#### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE** 

COVER PAGE			FOR OFFICIA	L USE	ONLY
Report must be legible, typed or printed in ink and sig	gned	3. This Statement covers From:			08/28/2017
by the treasurer (or designated record keeper) and candidate.		3. This statement covers 7 form.	Mo Day Year		Mo Day Year
1. Committee I.D. Number		4. Candidate Last Name	First	Name	M.I.
46696		Schor	Andy		J
		4a. Office Sought including Distr		erved (If	applicable)
2. Committee Name Andy		Other - City of Lar	sing <b>Mayo</b> r		
Schor for Lansing		4b. County of Residence			
		Ingham			
5. Committee's Mailing Address		6. Treasurer's Name & Resident			
P.O. Box 13073		Brian McGrain		<b></b>	en
Lansing, MI 48901		300 N. Fairview Lansing, MI 489	12 RE	CEIA	2017
		-		- 07	Tinc
Area Code and Phone (517) 927–5179			DE	CZI	LO.
If the address in this box is different from the commit mailing address on the Statement of Organization, m	itee nail	Area Code & Phone (517) 9	74-0127		NITY CLERK
may be sent to this address by the filing official.			PIGHA	MOOG	,-
7. Treasurer's Business Address		8. Designated Record Keeper's	Name and Mailing Ad	idress (If	the committee has a
P.O. Box 13073		Designated Record Keeper)			
Lasning, MI 48901					
Area Code and Phone		Area Code & Phone			
Alea Code and Phone	<del></del> .		<del> </del>		
9. TYPE OF STATEMENT		uired ONLY if candidate is			Candidate Committee
9a. ☐Pre-Election OR 9b. ☑Post-Election		on the ballot for the ent year:	outstandi	ng debt b	em I/We certify any by the committee to
Pre-Election or Post Election Statement relates to:	_	Line Ou amonte			is or her spouse is d and forgiven and no
		July Quarterly	longer co	llectible f	rom the committee. s no outstanding
✓ Primary	L	October Quarterly	assets, o	wes no la	ate fees or has any
Special			outstandi	ng debt.	
Convention	9c. [	Annual Statement			olution cannot be se considered a
General	00. L	Goverage Ye	- 1 *		porting Waiver.
School	9d. [	٦	Efforti	ive Date (	of Dissolution
Caucus	VU. L	Amendment to Campaign	Ellecti	VE Date (	JI DISSOIGON
		Statement (Complete item 9a, 9b, 9c or 9e to indicate			<del></del>
	İ	which Statement is being			on of residual funds n Schedule 1B and
Date of Election, Convention, or Caucus		amended)	the Summ	ary Page	
08/08/2017					
10. Verification: I/We certify that all reasonable dilig	ence was	s used in the preparation of this sta	tement and attached	schedule	s (if any) and to the
best of my\u00edur knowledge and belief the contents at	e true, a	ccurate and complete.			
Current Treasurer or Designated Record Keeper Brian McGrain		1	70 <u>-</u>	Date	12/27/2017
Type or Print Name		Signature	01		
Candidate Andy Schor			1	Date	12/27/2017
Tune or Driet Marco		- Signature			

Authority granted under P.A. 388 of 1976

### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

1. Committee I.D. Number 46696

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Schor for Lansing

CANDIDATE COMMITTEE		<u> </u>		
RECEIPTS		Column I This Period	Cumulat	Column II ive for this Election cycle
3. Contributions				
a. Itemized (Schedule 1A - Column 6)	(3a.) 	\$25,153.33		
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.)	NOT APPLICABLE		
c. Subtotal of "Contributions"	(3c.)	\$25,153.33	(18.)	\$257,489.85
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.)	\$25,153.33	(20.)	\$257,489.85
IN-KIND CONTRIBUTIONS & EXPENDITURES				
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.)	\$0.00	(21.)	\$4,154.42
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.)	\$21,058.67		
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.)	\$0.00		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.)	\$0.00		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.)	\$21,058.67	(23.)	\$120,349.90
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)				
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)	\$0.00		
b. Unitemized (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 a. Owed by the Committee (Schedule 1E)	(12a.)	\$0.00		
b. Owed to the Committee (Schedule 1E)	(12b.)	\$0.00		
BALANCE : 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	STATEMEN (13.)		33,045.29	
Amount received during reporting period     (Line 5, Total Contributions & Other Receipts - Column I)	(14.) +	\$	25,153.33	
15. SUBTOTAL Add lines 13 and 14	(15.) =	\$1	58,198.62	
<ol> <li>Amount expended during reporting period (Add lines 9 and 11)</li> </ol>	(16.) -	\$	21,058.67	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.)	\$1	37,139.95	* -

<sup>\*</sup>If your ending balance is negative, please recheck your math.

### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

#### ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name	Schor	for	Lansing	
		6	Amount	Cumulative for Election

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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

6. Amount

6. Amount

6. Amount

6. Amount

Cycle for Each

Contributor (Through date of receipt)

	· · · · · · · · · · · · · · · · · · ·	<u> </u>			· · ·
3.	PAC Receipt? TYES	4. DATE OF RECEIPT	08/15/2017		
Name & Address	<b>_</b>	_	,	_	
Ahlstrom, Zoe					
740 Stanley St	1264			620.00	\$20.00
Lansing, MI 48915	-1364			\$20.00	\$20.00
5. If over \$100.00 cumulat	ive, please provide:				
Occupation		Employer			
Business Address	<del></del> -				
Type of Contribution:	Direct Loan from a p	erson Fund Raiser			
3.	PAC Receipt? YES	4. DATE OF RECEIPT	08/15/2017		
Name & Address		· · · · · · · · · · · · · · · · · · ·	, ,	_	
Bigman, Amy					
2552 Koala Dr	40000 5010				
East Lansing, MI	48823-7210			\$100.00	\$300.00
5. If over \$100.00 cumulat	ive, please provide:				
Occupation Rabbi		Employer Shaarey Z	edek		
Business Address 1924	Coolidge Rd East Lan	sing, MI 48823-1330	, , , , , , , , , , , , , , , , , , ,		
	Direct Loan from a p				
3.	PAC Paceint?	4. DATE OF RECEIPT	08/24/2017	···	
Name & Address	PAC Receipt? YES	T. DATE OF RECEIPT	00/24/201/	<del>-</del>	
Butler, James					
1476 Stonegate Ln					
East Lansing, MI	48823-2172			\$100.00	\$200.00
5. If over \$100.00 cumulat	tive, please provide:				
Occupation Senior Man	nager	Employer State of	MI		
Business Address PO Box	x 30026 Lansing, MI	48909-7526		<del></del>	
Type of Contribution:	Direct Loan from a p	erson Fund Raiser			
3.	PAC Receipt? TYES	4. DATE OF RECEIPT	08/01/2017		
Name & Address	TAO ROCCIPI: 1E3	-		_	
Carey, Katie					
3101 E Stoll Rd					
Lansing, MI 48906	-1797		_	\$100.00	\$100.00
5. If over \$100.00 cumulat	tive, please provide:				
Occupation		Employer			
Business Address					
Type of Contribution:	Direct Loan from a p	erson Fund Raiser	-	-	
		Pa	age Subtotal	\$320.00	

Page Subtotal

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

Enter this total on line 3a of Summary Page.

\$25,153.33

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CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name	Schor	for	Lansing

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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

Cumulative for Election Cycle for Each
Contributor (Through date of receipt)

3. PAC Receipt? YES 4. DATE OF RECEIPT 08/01/2017		
Name & Address		
Chapman, Amy		
28342 Dartmouth St		****
Madison Heights, MI 48071-4506	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	<del></del>	
	****	
Name & Address  PAC Receipt? TYES 4. DATE OF RECEIPT 08/11/2017		
Christy, Alice		
25215 72nd Ave		
Bellerose, NY 11426-2727	\$10.00	\$30.00
-		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	<del></del>	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/15/2017		
Name & Address		
Christy, Alice		
25215 72nd Ave		
Bellerose, NY 11426-2727	\$5.00	\$35.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
PAC Receipt? YES 4. DATE OF RECEIPT 08/08/2017 Name & Address		
Clark, Charles		
11451 S Forest Hill Rd		
Eagle, MI 48822-9722	\$1,000.00	\$1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Clark Constrution Employer CEO		
Business Address 3535 Moores River Dr Lansing, MI 48911-1073		
Type of Contribution: Direct Loan from a person Fund Raiser	<del></del>	

Page Subtotal \$1,115.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$25,153.33

Enter this total on line 3a of Summary Page.

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#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

### ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name	Schor	for	Lansing	
		6.	Amount	Cumulative for Electi

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

tion Cumulative for Electic Cycle for Each Contributor (Through date of receipt)

3. PAC Receipt? YES 4. DATE OF RECEIPT 08/01/2017		
Name & Address	<del>_</del>	
Cochran, Dominic		
624 W Grand River Ave		*055.00
Williamston, MI 48895-1204	\$100.00	\$200.00
and the second s		
5. If over \$100.00 cumulative, please provide:		
Occupation Filmmaker Employer Ahptic Productions		
Business Address 901 Cleveland St Lansing, MI 48906-5431	_	
Type of Contribution: ✓ Direct		
3. PAC Receipt? TYES 4. DATE OF RECEIPT 08/09/2017		
Name & Address	<del>.</del> -	
Curin, Matthew		
1819 Clover Rd	450.00	6150.00
Northbrook, IL 60062-5806	\$50.00	\$150.00
E If over \$100.00 cumulative please provide:		
5. If over \$100.00 cumulative, please provide:  Occupation Project Manager Employer Astellas Pharma		
120,000	<del></del>	
Business Address 1 Astellas Way Northbrook, IL 60062-6111		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/19/2017		
Name & Address	<del></del>	
Dean, Harriett		
516 Edison Ave	\$50.00	\$50.00
Lansing, MI 48910-3323	\$50.00	
5. If over \$100.00 cumulative, please provide:		
5. If byer \$100.00 callibration, process \$100.00.		
Occupation Employer		
Occupation Employer		
Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
Occupation Employer  Business Address  Type of Contribution:  Direct  Loan from a person  Fund Raiser		
Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/24/2017  Name & Address		
Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/24/2017		
Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/24/2017  Name & Address Dean, Kellie	\$1,000.00	\$1,000.00
Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/24/2017  Name & Address  Dean, Kellie 4812 Aurelius Rd Lansing, MI 48910-5807	\$1,000.00	\$1,000.00
Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/24/2017  Name & Address  Dean, Kellie 4812 Aurelius Rd Lansing, MI 48910-5807  5. If over \$100.00 cumulative, please provide:	\$1,000.00	\$1,000.00
Occupation	\$1,000.00	\$1,000.00
Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/24/2017  Name & Address  Dean, Kellie 4812 Aurelius Rd Lansing, MI 48910-5807  5. If over \$100.00 cumulative, please provide:	\$1,000.00	\$1,000.00
Occupation	\$1,000.00	\$1,000.00
Occupation Employer  Business Address  Type of Contribution:	\$1,000.00	\$1,000.00

