## **RECEIVED**

**Clear Form** 

JUL 27 2021

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

INGHAM COUNTY CLERK'S OFFICE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the tressurer (or designated record keeper) and ca	signed by Indidate.	3. This Statement covers From:	1/1/2021 to	7/20/2021
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.
54899		Dunbar	Kathie	
		4a. Office Sought Including Disl	nct # or Community Served	(# applicable)
2. Committee Name		Mayor, City of Lar	nsina	
People for Kathie Dunbar			_	
		4b County of Residence ING		
5. Committee's Mailing Address 1414 E. Miller Rd. Lansing	. MI	6. Treesurer's Name & Resider Kathie Dunbar		Nvd Lansing
			DOT DOSION L	Ava. Lansing,
43914		MI 48910		
Area Code and Phone				
If the address in this box is different from the commi- mailing address on the Statement of Organization, r	ittee nail may			
be sent to this address by the Ming official	<u> </u>	Area Code & Phone		
7. Tressurer's Business Address		Designated Record Keeper Designated Record Keeper)	s Name and Address (If the	committee has a
Same as residence.				
Area Code and Phone		Area Code and Phone		
9 TYPE OF STATEMENT	Sacrated O	M V if condictate	Be. Dissolution of Candi	date Committee
9a. X Pre-Election OR 9b. Post-Election	,	NLY if candidate ballot for the	By checking this item (	AWe certify any outstanding debt
Pre-Election or Post-Election Statement relates to.	current year		by discharged and forgiven	ndidate or his or her spouse is her , and no longer collectible from
	July Quar	terly	the committee. The commowes no lates fees or has a	itiee has no oustanding assets. ny oustanding debt.
Primary	<u></u>	N and and		
General	October 0	Juaneny	Further, if the dissolution of considered a request for the	innot be granted, that this be Reporting Waiver
Convention			Constant a reducer for an	
Special	9c. Annu	al Statement ()		
School		Coverage Year	Effective date of	dissolution
Caucis		ndment to Campaign Statement		
	(Con	opiete Item 9a, 9b, 9c or 9e to ste which Statement is being		sidual funds must be reported on
	amen	ded.)	Schedule 1B and the Sumi	mery raige.
Date of Election, Convention or Caucus				
August 3, 2021				
				·
10. Verification: NWe certify that all reasonable dilig mylour knowledge and belief the contents are true.	ence was used	in the preparation of this statem	ent and attached schedules	(If any) and to the best of
	QUANTUE BENI	1/ A A	u. ha	710010004
Current Tressurer or Kathie Dunbar Designated Record Resper		, Kaint	MWWC	7/23/2021
Type or Print Name		Signature		
Kathie Dunbar		Kathrob	unbar unbar	7/23/2021
Type or Print Name		Signatu' F2021-0	338	****

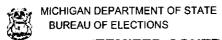
Authority granted under P.A. 388 of 1976



1. Committee I.D. Number 45899

## SUMMARY PAGE

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	This t choo	Carrialative tris election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>28,810.01</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$28,810.01	(18.) \$ 33,536.17
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$28,810.01	(20.) \$ - 33,536.17
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$ 600.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	10.000.00	
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.) \$	21.025.04
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$21,035.04
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ 0	(24.)\$ 0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed <b>by</b> the Committee (Schedule 1E)	18,170.88 (12a.) \$	
b. Owed <b>to</b> the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
40 Station Pales and Clark support Filed	75.86	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	
14. Amount received during reporting period	(14.) + \$ 28,810.01	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_ 28,885.87	
16. Amount expended during reporting period	(16.)- \$ 16,308.88	
(Add lines 9 and 11)		
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 12,576.99	*

