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

Authority granted under P.A. 388 of 1976

## RECEI

F2011-0322
9/22/11 12:48 PM Page 1 of 1
CAMP \$0.00
Mike Bryanton, Ingham County Clerk

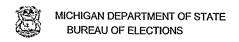
SEP 22 2011

## **CANDIDATE COMMITTEE**

### INGHAM COUNTY CLERK

FOR OFFICIAL USE ONLY

COVER PAGE			
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 7-18-11 to 8-22-11		
1. Committee I.D. Number	4. Candidate Last Name M.I.		
46246	Washington Judy		
2. Committee Name	4a. Office Sought Including District # or Community Served (If applicable)		
Judy Washington for City Caneil	Lansing City Council, Ward I 4b. County of Residence Ingham		
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address		
521 Nantucket Orive	Frank Washington		
Lansing, MI 48906	521 Wantucket Drive		
J. Company	Lansing, M1 48906		
Area Code and Phone If the address in this box is different from the committee	<i>J</i>		
mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone 517-393-2799		
7. Treasurer's Business Address	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)		
	Jody Washington		
	52+ Nanticket Onice		
	Lansing, M1 48906		
Area Code and Phone	Area Code and Phone 517-803-9337		
9. TYPE OF STATEMENT			
9a. Pre-Election OR 9b. Post	-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	ge. Dissolution of Candidate Committee		
	Effective Date of Dissolution		
Convention	1001		
Special	By checking this item, I\We certify that the committee has no assets or		
Date of Election, Convention or Caucus	outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for		
	the Reporting Waiver.  Note: The disposition of residual funds must be reported on Schedule  1B and the Summary Page.		
A committee that does not have a Reporting Waiver must file all re	equired Campaign Statements. The Campaign Statements must include all applicable inditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold.		
If any of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accompany before the filing deadline of a required campaign statement, the	high class and obstanting debts count against the \$1,000 Reporting Warver the should lead since the information was shown on the committee's Statement of Organization, an his Campaign Statement. If a request for a Reporting Waiver is not received on or hat campaign statement cannot be waived.		
10. Verification: I/We certify that all reasonable diligence was used my/our knowledge and belief the contents are true, accurate and cr	in the preparation of this statement and attached schedules (if any) and to the best of omplete.		
Current Treasurer or			
Type òr ₱fint Name	Signature Date 7-21-201		
Candidate Dody Washington	Date		
Type or Print Name	Signature		



b. Owed to the Committee (Schedule 1E)

(Subtract line 16 from line 15)

1. Committee I.D. Number

46246

**SUMMARY PAGE** Washington **CANDIDATE COMMITTEE** RECEIPTS Column I Column II This Period Cumulative this election cycle 3. Contributions a. Itemized (Schedule 1A - Column 6) b. Unitemized (less than \$20.01 each - no Schedule) NOT APPLICABLE (18.) \$ 70\0.00 22 10.**ng** c. Subtotal of "Contributions" 4. Other Receipts (Schedule 1A -1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) **IN-KIND CONTRIBUTIONS & EXPENDITURES** 6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) (22.)\$ **EXPENDITURES** 8. Expenditures (8a.) \$ 2875.08 a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule 1B-G) (8b.) \$ \_\_\_\_\_ c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) (10a.) \$ //www b. Unitemized (less than \$50.01 each - no Schedule) (10b.)\$ 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) (24.)\$ **DEBTS AND OBLIGATIONS** 12. Debts and Obligations a. Owed by the Committee (Schedule 1E)

	BALANCE STATEMENT
3. Ending Balance of last report filed	(13.) \$ \\95.93
(Enter zero if no previous reports have been filed.)  4. Amount received during reporting period	(14.)+\$ 2210.00
(Line 5, Total Contributions & Other Receipts)  15. SUBTOTAL Add lines 13 and 14	(15.)= \$ 3405.93
6. Amount expended during reporting period (Add lines 9 and 11)	(16.)- \$ <u>2875.08</u>
7 ENDING PALANCE	(17) a