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

Enter this total on line 3a of Summary Page.

\$25,153.33

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1. Committee I.D. Number 46696

CAN	DIDATE CO			<ol><li>Committee Na</li></ol>	ame Schor	for Lansing	
Enter contributor's nam and middle initial. Cher Independent Committee	e and address. ck box to indicate	If contribution is fro e if contribution is fr	om a Politic	cal Committee or an	e, first name,	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<b>3</b> .							<del></del>
Name & Address	PAC Re	eceipt? TYES	4. DATE	OF RECEIPT (	08/08/2017		
Drake, Pamela 7770 Grand Rive Bancroft, MI 48					-	\$20.00	\$20.00
5. If over \$100.00 cum	ulative, please	provide:					
Occupation		• • • • • • • • • • • • • • • • • • • •	Employer				
Business Address							
Type of Contribution:	✓ Direct	Loan from a pe	erson	Fund Raiser		_	
3.	_				/ /		
Name & Address	PACRE	eceipt? YES	4. DATE	OF RECEIPT (	08/18/2017		
Dua, Sam 7045 Cedar St Suite 4 Lansing, MI 489	911				-	\$2,000.00	\$2,000.00
5. If over \$100.00 cum	ulative, please	provide:					
Occupation Real Es	state Invest	cor	Employer	S & S Asset	Management	t,	
Business Address 704	15 S Cedar :	St Ste 4 Lans	ing, MI	4 <del>89</del> £1-6960			
Type of Contribution:	✓ Direct	Loan from a pe	erson	Fund Raiser			
3.	PAC R	eceipt? TYES	4 DATE	OF RECEIPT (	08/15/2017		
Name & Address	77010	.cc.pt.	4. DATE		00/ 13/ 2017		
Ellis, Sharon 5070 Barton Rd Williamston, M	I 48895-964	8			_	\$35.00	\$35.00
5. If over \$100.00 cum	ulativa plaasa	nrovido:					
Occupation	ulative, please	provide.	Employer				
Business Address	· · · · · · · · · · · · · · · · · ·		Linployer	=			
Type of Contribution:	✓ Direct	Loan from a pe	Propp	Fund Raiser	· / · · · · · · · · · · · · · · · · ·		
3.							
Name & Address	PAC Re	eceipt?  YES	4. DATE	OF RECEIPT	08/16/2017		
Fowler, William							
1064 Buckingham Haslett, MI 488						6100.00	6200 00
					-	\$100.00	\$200.00
5. If over \$100.00 cum	ulative, please	provide:					
Occupation City As	sessor		Employer	City of Burt	con		
Business Address 430	3 S Center	Rd Burton, M	II 48519	-1449			
Type of Contribution:	✓ Direct	Loan from a pe	erson	Fund Raiser			
				Page 5	Subtotal	\$2 155 nn	

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$25,153.33 Enter this total on line 3a of Summary Page.

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SCHEDULE 1A
CANDIDATE COMMITTEE

Committee I.D. Number 46696
 Committee Name Schor for Lansing

CANDIDATE COMMITTEE		O letter for Floridae
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
	<del> </del>	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/16/2017 Name & Address		
Gehle, Sean D		
1828 Boston Blvd		
Lansing, MI 48910-1173	\$20.00	\$220.00
5. If over \$100.00 cumulative, please provide:		
Occupation Government Relations Employer Ascension Health		
Business Address 1828 Boston Blvd Lansing, MI 48910-1173	_	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017		
Name & Address	· <del>····</del>	
Graves, Joseph		
3114 S Deerfield Ave Lansing, MI 48911-1817	4100 00	4100.00
Editising, NI 40711-1017	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	<del> </del>	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/24/2017 Name & Address	<u> </u>	
Grewal, Manvir		
2290 Science Pkwy		_
Okemos, MI 48864-2522	\$500.00	\$500.00
5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Grewal Law		
Business Address 2290 Science Pkwy Okemos, MI 48864-2522		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	_	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/08/2017		
Name & Address		
Groen, Meghan		
1331 Dennison Rd		*
East Lansing, MI 48823-2194	\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide:		

Page Subtotal \$670.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$25,153.33

\_Fund Raiser

Enter this total on line 3a of Summary Page.