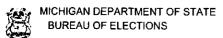


#### CANDIDATE COMMITTEE

45899

1. Committee I.D. Number

Enter contributor's name at middle initial. Check box to Committee (PAC) Report a	indicate if contri	bution is from	a Political Comr nount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1  Name & Address:	PAC Receipt?	YES	4. Date of Rec	eipt 5/20/2021	_	
Daniel Wimmer						
3808 W. Holmes F	łd.				50.00	50.00
Lansing, MI 48911					\$	
5. If over \$100.00 cumulat					Click Here	for Memo Itemization
Occupation	· · · · · · · · · · · · · · · · · · ·	Employer				
Business Address  Type of Contribution:	Direct	Loan from	a person	Fund Raiser		
Contribution #2  Name & Address	PAC Receipt?	YES	4. Date of Rec	eipt 5/21/2021		
Ashley Austin 87 Buell St. #1					\$ 25.00	25.00
Burlington VT 054	01				Ψ	_ <u> </u>
5. If over \$100.00 cumulat	tive, please prov	ide:			Click Here f	or Memo Itemization
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from	a person	Fund Raiser		
	PAC Receipt?	YES	4. Date of Red	ceipt 5/21/2021	-	
Name & Address: Richard Baker					100.00	
4329 Heartwood F	Rd.				100.00 \$	100.00
Okemos, MI 4886						-
5. If over \$100.00 cumula	tive, please prov				Click Here for	or Memo Itemization
Occupation Retired	<u> </u>	Employer_F	Retired			
Business Address						
Type of Contribution:	Direct	Loan from		Fund Raiser		
Contribution # 4     Name & Address	PAC Receipt?	YES	4. Date of Re	eceipt 5/22/2021	-	
Andrew Kennedy 705 Hunter Blvd. Lansing, MI 48910					100.00	100.00
5. If over \$100.00 cumula	tive, please pro	vide:			Click Here f	or Memo Itemization
Occupation Technicia	an	_ Employe	Michigar Michigar	State University		
Business Address						
Type of Contribution:	Direct	Loan from	a person	Fund Raiser		· · ·
				Page Subtot	275.00	_
				Grand Total of All Schedules 1 mplete on last page of Schedul	e) L	
1 44			(00)	p.oto v taot pago vi conodal	Enter this total on line 3a of Summa	
Page of					Page.	

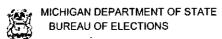


#### **CANDIDATE COMMITTEE**

45899 1. Committee I.D. Number

2. Committee 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.	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5/23/2021  Name & Address: Tina Olsen 1416 Hess Ave. Lansing, MI 48910		25.00 \$
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here	for Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/23/2021  Name & Address		
Julie Wright		
12816 Towering Oaks Dr. Shelby Township, MI 48315	100.00 \$	\$ 100.00
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Not Employed Employer Not Employed		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/23/2021 Name & Address:  Greg Ward 2810 N Cambridge Rd. Lansing, MI 48911	250.00 \$	250.00 - \$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Human Resources Employer Consumers Energy		
Business Address Jackson, MI		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/24/2021 Name & Address Sheryl Landgraf 110 N. Market Dewitt, MI 48820	50.00 \$	50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here fo	r Memo Itemization
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
Page Subi Grand Total of All Schedules (Complete on last page of Sched	1A	



#### CANDIDATE COMMITTEE

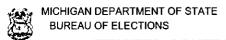
1, Committee I.D. Number

2. Committee Name

45899

People for Kathie Dunbar

7. Cumulative for Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Contributor (Through Committee (PAC) Report all contributions regardless of amount. date of receipt) 4. Date of Receipt 5/24/2021 3. Contribution # 1 PAC Receipt? YES Name & Address: Jeffrey Barker 627 Moores River Dr. 100.00 100.00 Lansing, MI 48910 5. If over \$100.00 cumulative, please provide: Employer Barkford Legal PLC Click Here for Memo Itemization Occupation Attorney 1146 S Washington Sq. Lansing, MI Type of Contribution: Fund Raiser Loan from a person YES 4. Date of Receipt 5/27/2021 PAC Receipt? 3. Contribution #2 Name & Address Joslin Monahan 100.00 100.00 1016 Santa Cruz Dr. SE Grand Rapids, MI 49506 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer\_ Attorney Occupation Business Address 333 Bridge St NW #900 Grand Rapids Fund Raiser Type of Contribution: ✓ Direct Loan from a person 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 6/7/2021 Name & Address: Michael Ruddock 50.00 50.00 6 Lincoln St. #508 Denver, CO 80203 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer\_ Occupation\_ Business Address Type of Contribution: X Direct Loan from a person Fund Raiser 4. Date of Receipt 6/22/2021 3. Contribution # 4 PAC Receipt? Name & Address Kristi Bartholomew 50.00 616 E. Holmes Rd. 50.00 Lansing, MI 48910 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation, Employer **Business Address** Fund Raiser Type of Contribution: | X | Direct Loan from a person Page Subtotal 300.00 Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page.