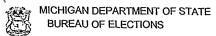
(12b.)\$

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

1. Committee I.D. Number **CANDIDATE COMMITTEE** 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 7. Cumulative for 6. Amount middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution #1 PAC Receipt? 4. Date of Receipt Name & Address: cia Perez W. Shiawassee St. 25.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer\_ **Business Address** Type of Contribution: Direct Fund Raiser Loan from a person 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address Barb Burum Stone Road Onondaga MI 49264 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation \_ **Business Address** Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? 4. Date of Receipt Name & Address: Samara Washington 2312 Bernard St Lansing M1 48911 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Benefits Employer\_ Business Address 1475 East Lansing Type of Contribution: Loan from a person **Fund Raiser** 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt Name & Address 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation\_ Employer **Business Address** Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal

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

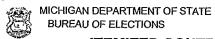
Enter this total on line 3a of Summary Page.



# ITEMIZED CONTRIBUTIONS SCHEDULE 1A

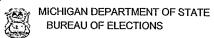
1. Committee I.D. Number 46246

CANDIDATE COMMITTEE 2. Committee Name 2.	y Washington for City Concil
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 7-22-11 Name & Address: Richard Wandorf 1817 Jerame St.	
Lansing MI 48912	<u>\$ 100.00</u> <u>\$ 200.00</u>
5. If over \$100:00 cumulative, please provide:  Occupation + Eacher Employer Lansing School District	Click Here for Memo Itemization
Business Address 519 W. Kalamazoo St. Lansing M1. 48933	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7-26-(	
Name & Address Adam HUSSain	
3814 Calvin Drive	<u> 100.∞</u>
Lansing M1 48911	`
5. If over \$100.00 cumulative, please provide:  Occupation teacher Employer Wayerly Community Schools	Click Here for Memo Itemization
Business Address 515 Snow Road Lansing M1 48917	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7-29-11  Name & Address:  DASON Harder  LOOZ W. Grand River Ave.  East Lansing M1 48823	\$ 10.00 \$ 10.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
OccupationEmployer	
Business Address  Type of Contribution: Direct Loan from a person Loan Roles	
Pullu Raisei	
Name & Address	
Operating Engineers 384 PAC 500 Hulet Brive Bloomfield Tup. MI 48302 5. If over \$100.00 cumulative, please provide:	\$500.00 \$500.00
OccupationEmployer	Click Here for Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal	710.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary
· ago or	Page.



## **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

CANDIDATE COMMITTEE 2. Committee Name	y Washington	for City Council
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8 - 8 - 1 Name & Address:		
1912 Holly Way Lansing MV 48970	\$ 25.00	\$ 25.00
If over \$100.00 cumulative, please provide:  Occupation Employer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8-18-11	}	
1BEW-COPE 900 Saienth St. NW	300 00	s 300.00
Washington, D.C. Zoool	\$	§
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer		•
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8-18-11  Sandra Norgaard  3455 Plans Rad  Mason, M1 48854  5. If over \$100.00 cumulative, please provide:	\$\left\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$ 100,00 Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	**************************************	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8-18-11 Name & Address Frank Washington 521 Nantocket Lansing M1 48906	\$ 500.00	<u>\$ 500,00</u>
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation retired Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)  Page Subtotal	Enter this total on line 3a of Summary Page.	-



# ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number 46246

SCHEDULE 1A 1. Committee 1.D. Numb	
CANDIDATE COMMITTEE 2. Committee Name	ody Washington for City Curveil
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8-(8-1) Name & Address:	
Jody Washington 521-Wanticket Drive Lansing MI 48906	<u>\$ 100.00</u> <u>\$3580.52</u>
5. If over \$100.00 cumulative, please provide:  Occupation 6 rievance Specialist Employer Mich. Dept. of Confections	Click Here for Memo Itemization
Business Address 206 E. Michigan Ave., Lansing M1 48933	- )
Type of Contribution: Direct Loan from a person Fund Raiser	
Name & Address  PAC Receipt? YES  4. Date of Receipt 2-1-1	_
Plumbers-Rpefillers 333 PAC 5405 S. MLK Blud.	s 250.00 s 250.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:	· · · · · · · · · · · · · · · · · · ·
	\$\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address	
_	
	\$\$
5. If over \$100.00 cumulative, please provide:	\$SClick Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:  Occupation Employer	*
	*
Occupation Employer	*

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

25/0.00

Enter this total on line 3a of Summary Page.