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✓ Direct

Loan from a person

Business Address
Type of Contribution:

#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS** ITEMIZED CONTRIBUTIONS 1. Committee I.D. Number 46696 SCHEDULE 1A

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CANDIDATE COMMITTEE

2. Committee Name Schor for Lansing

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/17/201	7	
Name & Address	<del>'</del>	
Hooper, Mark		
3653 Stagecoach Dr		
Okemos, MI 48864-4029	\$250.00	\$250.00
5. If over \$100.00 cumulative, please provide:		
Occupation CPA Employer Andrews Hooper Pavli	k PLC	
Business Address 4295 Okemos Rd Ste 200 Okemos, MI 48864-6201		
Type of Contribution: ✓ Direct	<del></del>	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/16/201	7	
Name & Address	<u>,                                     </u>	
Howe, Marie		
11211 Tamarack Trl		
Bath, MI 48808-9492	\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
3		
PAC Receipt? YES 4. DATE OF RECEIPT 08/18/201 Name & Address	7	
James, Semone 2941 Tulane Dr		
Lansing, MI 48912-5147	\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide:		
Occupation Executive Director- Real Employer State of MI - Labor	<u>&amp;</u>	
Business Addies to Box 30026 Lansing, MI 48909-7526 Economic		
Type of Contribution: ✓ Direct		
3. PAC Receipt? ☐YES 4. DATE OF RECEIPT 08/24/201	7	
Name & Address	<u>-</u>	
Japinga, Steven		
1608 W Hillsdale St		
Lansing, MI 48915-1114	\$100.00	\$200.00
5. If over \$100.00 cumulative, please provide:		
Occupation Government Affairs Employer Lansing Regional Char	mber of	
Business Address 500 E Michigan Ave Ste 200 Lansing, CMI 48912-1185		
Type of Contribution: ✓ Direct		
, — ——————————————————————————————————		
Page Subtotal	\$650.00	
Grand Total of all Schedules 1A (Complete on last page of Schedule)	\$25,153.33	
fir	nter this total on ne 3a of Summary age.	

CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name	Schor	for	Lansing

•	
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	 Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. PAC Receipt? TYES 4. DATE OF RECEIPT 08/16/2017		
Name & Address		
Jenkins, Anthony 1159 Meadowood Dr		
Waterford, MI 48327-2960	\$10.00	\$10.00
	Ş10.00	
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017 Name & Address	<del>_</del>	
Judge, Margaret		
1524 W Shiawassee St		
Lansing, MI 48915-1270	\$20.00	\$45.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:	_	
2		
3. PAC Receipt? TYES 4. DATE OF RECEIPT 08/07/2017 Name & Address	_	
PAC RECEIPT 08/07/2017	_	
Name & Address  Kamath, Subhash 10897 Pointe West Blvd	_	
Name & Address  Kamath, Subhash	\$100.00	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd	\$100.00	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476	\$100.00	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide:	\$100.00	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$100.00	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide:  Occupation  Business Address  Type of Contribution:  Direct  Loan from a person  Fund Raiser	\$100.00 -	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address  Type of Contribution:  Direct Loan from a person Fund Raiser	\$100.00 	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide: Occupation  Business Address  Type of Contribution:	\$100.00 	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide: Occupation  Business Address  Type of Contribution:		
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide: Occupation  Business Address  Type of Contribution:	\$100.00	\$100.00
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide: Occupation  Business Address  Type of Contribution:		
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide: Occupation  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT  Name & Address  Kimble, William 11880 Rachel Ln Dewitt, MI 48820-7781		
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution:  Direct  Loan from a person  Fund Raiser  3.  PAC Receipt? YES  4. DATE OF RECEIPT  08/24/2017  Name & Address  Kimble, William 11880 Rachel Ln Dewitt, MI 48820-7781  5. If over \$100.00 cumulative, please provide:		
Name & Address  Kamath, Subhash 10897 Pointe West Blvd Grand Ledge, MI 48837-9476  5. If over \$100.00 cumulative, please provide: Occupation  Business Address  Type of Contribution:		

Page Subtotal \$180.00

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

Enter this total on line 3a of Summary Page.

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### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS** ITEMIZED CONTRIBUTIONS 1. Committee I.D. Number 46696

CANDIDATE COMMITTEE  2. Committee Name Science	chor for Lansing
Enter contributor's name and address. If contribution is from an individual, enter last name, first nar and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	me, 6. Amount Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/09/2 Name & Address King, Marvin	2017
115 Northgate Dr # 1421 University, MS 38677-9705	\$50.00 \$150.00
5. If over \$100.00 cumulative, please provide:	
Occupation Professor Employer University of Miss	sissippi
Business Address 325 Deupree University, MS 38677	<del></del>
Type of Contribution:  Direct  Loan from a person  Fund Raiser	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/15/2 Name & Address Knott, Ryan	2017