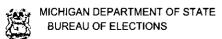


#### **CANDIDATE COMMITTEE**

45899

1. Committee I.D. Number

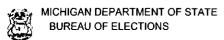
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/12/2021  Name & Address:  Jerren Osmar  744 Calls St.  Lansing, MI 48933	100.00 \$	100.00
5. If over \$100.00 cumulative, please provide:  Occupation Self-Employed Employer Self-Employed	Click Here	for Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/13/2021  Name & Address  Kristi Bartholomew  616 E. Holmes Rd.	50.00	100.00
Lansing, MI 48910	Ψ	
5. If over \$100.00 cumulative, please provide:  Occupation Not Employed Employer Not Employed	Click Here	for Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/17/2021  Name & Address:  Max Donovan  3031 S. Washinton Ave. Apt. M-11  Lansing, MI 48910	 	_ \$30.00
5. If over \$100.00 cumulative, please provide:	Click Here f	or 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 7/19/2021 Name & Address		
Amber Shinn 302 É César E Chavez Apt D Lansing, MI 48906	25.00 \$	25.00
5. If over \$100.00 cumulative, please provide:	Click Here f	for Memo Itemization
Occupation Employer	_	
Business Address		
Type of Contribution:		
Page Subto	otal 205.00	
Grand Total of All Schedules 1 (Complete on last page of Schedules 1  Page of	ľ	



#### CANDIDATE COMMITTEE

1. Committee I.D. Number

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 7/19/2021  Name & Address:  Joslin Monahan		-
1016 Santa Cruz SE	100.00	200.00
Grand Rapids, MI 49506	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Attorney Employer Miller Johnson, PLC	Olick Fiere	or memo nemization
Business Address 45 Ottawa St. SW Grand Rapids		
Type of Contribution: X Direct Loan from a person ✔ Fund Raiser	·	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/19/2021		
Name & Address  Maria Peak		
5701 S. Stine Rd.	50.00	50.00
Olivet, MI 49076	Ψ	- Ψ
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address:		
Jerren Osmar	100.00	200.00
744 Call St.	\$	. \$
Lansing, MI 48933	Click Here fo	r Memo Itemization
5. If over \$100.00 cumulative, please provide:		THOMAS HOME
Occupation Self-Employed Employer Self-Employed		
Business Address The of Contribution VI Direct		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address		
Annie Signs	000.00	000.00
1151 Teakwood Circle	200.00 \$	200.00
Haslett, MI 48840 5. If over \$100.00 cumulative, please provide:		7
Occupation Self-Employed Employer Self-Employed	Click Here fo	r Memo Itemization
Business Address		
Type of Contribution: X Direct Loan from a person ✓ Fund Raiser		
Page Subtotal	450.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	
5 14 Page of	line 3a of Summary Page.	<b>/</b>



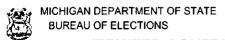
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45899

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address: Dorothy Engelman  4477 Cricket Ridge Dr. Apt 203  Holt, MI 48842	25.00 \$	25.00 \$
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer	S.I.G.K 11010	ioi momo nomizanon
Business Address  Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/19/2021		
Name & Address Micah Siegal 6234 Pine Hollow Drive East Lansing, MI 48823	250.00 \$	250.00 \$
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Attorney Employer Micah M Siegal & Co LPA		
Business Address PO Box 274 East Lansing, MI 48826		
Type of Contribution: X Direct Loan from a person X Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/20/2021  Name & Address:  John Addis	500.00	
2918 Crestwood Dr.	\$	_ \$ <u>500.00</u>
Lansing, MI 48910	Click Here	for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Flere	of Wello Remization
Occupation Business Owner Employer Addis Enterprises		
Business Address 908 E Mt Hope Hwy Lansing, MI 48910  Type of Contribution:		
	_	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/21/2021  Name & Address		
Katrina Robinson 801 Britten Ave. Lansing, MI 48910	50.00 \$	50.00
5. If over \$100.00 cumulative, please provide:	OPAL III	<b></b>
Occupation Employer	Click Here	for Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota	825.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule		
Page of	Page.	