Page \_\_\_\_of \_\_\_\_



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 46246

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name U.S. Postmaster Address 315 W. Allegan St. Suite A	Purpose: postage	7-26-11 Date  Click Here for Memo	\$ <u>465.8</u> (
Lansing M1 48933	Check box if this expenditure is paym debt or obligation reported on previous statement	ent of	
Expenditure #2 Name U.S. Postmaster Address Allegan St. Suite A	Purpose: Stamps	7-26-11 Date	\$ <u>44.00</u>
313 W1 110033		Click Here for Memo I	temization Type
Lansing M1 Y8933	Check box if this expenditure is paym debt or obligation reported on previous statement	nent of	
Expenditure #3 Name Keystone Printing		8.5-11	\$ 13 <u>2</u> 3.60
Address 15400 S. U.S. Highway 27 Lansing M1 48906	Purpose: Printing  Check box if this expenditure is payment to be a second to be	Date Click Here for Memo I	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4  Name Go Daddy.com  Address 14455 N. Hayden Rd. Svite 226	Purpose: Web hosting	8-(8- ) Date	\$ <u>56.05</u>
Scottsdale, AZ 85260	Check box if this expenditure is paym debt or obligation reported on previous statement	Click Here for Memo I	temization Type
Expenditure #5	dege		
Name City Pulse.  Address 1905 E. Michigan Ave.  Lansing MI 48912	Purpose: <u>a</u> d	8-19-11 Date	\$ <u>333.∞</u>
Lansina MI 48917	[]	Click Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is paym debt or obligation reported on previous statement	nent of	
	b.,	Subtotal this page	2222.46
		al of all Schedules 1B ast page of Schedule)	

Enter this total on line 8a of Summary Page

Page \_\_\_\_\_ of \_\_\_\_\_



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 46246

CANDIDATE COMMITTEE 2.0	Committee Name Jaly Washington for	Cidy Co	neil
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1  Name Keystone Printing  Address  15400 S. U.S. Highway 27  Lansing MI 48906  Fund Raiser	Purpose: Click  Check box if this expenditure is payment of debt or obligation reported on previous statement		\$ <u>652.62</u> Itemization Type
Expenditure #2  Name  Address	Purpose:Click	Date Here for Memo	\$tternization Type
Fund Raiser Expenditure #3	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name Address Fund Raiser	Purpose:Click I  Check box if this expenditure is payment of debt or obligation reported on previous statement		\$temization Type
Expenditure #4 Name Address Fund Raiser	Purpose:		\$temization Type
Expenditure #5 Name Address Fund Raiser	Purpose:		\$tternization Type
	Grand Total of all		652.62 2875.08
	(Complete on last page	e of Schedule)	6012.00

Enter this total on line 8a of Summary Page



## **DEBTS AND OBLIGATIONS SCHEDULE 1E**

1. Committee I.D. Number 462:16

2. Committee Name 1 Day Washington for City Commit

CANDIDATE COMMITTEE 2.1	Committee Name Jon of Colo	3 MINO LAIL JON	J same	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the cor (Che	nmittee OR b. Debts eck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven by the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	Cumulative     payment to     date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
guarantors, if any.	or dept			
Debt #1 Corp? Yes Owed to or by:	4. Type: 04 N			
Jody Washington	5. Date Debt Was Incurred:	<u> </u>		
521 Nantucket	3-15-11	<u> </u>	. 0	.500.00
Lansing MI 48906	6. Original Amount of Debt	\$	\$ <u> </u>	
)	s <u>500.00</u>	\$		FORGIVEN
If bank loan, name of endorser or guarantor:	,	Amo	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: 000	\$		
Jody Washington	5. Date Debt Was Incurred:	<u> </u>		
521 Nanticket	3-28-11 6. Original Amount of Debt:	\$	. 0	\$ 1000,000
Lansing MI 48906	\$ 1000.00	\$	\$	FORGIVEN
J		\$		LIFORGIVEN
If bank loan, name of endorser or guarantor:		Am	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: \ \ \( \stamps \)			
Jody Washington	5. Date Debt Was Incurred:	\$		
52 Nanteket	3-28-11	\$	. (	34.10
Lansing M1 48906	6. Original Amount of Debt:	\$	1 \$_ <u>U</u>	\$ <u>51.76</u>
	\$ 0 (1)0	<b></b>		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_	
		David Outstald	(Out-to d'o - dobt)	1534.10
		-	(Outstanding debt)	10.51110
(1	Complete on last page of Schedule s	Showing amounts owed by o	of all Schedules 1E or to the committee)	Enter this total