University, MS 38677-9705			
5. If over \$100.00 cumulative, please provide:			
Occupation Professor	Employer University of Mississippi		
Business Address 325 Deupree University, MS	38677		
Type of Contribution:  Direct  Loan from a po	erson Fund Raiser		
3. PAC Receipt? TYES Name & Address	4. DATE OF RECEIPT 08/15/2017		
Knott, Ryan 601 N Francis Ave			
Lansing, MI 48912-4214		\$20.00	\$20.00
5. If over \$100.00 cumulative, please provide:			
Occupation	Employer		
Business Address		_	
Type of Contribution:	erson Fund Raiser		
3. PAC Receipt? TYES	4. DATE OF RECEIPT 07/27/2017		
Kuhnmuench, Nell 812 Applegate Ln			
East Lansing, MI 48823-2112		\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide:			
Occupation	Employer		
Business Address		_	
Type of Contribution:  Direct  Loan from a po	erson Fund Raiser		·
3. PAC Receipt? ☐YES	4. DATE OF RECEIPT 08/24/2017		
Name & Address			
Kushinski, Thomas 3817 Viceroy Dr			
Okemos, MI 48864-3844		\$100.00	\$100.00
5. If over \$100.00 cumulative, please provide:			
Occupation	Employer		
Business Address		_	
Type of Contribution: Direct Loan from a pe	erson Fund Raiser		

Page Subtotal \$220.00 Grand Total of all Schedules 1A (Complete on last page of Schedule) \$25,153.33

Enter this total on line 3a of Summary Page.

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#### SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name Schor for Lansing

Cumulative for Election 6. Amount Enter contributor's name and address. If contribution is from an individual, enter last name, first name, Cycle for Each and middle initial. Check box to indicate if contribution is from a Political Committee or an Contributor (Through Independent Committee (PAC) Report all contributions regardless of amount. date of receipt) 3. 4. DATE OF RECEIPT PAC Receipt? YES 08/15/2017 Name & Address Lambert, David 1023 S Holmes St Lansing, MI 48912-1923 \$8.33 \$8.33 5. If over \$100.00 cumulative, please provide: Employer **Business Address** Type of Contribution: ✓ Direct Loan from a person Fund Raiser 3. 4. DATE OF RECEIPT PAC Receipt? YES 08/18/2017 Name & Address Lustig, Fred 2505 Showtime Dr Apt 501 \$20.00 \$20.00 Lansing, MI 48912-5643 5. If over \$100.00 cumulative, please provide: Occupation Employer **Business Address** Type of Contribution: Loan from a person ✓ Direct Fund Raiser 3 PAC Receipt? YES 4. DATE OF RECEIPT 08/15/2017 Name & Address Martin, Roger 861 W Dansville Rd Mason, MI 48854-9660 \$200.00 \$200.00 5. If over \$100.00 cumulative, please provide: Occupation Partner Employer Martin Waymire Business Address 426 W Ottawa St Lansing, MI 48933-1573 Loan from a person Fund Raiser 3 4. DATE OF RECEIPT PAC Receipt? YES 08/16/2017 Name & Address McAlvey, Jeff 3432 Glasgow Dr Lansing, MI 48911-1354

> Page Subtotal \$728.33 Grand Total of all Schedules 1A (Complete \$25,153.33 on last page of Schedule)

Employer McAlvey, Merchant &

Fund Raiser

Enter this total on line 3a of Summary Page.

\$500.00

\$500.00

of 21 Page 11

Occupation Owner

Type of Contribution:

5. If over \$100.00 cumulative, please provide:

✓ Direct

Business Address 120 W Ottawa St Lansing, MI 48933-1

Loan from a person

CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

				-
2. Committee Name	Schor f	for	Lansing	

Cumulative for Election 6. Amount Enter contributor's name and address. If contribution is from an individual, enter last name, first name, Cycle for Each Contributor (Through date of receipt) and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

					date of receipty
3. Name & Address	PAC Receipt? YES	4. DATE OF RECEIP	T 08/18/2	017	
McAlvey, Jeff 3432 Glasgow Dr					
Lansing, MI 48911-13	354			\$500.00	\$1,000.00
5. If over \$100.00 cumulative,	please provide:				
Occupation Owner			y, Merchant	&	
Business Address 120 W Ot	tawa St Lansing, 1	MI 48933-1 <b>6至至</b> OC1	ates		
Type of Contribution:	rect Loan from a p	erson Fund Rai	ser		
3. Name & Address	PAC Receipt? YES	4. DATE OF RECEIP	T 08/17/2	017	
McPharlin, Patrick 8920 W Lake Pointe I	Dev.				
Laingsburg, MI 48848				\$100.00	\$100.00
5. If over \$100.00 cumulative,	please provide:		•		
Occupation	. ,	Employer			
Business Address					
Type of Contribution:	rect Loan from a p	erson Fund Rai	ser		
3.	PAC Receipt? YES	4. DATE OF RECEIP	T 08/07/2	017	
Name & Address					
Merchant, Rusty					
120 W Ottawa St Lansing, MI 48933-16	544			\$150.00	\$150.00
3.					
5. If over \$100.00 cumulative,	please provide:				
Occupation Governmental			y, Merchant	&	•
Business Address 120 W Ot		MI 48933-1644COC1	ates		
Type of Contribution:	ect Loan from a p	ersonFund Rai	ser		
3. Name & Address	PAC Receipt? ✓YES	4. DATE OF RECEIP	08/16/2	017	
Michigan Laborers' E 1118 Centennial Way	Political League				
Ste 100 Lansing, MI 48917-72	208			\$5,000.00	\$5,000.00
5. If over \$100.00 cumulative,				•	
Occupation	•	Employer			
Business Address				-	
Type of Contribution:	rect Loan from a p	erson Fund Rai	ser		
<del>_</del>			Page Subtotal	ec 750 00	
			raye Subtotal	\$5,750.00	

Grand Total of all Schedules 1A (Complete \$25,153.33 on last page of Schedule)

Enter this total on line 3a of Summary Page.