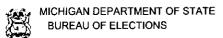


#### CANDIDATE COMMITTEE

1. Committee I.D. Number

45899

Enter contributor's name and address. If contribution is from an individual, enter middle initial. Check box to indicate if contribution is from a Political Committee Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt Same & Address:	5/27/2021		
Timothy Teed			
1615 Blair St.		500.00	500.00
Lansing, MI 48910		\$	\$
5. If over \$100.00 cumulative, please provide:		Click Hara to	r Memo Itemization
Occupation Social Worker Employer CMHA-CEI		Click nere to	i wemo nemization
Business Address 812 East Jolly Rd. Lansing, MI			
Type of Contribution: Direct Loan from a person Fu	und Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6	/7/2021		
Mark Ledebuhr			
2519 Wilson Ave.		100.00 s	s 100.00
Lansing, MI 48910		*	<b>*</b>
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Consultant Employer Application Insign	ht, LLC		
Business Address 2519 Wilson Ave Lansing 48910			
Type of Contribution: X Direct Loan from a person F	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 6	6/14/2021		
Joan Nelson		100.00	100.00
217 Rosamond St.		100.00 \$	100.00
Lansing, MI 48911			*
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Director Employer Allen Neighborh	nood Center		
Business Address 1611 E Kalamazoo St. Lansing, MI 48912			
	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	7/2/2021		
Name & Address			
Jenni Mitchell		10.00	10.00
648 Ridgewood 3		\$	10.00
Lansing, MI 48911			
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 F	und Raiser		·
	Page Subtotal	710.00	_
• •	Total of All Schedules 1A		
(Complete	on last page of Schedule) I	Enter this total on	_
7 of 14		line 3a of Summary Page.	



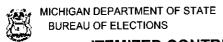
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/9/2021  Name & Address:		
Rebecca McClellan		
8356 Otero Place	100.00	100.00
Denver, CO 80203	<u>\$</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Board Member Employer Colorado State Board of		
Business Address Denver, CO 80203		
Type of Contribution:   Direct Loan from a person Fund Raiser	·	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address		
Chris Traviglia	50.00	
528 Brenner Pass	50.00 \$	\$ 50.00
Lansing, MI 48911		
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/19/2021		
Name & Address: ———————————————————————————————————	2000 00	2000.00
6102 Columbia St.	2000.00 \$	2000.00
Lansing, MI 48911	<del></del>	<u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Owner Employer ACD.net		
Business Address 1800 Grand River Ave. Suite 1 Lansing 48906		
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/19/2021		
Name & Address		
Julie Lehman	50.00	50.00
135 Leslie St. Lansing, Mi 48911	\$	- \$ <u> </u>
5. If over \$100.00 cumulative, please provide:	Click Hara fo	or Memo Itemization
OccupationEmployer	Ollow Flore R	, morris normanion
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	2200.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	<b></b>
Page of	line 3a of Summar Page.	у



#### CANDIDATE COMMITTEE

1. Committee I.D. Number

45899

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address:  Mark Ledebuhr		
2519 Wilson Ave. Lansing, MI 48906	200.00 \$	\$300.00
5. If over \$100.00 cumulative, please provide: Occupation Consultant Employer Application Insight, LLC Business Address 2519 Wilson Ave.	Click Here fo	or Memo Itemization
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address		
Egypt Krohn 523 S. Magnolia Ave. Lansing, MI 48912	500.00 \$	\$
5. If over \$100.00 cumulative, please provide:  Occupation Program Director Employer Allen Neighborhood Center	Click Here fo	or Memo Itemization
Business Address 1611 E Kalamazoo St. Lansing 48912  Type of Contribution: X Direct Loan from a person X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/19/2021		
Name & Address: Holly Fox 375 Tanbark Dr. Dimendale MI 48821	75.00 \$	75.00
Dimondale, MI 48821  5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation R.N.  Business Address 812 E Jolly Rd. Lansing, MI 48910  Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/24/2021  Name & Address	-	
Mary Brown 2912 Victor Ave. Lansing, MI 48911	50.00 \$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address Loan from a person Fund Raiser Page Subtot	tal 825.00	
Grand Total of All Schedules 1 (Complete on last page of Schedul	A	
9 14 Page of	line 3a of Summa Page.	



