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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

### NOV 07 2016

#### **CANDIDATE COMMITTEE** COVER PAGE

FOR INGHAM SOUNTY CLERK'S OFFICE

COVER FAGE					
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and co	signed by andidate.	3. This Statement covers From	7-21-16 to 10-20-16 First Name M.I.		
1. Committee I.D. Number		Candidate Last Name			
46544		4a. Office Sought Including District # or Community Served (If applicable)			
2. Committee Name		, ,	, , , ,		
Friends of Patricia		NA Current Lansing Coly Council			
ş		N/A Current lansing City Caincel 4b. County of Residence Incarm			
5 Committee's Mailing Address		6. Treasurer's Name & Residential Address			
2622 VICTOR AUC		Patricia Spitzley			
Lansing, MI 18911		Patricia Spitzley 2622 Victor Ave			
Area Code and Phone 517 163 1113  If the address in this box is different from the committee		Lansing, mI 118111			
If the address in this box is different from the comm mailing address on the Statement of Organization, I	ittee	•			
be sent to this address by the filing official.	man may	Area Code & Phone 51	Area Code & Phone <u>517 - 763 - 7773</u>		
7. Treasurer's Business Address			s Name and Mailing Address (If the committee has a		
500 wardward a	actuard are		Designated Record keeper)		
Suite 2650					
DETROIT, MI 482	26				
Area Code and Phone 517-599-55	ไอ	Area Code and Phone			
		Arca obde and more	9e. Dissolution of Candidate Committee		
9. TYPE OF STATEMENT		NLY If candidate			
9a. Pre-Election OR 9b. Post-Election	is not on the ballotfor the current year:		By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here		
Pre-Election or Post-Election Statement relates to:	July Quarterly		by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets,		
Primary		,	owes no lates fees or has any oustanding debt.		
General	2 October Quarterly amendment		Further, if the dissolution cannot be granted, that this be		
Convention	Will	evicure	considered a request for the Reporting Walver.		
Special	9c. Annui	al Statement ()			
School		Coverage Year	Effective date of dissolution		
	- Amer		1		
Caucus		ndment to Campaign Statement			
Caucus	(Com indica	plete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
	Com	plete Item 9a, 9b, 9c or 9e to te which Statement is being			
Date of Election, Convention or Caucus	(Com indica	plete Item 9a, 9b, 9c or 9e to te which Statement is being			
	(Com indica	plete Item 9a, 9b, 9c or 9e to te which Statement is being			
	(Com indica	plete Item 9a, 9b, 9c or 9e to te which Statement is being			
Date of Election, Convention or Caucus  10. Verification: NWe certify that all reasonable dilige	(Com indica amen	plete Item 9a. 9b, 9c or 9e to the which Statement is being ded.)			
Date of Election, Convention or Caucus  10. Verification: NWe certify that all reasonable dilige my/our knowledge and belief the contents are true, a	(Com indica amen	plete Item 9a. 9b, 9c or 9e to the which Statement is being ded.)	Schedule 1B and the Summary Page.		
Date of Election, Convention or Caucus  10. Verification: NWe certify that all reasonable dilige	(Com indica amen	plete Item 9a, 9b, 9c or 9e to the which Statement is being ded.)  In the preparation of this statement in the preparation of this statement in the preparation of the statement in the preparation in the preparation of the statement in the preparation of the statement in the preparation of the statement in the preparation in th	Schedule 1B and the Summary Page.		
Date of Election, Convention or Caucus  10. Verification: NWe certify that all reasonable dilige my/our knowledge and belief the contents are true, a	(Com indica amen	plete Item 9a. 9b, 9c or 9e to the which Statement is being ded.)	Schedule 1B and the Summary Page.  ent and attached schedules (if any) and to the best of		
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Authority granted under P.A. 388 of 1976

F2016-1411 11/7/16 7:51 AM Page 1 of 1 CAMP \$0.00 Barb Byrum, Ingham County Clerk





1. Committee I.D. Number 46544

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name FRIENCE OF POLIRICIA Spitzic

RECEIPTS	Calumn I	D-1
3. Contributions	This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Cotumn 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4) \$	(19.) \$
6. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(6.) \$ <u> </u>	(20.) \$ 50.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>100.00</u>	(21)\$ 100.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$C	
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.) \$ 3999 27
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements     a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)  11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$	
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$ 2155,00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 9 250	.00.
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.)+\$	
(Line 5. Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$	×00
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<del></del> -
17. ENDING BALANCE (Subtract line 18 from line 15)	(17) \$ 250×00 ·	