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

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



## **DEBTS AND OBLIGATIONS**

**SCHEDULE 1E** 

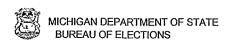
1. Committee I.D. Number 46246

SCHEDULE 1E	1 1 11	1,100		. \
CANDIDATE COMMITTEE 2. C	ommittee Name <u>Jody Wa</u>	shihaton for (	ity Com	<u> </u>
This Schedule itemizes:				
aDebts and obligations owed by or forgiven the community (Chec	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven by the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt#1 Corp? Yes Owed to or by:	4. Type: <b>\OAV</b>	\$		
521 Nantucket	5. Date Debt Was Incurred:	\$	İ	_
Lansina MI 48906	6. Original Amount of Debt:	\$	s <u>O</u>	\$ 300.00
	\$ 300.00	\$ \$		FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$		
Jody Washington	5. Date Debt Was Incurred:	\$		ĺ
52 Nantucket	6. Original Amount of Debt:	\$		\$ 1000,00
Lansing M1 48906	\$ 1000.00	\$	· \$	FORGIVEN
Shark large garden and and an angel an angel and an angel an angel and an angel an angel and an angel an angel and an angel an angel and an angel an angel an angel and an angel and an angel and an angel and an ang		\$		
If bank loan, name of endorser or guarantor:  Debt #3 Corp? Yes		An	nount Endorsed: \$_	T T T T T T T T T T T T T T T T T T T
Owed to or by:	4. Type: loon (postage)	\$		
Jody Washington	5. <u>Date Debt Was Incurred</u> .	\$		
527 Nantucket	6. Original Amount of Debt:	\$	\$ 0	\$ 180.6
Lansing MI 48906	\$ 180.61	\$\$ \$		FORGIVEN
If hank lace name of andersor or suggestion				4
If bank loan, name of endorser or guarantor:	75,16-20,	Ar	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	1480.6
(Co	omplete on last page of Schedule s	Grand Total showing amounts owed by d	of all Schedules 1E or to the committee)	

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

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

Page  $\frac{2}{2}$  of  $\frac{2}{3}$ 



## **DEBTS AND OBLIGATIONS SCHEDULE 1E**

1. Committee I.D. Number 46246

1. Committee I.D. Number 46246
2. Committee Name Jody Washington for City Council

CANDIDATE COMMITTEE 2. C	ommittee Name Vay Was	windfor for cis	3 Comer	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed <u>to</u> o rpose checked.)	r forgiven <u>by</u> the cor	mmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes  Jody Washington  521 Wantucket  Lansing M1 48906	4. Type: Lan (postage)  5. Date Debt Was Incurred:  7-16-11  6. Original Amount of Debt:  \$ 4. Type: Lan (postage)  \$ 4. Type: Lan (postage)	\$ \$ \$ \$	\$_O	\$ <u>465.8]</u>
If bank loan, name of endorser or guarantor:	7	Am	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type:	<u> </u>		
Jody Washington 521 Nontucket	8-18-11 6. Original Amount of Debt:	\$ \$	\ \$_O	\$100.00
Lansing M1 48906	\$ 100.00	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
Debt #3 Corp? Yes  Owed to or by:	4. Type:	\$		
	6. Original Amount of Debt:	\$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:	,	\$A	mount Endorsed: \$_	
	•	Page Subtotal	(Outstanding debt)	565.81

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

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

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