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SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name Schor for Lansing

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/15/2017 Name & Address		
Mickens, Charles 2210 Lyman Dr Lansing, MI 48912-3416	\$50.00	\$550.00
5. if over \$100.00 cumulative, please provide:		
Occupation CIO Employer WMU Cooley Law School		
Business Address 300 S Capitol Ave Ste 600 Lansing, MI 48933-2002		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/07/2017 Name & Address	<del></del>	
Minter, Whitney 4609 4th Rd N		
Arlington, VA 22203-2347	\$200.00	\$200.00
5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer US Courts		

Business Address 1650 King St Ste 500 Alexandria, VA 22314-2747 Fund Raiser 3. PAC Receipt? YES 4. DATE OF RECEIPT 08/24/2017 Name & Address Mittleman, David 1700 Old Mill Rd East Lansing, MI 48823-2158 \$500.00 \$1,500.00 5. If over \$100.00 cumulative, please provide: Occupation Trial Lawyer Employer Grewal Law Business Address 2290 Science Pkwy Okemos, MI 48864-2522 Loan from a person Fund Raiser 3. PAC Receipt? YES 4. DATE OF RECEIPT Name & Address Munn, Janet 400 N Magnolia Ave Lansing, MI 48912-3123 \$100.00 \$100.00 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Loan from a person Fund Raiser

Page Subtotal \$850.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$25,153.33

Enter this total on line 3a of Summary Page.

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CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name	Schor	for	Lansing	
2. 00	Demoi	101	<b>2</b> 4110 1119	

Enter contributor's name and address. If of and middle initial. Check box to indicate if Independent Committee (PAC) Report all	e, first name,	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
3. PAG Page					
Name & Address	eipt? YES 4. DATE	OF RECEIPT	08/15/2017		
Muth, T					
3001 Westchester Rd					
Lansing, MI 48911-1045				\$5.00	\$5.00
5. If over \$100.00 cumulative, please pro	ovide:				
Occupation	Employer				
Business Address	<del></del>	<del></del>			
Type of Contribution:  Direct	Loan from a person	Fund Raiser		_	
3. PAC Rece	= eipt? □YES 4. DATE	OF RECEIPT (	08/21/2017		
Name & Address	##. □ 1E3		,0,21,201,		
Nader, Cara					
519 \$ Jenison Ave					
Lansing, MI 48915-1133			_	\$35.00	\$210.00
5. If over \$100.00 cumulative, please pro	ovide:				
Occupation barista/owner	Employer	Strange Matt	er Coffee		
Business Address 2001 E Michigan	Ave Lansing, MI 4				
Type of Contribution:  Direct	Loan from a person	Fund Raiser		_	
3. PAC Pere	eipt? TYES 4. DATE	OF RECEIPT (	08/15/2017		
Name & Address	aptr TES 4. DATE	OF RECEIPT (	78/15/2017		
Norkin, Ody					
333 Albert Ave					
suite 205 c/o michigan flye East Lansing, MI 48823-4393				\$10.00	\$10.00
5. If over \$100.00 cumulative, please pro					
Occupation	Employer				
Business Address		-			
Type of Contribution:  Direct	Loan from a person	Fund Raiser		_	
2	<u> </u>				
Name & Address	eipt? TYES 4. DATE	OF RECEIPT (	08/15/2017		
O'Rourke, Tim					
327 Moores River Dr					
Lansing, MI 48910-1433				\$50.00	\$50.00

Employer

Loan from a person

Page Subtotal \$100.00

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

Fund Raiser

Enter this total on line 3a of Summary Page.

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Occupation

Business Address

Type of Contribution:

5. If over \$100.00 cumulative, please provide:

✓ Direct

1. Committee I.D. Number 46696

	CHEDULE 1A DATE COMMITTEE	2. Committe	e Name Schor	for Lansing	
and middle initial. Check bo	d address. If contribution is from the contribution is from the contribution is from the contributions region.	rom a Political Committee or		6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3.	PAC Receipt? TYES	4. DATE OF RECEIPT	08/16/2017		
Name & Address	<b>_</b>	-			
Purvis, David 1735 Blair St	1100				
Lansing, MI 48910	-1158		_	\$200.00	\$200.00

5. If over \$100.00 cumulative, please provide: Employer Mareck Family & Geriatric Occupation LMSW Business Address 3493 Woods Edge Ste 103 Okemos, MI 48864-6030 Fund Raiser 3. PAC Receipt? YES 4. DATE OF RECEIPT Name & Address Schertzing, Eric 236 Kedzie St East Lansing, MI 48823-4534 \$50.00 \$150.00 5. If over \$100.00 cumulative, please provide: Occupation Treasurer Employer Ingham County Business Address 315 S Jefferson St Mason, MI 48854-1651 Type of Contribution: Direct Loan from a person Fund Raiser 3. PAC Receipt? YES 4. DATE OF RECEIPT 08/15/2017 Name & Address Shanker, Larry 6111 W Longview Dr East Lansing, MI 48823-9739 \$100.00 \$100.00 5. If over \$100.00 cumulative, please provide: Employer Occupation Business Address Type of Contribution: Fund Raiser ✓ Direct Loan from a person 3 PAC Receipt? YES 4. DATE OF RECEIPT 08/09/2017 Name & Address Sharkey, Joel 1139 Hillgate Way Lansing, MI 48912-5012 \$50.00 \$125.42 5. If over \$100.00 cumulative, please provide: Occupation Retired Employer Retired Business Address 1139 Hillgate Way Lansing, MI 48912-5012 Fund Raiser

> Page Subtotal \$400.00 Grand Total of all Schedules 1A (Complete on last page of Schedule) \$25,153.33

> > Enter this total on line 3a of Summary Page.