### ITEMIZED IN-KIND CONTRIBUTIONS

### SCHEDULE 1-IK

1. Committee I. D. Number	
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CANDIDATE COMMITTEE 2. Committee Name							
Name and Address from whom received if contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent	Type of In-Kind Contribution (Check applicable box)     Date of Receipt	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through				
Committee (Both are commonly called PACs).  Report all in-kind contributions.	Name & Address of Vendor from whom goods or services were purchased		date in Item 5)				
Contribution # 1 PAC Receipt? Yes Name & Address:	Endorsement or Guarantee of Bank Loan     Goods Donated    Services Donated						
Stat Spilored Podelica	Goods or Services Purchased by Candidate or Others	( <u>00,00</u> \$	44118.67				
Hover \$100.00 cumulative, please provide:	Goods or Services Purchased by Candidate or Others- LOAN						
Occupation: Employer Name & Business Address:	5. Date Of Receipt: 9-15-16						
RAGRIQUET	6. Vendor Name & Address:						
500 Woodward Suite 2650	_ 3.0	Here for Memo Iter					
Detact, WI	SUISOUTH SEFFERSON C mason, MI 48854	heck 51	72				
Contribution # 2 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan						
volue & Address	Goods Donated or Loaned Services Donated						
	Goods or Services Purchased by Candidate or Others	<u> </u>					
	Goods or Services Purchased by Candidate or Others- LOAN						
If over \$100.00 cumulative, please provide: Occupation:	Description		}				
Employer Name & Address:	5. Date Of Receipt:						
	6. Vendor Name & Address:		ļ				
	Click	Here for Memo Item	ization				
Fund Raiser Contribution							
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan						
	Goods Donated or Loaned Services Donated \$	\$					
	Goods or Services Purchased by Candidate or Others						
if over \$100.00 cumulative, please provide:	Goods or Services Purchased by Candidate or Others- LOAN						
Occupation:	Description						
Employer Name & Address:	Date Of Receipt:     Vendor Name & Address:						
•		Here for Memo Itemi	zation				
<del></del> 1							
Fund Raiser Contribution							
	Page Subtotal	100.001					
	Grand Total of all Schedules 1-IK	~~ 50					
	(Complete on last page of Schedule)	00-00					
		Enter this total on line 6 of Summan	•				
Page of		Page					

## November 5, 2016

Mr. Justin Alexander Elections Clerk/Coordinator Ingham County Clerk P.O. Box 179 Mason, MI 48854

**RECEIVED** 

NOV 07 2016

RE: Campaign Committee ID 46544

INGHAM COUNTY CLERK'S OFFICE

Mr. Alexander,

Accompanying this letter is my amended 2016 October Quarterly Statement for "Friends of Patricia Spitzley" Campaign Committee. I have corrected the errors outlined in your November 1, 2016 letter and also supplemented the report to accurately reflect the InKind contribution of \$100.00 to pay the Late Sincerely,

Patricia A. Spitzley



MAIN OFFICE P.O. Box 179 341 South Jefferson Mason, MI 48854 Phone: (517) 676-7201 Fax: (517) 676-7254

# Barb Byrum INGHAM COUNTY CLERK

BRANCH OFFICE Veterans Memorial Courthouse Lansing, MI 48933 inghamclerk@ingham.org www.ingham.org

Friends of Patricia Spitzley Committee # 46544 2622 Victor Ave. Lansing, MI 48911 November 1, 2016

### CAMPAIGN FINANCE REPORTING NOTICE OF ERROR OR OMISSION

Please be advised that the following errors or omissions were found in a review of your 2016 October Quarterly Statement filed by your committee October 24, 2016.

- ✓ Cover Page: #3 Statement Coverage Period is incorrect. It should be 7/21/16-10/20/2016.
- √ #4 Office Sought is required.
- √#10 Report was signed prior to the close of books.

Summary Page: Column II, #20 & 23 cumulative totals are incorrect. Cumulative totals must include all contributions and expenditures for the current election cycle which for this committee is 11/4/15-11/5/19. #20 should be \$50.00. #23 should be \$3,999.27.

#6 & 21 are incorrect if the 8/15/16 \$100.00 late filing fee was paid with a personal check then it must be reported as an in-kind contribution on Schedule –IK. (Check #5172) If it was paid with campaign funds, it then must be reported on Schedule 1B.

You may file the statement in person at either our Mason or Lansing office, or by mail, fax, or email to:

Ingham County Clerk Barb Byrum P.O. Box 179 Mason, MI 48854

Fax: 517-676-7254 or Email: <a href="mailto:lnghamClerk@ingham.org">lnghamClerk@ingham.org</a>

If you have any questions, please contact me at (517) 676-7255.

Sincerely

Justin Alexander

Elections/Clerk Coordinator