Detroit MI 48226	Expenditure Code FE		
	Check box if this expenditure is payment of debt or obligation reported on previous	i	
Fund Raiser	statement		
Expenditure # 50		02/22/2011	228.85
Name: Athenum	Purpose:		
Address: 1000 Brush	Expenditure Code RE		
Detroit MI 48226			
	Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund Raiser	statement		
	Subtotal this	page	1262.70
	Grand Total of all Schedul (Complete on last page of Sche		
	(Complete of last page of Cont	/	1

1. Committee I.D. Number _	00MAYO-R		

2. Committee Name MAYOR

3. Name and address of	f person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 51			00/40/0044	1100.00
Name: Ngp Softwa	are	Purpose:	03/10/2011	1100.00
Address: 0000 Stree	et		:	
Washingto	n DC	Expenditure Code <u>CO</u>		
☐ Fund Raiser		Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure # 52			03/21/2011	36.05
Name: Mediterran		Purpose:	03/21/2011	30.03
Address: 333 S Was	shington	Expenditure Code FE		
Lansing M	MI 48933			
☐ Fund Raiser		Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure # 53	<u> </u>		03/21/2011	11.62
Name: Godaddy.c	com	Purpose:	03/21/2011	11.02
Address: 0000 Stree	et	Expenditure Code CO		
Cedar Rap	oids MI	☐ Check box if this expenditure is payment		
☐ Fund Raiser		of debt or obligation reported on previous statement		
Expenditure # 54			<u> </u>	10.00
Name: Best Buy		Purpose:	07/25/2011	42.39
Address: 2020 W. G	irand River	Formality or Ondon OF		
East Lansi	ng MI 48823	Expenditure Code OE		
☐ Fund Raiser		Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure # 55			04/20/2011	1133.25
Name: Image Buil	ders	Purpose: soc mugs	01/20/2011	1133.23
Address: 1060 Trow	bridge	Expenditure Code GI		
East Lansi	ng MI 48823			
☐ Fund Raiser		Check box if this expenditure is payment of debt or obligation reported on previous statement		
Subtotal this page			2323.31	
Grand Total of all Schedules 1B (Complete on last page of Schedule)				



1. Committee I.D. Number	00MAYO-R
-	·

2	Committee Name	MAYOR
۷.	COMMITTEE NAME	MICH OIL

3. Name a	and address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 56			03/16/2011	100.00
Name:	People For Mike Bryanton	Purpose:	03/10/2011	100.00
Address:	Po Box 18061			
	Lansing MI 48901	Expenditure Code DI		
	, and the second	Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund F	Raiser	statement		
Expenditu	re # 57		01/31/2011	150.00
Name:	Emma Koppelman	Purpose:		
Address:	3019 Woodruff			
	Lansing MI 48912	Expenditure CodeCN	1	
	3	Check box if this expenditure is payment		
☐ Fund F	Raiser	of debt or obligation reported on previous statement		
Expenditu	re # 58		02/09/2011	50.00
Name:	Willie Vaughn	Purpose:	32/30/23	33,43
Address:	3600 S. Fox Point			
	Lansing MI 48911	Expenditure CodeCN		
		Check box if this expenditure is payment		
☐ Fund Raiser		of debt or obligation reported on previous statement		
Expenditu	re # 59		03/21/2011	550.00
Name:	Ingham County Democratic Party	Purpose:		_ "
Address:	1005 Abbott			
	East Lansing MI 48823	Expenditure Code PP		
		☐ Check box if this expenditure is payment		
☐ Fund F	Raiser	of debt or obligation reported on previous statement		
			:	
Subtotal this page				850.00

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

850.00

24392.51