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CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name Schor for Lansing

Cumulative for Election Cycle for Each Contributor (Through date of receipt) 6. Amount Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

3. PAC Receipt? TYES 4. DATE OF RECEIPT Name & Address	08/24/20	017	
Shaski, John 2911 Stoneleigh Dr Lansing, MI 48910-3705		\$100.00	\$400.42
5. If over \$100.00 cumulative, please provide:			
Occupation Government Affairs Employer Sparrow			
Business Address 1200 E Michigan Ave Lansing, MI 48912-1800			
Type of Contribution: ✓ Direct			
3. PAC Receipt? TYES 4. DATE OF RECEIPT Name & Address	08/17/20	)17	
Stanaway, Loretta			
546 Armstrong Rd Lansing, MI 48911-3811		éas no	\$50.00
		\$25.00	\$50.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address		<del></del>	
Type of Contribution:			
3. PAC Receipt? YES 4. DATE OF RECEIPT	08/06/20	017	
Name & Address —			
Stella, Olga 1251 REdford			
Detroit, MI 48207		\$50.00	\$50.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person Fund Raiser			
3. PAC Receipt? TYES 4. DATE OF RECEIPT Name & Address	08/15/20	)17	
Stice, Mark 1633 Pebblestone Dr			
Okemos, MI 48864-2929		\$20.00	\$20.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Type of Contribution:			
Par	ge Subtotal	\$195.00	
· uş	g_ 0	Q195.00	

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$25,153.33

Enter this total on line 3a of Summary Page.

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SCHEDULE 1A CANDIDATE COMMITTEE Committee I.D. Number 46696
 Committee Name Schor for Lansing

	D/ \   L OC	//////////////////////////////////////					
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
^					_		
3.	PAC Re	eceipt? YES	4. DATE	OF RECEIPT	08/24/2017		
Name & Address				_			
Stockwell, Kennet							
15134 Via Carmell Dewitt, MI 48820-						\$50.00	\$50.00
DC#100, 111 10020	0032				_	\$30.00	
5. If over \$100.00 cumula	tive, please	provide:					
Occupation			Employe	r			
Business Address					*****		
Type of Contribution:	/ Direct	Loan from a p	erson	Fund Raiser		_	
3.	PAC Re	eceipt? YES	4 DATE	OF RECEIPT	08/17/2017		
Name & Address	171071	300.pr 1 _ 5	5/112	-		<del></del>	
Swan, Dennis							
3741 Chippendale							
Okemos, MI 48864	-3861				_	\$250.00	\$250.00
5. If over \$100.00 cumula	itive, please	provide:					
Occupation President	& CEO		Employe	Sparrow			
Business Address 1215	E Michig	an Ave Lansi	na, MI 4				
	Direct	Loan from a p		Fund Raiser			
3.					1 1		
Name & Address	PAC R	eceipt? TYES	4. DATE	OF RECEIPT	08/23/2017		
Terry, Terry							
1217 Turner St							
Lansing, MI 48906	5-4341					\$100.00	\$100.00
					_	,	
5. If over \$100.00 cumula	itive, please	provide:					
Occupation			Employer	r			
Business Address							
Type of Contribution:	✓ Direct	Loan from a p	erson	Fund Raiser		<del>_</del>	
3.	PAC Re	eceipt? TYES	4. DATE	OF RECEIPT	08/18/2017		
Namo 9 Address					,,		

Page Subtotal \$900.00

Grand Total of all Schedules 1A (Complete on last page of Schedule) \$25,153.33

Employer Investors Equity Group

Fund Raiser

Enter this total on line 3a of Summary Page.

\$500.00

\$500.00

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Name & Address
Thornburg, Roger
611 S Capitol Ave

Lansing, MI 48933-2337

Occupation CCIM, CPM, CEA

5. If over \$100.00 cumulative, please provide:

Type of Contribution: Direct Loan from a person

Business Address 611 S Capitol Ave Ste A Lansing, MI 48933-2337

Ste A

1. Committee I.D. Number 46696

CANDIDATE COMMITTEE	2. Committee Name	Schor	for Lansing	
Enter contributor's name and address. If contribution is from an indining middle initial. Check box to indicate if contribution is from a Polendependent Committee (PAC) Report all contributions regardless of	litical Committee or an	t name,	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. PAC Receipt? ✓ YES 4. DATE OF RECEIPT 08/10/2017		
Name & Address		
UAW Michigan V-PAC		
8000 E Jefferson Ave Detroit, MI 48214-3963	*** *** ***	40 000 00
Decioit, MI 48214-3763	\$2,000.00	\$2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/16/2017 Name & Address		
UAW Michigan V-PAC		
8000 E Jefferson Ave		
Detroit, MI 48214-3963	\$7,500.00	\$9,500.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
	_	
Type of Contribution:     Disease     Lease from a service		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address		
3. PAC Receipt? TYES 4. DATE OF RECEIPT 08/18/2017 Name & Address	_	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017	_	
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017 Name & Address Wald, Joseph	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address  Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address  Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide:	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address  Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address  Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/14/2017  Name & Address Wilson, Ron	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/14/2017  Name & Address Wilson, Ron 731 Merrill St		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/14/2017  Name & Address Wilson, Ron	\$100.00	\$100.00
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/14/2017  Name & Address Wilson, Ron 731 Merrill St		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/14/2017  Name & Address Wilson, Ron 731 Merrill St Lansing, MI 48912-4323		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/14/2017  Name & Address Wilson, Ron 731 Merrill St Lansing, MI 48912-4323  5. If over \$100.00 cumulative, please provide:		
3. PAC Receipt? YES 4. DATE OF RECEIPT 08/18/2017  Name & Address  Wald, Joseph 1846 Cimarron Dr Okemos, MI 48864-3810  5. If over \$100.00 cumulative, please provide: Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. PAC Receipt? YES 4. DATE OF RECEIPT 08/14/2017  Name & Address  Wilson, Ron 731 Merrill St Lansing, MI 48912-4323  5. If over \$100.00 cumulative, please provide: Occupation Analyst Employer NAMI Michigan		

Page Subtotal Grand Total of all Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

\$9,620.00

\$25,153.33

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CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

	_		
2. Committee Name	Schor	for	Lansing

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and 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

Cycle for Each
Contributor (Through date of receipt)

3. Name & Address	PAC Receipt? TYES	4. DATE OF RECEIPT _	08/24/2017	_	
Woods, John Jr 1213 Gentry Dr South Lyon, MI 48178	-8723			\$100.00	\$100.00
5. If over \$100.00 cumulative,	please provide:				
Occupation		Employer			
Business Address					
Type of Contribution: V Dire	ect Loan from a p	erson Fund Raiser			

Page Subtotal

\$100.00

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

\$25,153.33

Enter this total on line 3a of Summary Page.

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#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS** ITEMIZED EXPENDITURES SCHEDULE 1B

CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name	Schor	for	Lansing		
				_,	

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Name Change Media Group  Address 1000 S Washington Ave	Purpose: General Consultant, Mail and Digital	08/16/2017 Date	\$16,505.53
Ste 101 Lansing, MI 48910-1682  Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	t of	
Name Coffey, Chelsea Address	Purpose: Reimbursement	08/07/2017 Date	\$638.14
2515 Lake Lansing Rd Apt 6 Lansing, MI 48912-3619	Check box if this expenditure is paymen debt or obligation reported on previous statement	t of	
Name Staples  Address 3003 E Michigan Ave Lansing, MI 48912-4616	Purpose: Subitem: 351.14 Office Supplies Check box if this expenditure is paymen	08/07/2017 Date	\$0.00
☐Fund Raiser	debt or obligation reported on previous statement	, 46v.	· · · · · · · · · · · · · · · · · · ·
Name USPS Address	Purpose: Subitem: 350.83 Postage	08/05/2017 Date	\$0.00
315 W Allegan St Lansing, MI 48933-1500	Check box if this expenditure is paymen debt or obligation reported on previous statement	t of	
Name Greer, Elena	Purpose: Field Consulting	08/10/2017 Date	\$490.00
Address 753 Audubon Rd East Lansing, MI 48823-3001	Check box if this expenditure is paymer debt or obligation reported on previous statement	nt of	
Fund Raiser		Subtotal this page	\$17,633.67
	`	Justota: iino page	417,000.07

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

\$21,058.67

Enter this total on line 8a of Summary Page

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# MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS ITEMIZED EXPENDITURES SCHEDULE 1B

CANDIDATE COMMITTEE

1. Committee I.D. Number 46696

2. Committee Name	Schor	for	Lansing		

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Name Jenkins, Anthony Address	Purpose: Consulting Services	08/10/2017 Date	\$500.00
1159 Meadowood Dr Waterford, MI 48327-2960	Check box if this expenditure is payment debt or obligation reported on previous statement	of	
Fund Raiser			. 12
Name Morley, Anthony	Purpose: Field Consulting	08/10/2017 Date	\$275.00
Address 4470 Dell Rd Lansing, MI 48911-6109	Check box if this expenditure is payment debt or obligation reported on previous statement	t of	
Fund Raiser			
Name Ricketts, Heather	Purpose: Consulting	08/16/2017 Date	\$2,000.00
Address 2600 Hunters Pt Kalamazoo, MI 49048-6105	Check box if this expenditure is paymen debt or obligation reported on previous statement	t of	
Fund Raiser			
Name Schraft, Matt		08/10/2017 Date	- \$650.00
Address 4306 Oakwood Dr	Purpose: Field Consulting	Date	
Okemos, MI 48864-2949	Check box if this expenditure is paymen debt or obligation reported on previous statement	t of	
Fund Raiser			

Subtotal this page

\$3,425.00

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

\$21,058.67

Enter this total on line 8a of Summary Page

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