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number

45899

2. Committee Name

enter contributor's name and address. It c middle initial. Check box to indicate if cont Committee (PAC) Report <u>all</u> contributions i	ribution is from a Political Com regardless of amount.	mittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address: Isaac Francisco 4062 Seaway Dr. Lansing, MI 48910	YES 4. Date of Rec	eipt <u>5/22/2021</u>	50.00 \$	50.00 \$
5. If over \$100.00 cumulative, please pro	vide:			
Occupation	_ Employer		Click Here	for Memo Itemization
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? [ Name & Address	YES 4. Date of Reco	7/19/2021		
Stacy Lewis 2130 Moorwood Dr. Holt, MI 48842			\$	100.00
5. If over \$100.00 cumulative, please prov			Click Here	for Memo Itemization
3 3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Employer State Farm A	agency		
Business Address 4020 S Cedar St	. Lansing, MI 48910			
Type of Contribution: X Direct	Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt?  Name & Address:	YES 4. Date of Rec	eipt 7/9/2021	<u>.</u>	
Spencer Austin 11482 S US Hwy 27 Dewitt, MI 48820			\$ Click Here for	150.00 - \$or Memo Itemization
5. If over \$100.00 cumulative, please prov Occupation	ride: Employer			or morne normadion
Business Address				
Type of Contribution: X Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Rec	ceipt 7/19/2021		"
Dominic Perrone 1414 E Miller Rd. Lansing, MI 48911			2100.00 \$	\$
5. If over \$100.00 cumulative, please prov	ride:		Click Here fo	or Memo Itemization
Occupation Regulation Agent	Employer MDARD,	State of Michigan	Ollok Field R	or Wellio Reffilzation
Business Address  Constitution Half, 6th Fisor 525 W. Allegan Street Lansing, MI 48909  PO Box 39017				
Type of Contribution: X Direct	Loan from a person	Fund Raiser		
		Page Subtotal Grand Total of All Schedules 1A uplete on last page of Schedule)	2400.00 Enter this total on	_
10 14			line 3a of Summar Page.	у



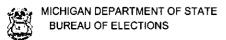
## **CANDIDATE COMMITTEE**

1. Committee I.D. Number

45899

2. Committee Name

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 7/19/2021  Name & Address: Barbara M Tate  3820 Starlight Ln.  Lansing, MI 48911	200.00	200.00
5. If over \$100.00 cumulative, please provide:  Occupation Retired Employer Retired	\$Click Here fo	or Memo Itemization
Business Address  Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address  Patricia M Pisano		
10250 Burgundy Blvd. Dimondale, MI 48821	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person ✔ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address:		
Bonnie Sumbler	50.00	50.00
912 Britten Ave.	\$	\$
Lansing, MI 48910	Click Horo for	· Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Here to	Wemo Remization
Occupation Employer		
Business Address		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 7/19/2021		
James Rawson 6114 W. Stoll Rd.	20.00	20.00
Lansing, MI 48906	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		•
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
Page Subtotal	320.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
11 14 Page of	line 3a of Summary Page.	



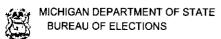
#### CANDIDATE COMMITTEE

1. Committee I.D. Number

45899

2. Committee Name

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 7/19/2021  Name & Address:	_	
Robert Novak		
1115 Walsh St.	20.00	20.00
Lansing, MI 48912	\$	<u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer	Click Here	ioi Memo ilemization
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address	_	
Melissa Parsons	00.00	
513 W Barnes Ave.	20.00 \$	20.00
Lansing, MI 48910	·	_ ·
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address:		
Joe Salazar	20.00	
631 W Barnes Ave.	\$ 20.00	\$ 20.00
Lansing, MI 48910	•	<b>Y</b>
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person V Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/19/2021  Name & Address	<del>-</del>	
Dot Johnson	00.00	
3224 Alden Dr.	20.00 s	20.00
Lansing, MI 48910	<u> </u>	
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Employer	_	
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
Page Subto	otal 80.00	
Grand Total of All Schedules	1A	
(Complete on last page of Schedu	lle) Enter this total on	
Pageof	line 3a of Summa Page.	ıry

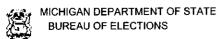


#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number

per \_\_\_\_

Enter contributor's name and address. If o middle initial. Check box to indicate if con Committee (PAC) Report all contributions	tribution is from a Political Comr regardless of amount.	nittee or an Independent	6. Amount	Cumulative for     Election Cycle for Each     Contributor (Through     date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address: Lisa Pridnia 8777 Larned Rd., Port Austin, MI 48467	YES 4. Date of Rece	eipt <u>5/4/2021</u>	100.00 \$	100.00 \$
5. If over \$100.00 cumulative, please pro Occupation Retired	ovide: Employer_Retired		Click Here f	or Memo Itemization
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address Rense Kinaja 5740 Commerce Rd	YES 4. Date of Rece	5/4/2021	2100.00	2100.00
West Bloomfield, MI 48324  5. If over \$100.00 cumulative, please pro Occupation Nurse	vide: _ Employer_St Joseph Ho	ospital	Click Here fo	or Memo Itemization
Business Address Pontiac, MI				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: Eric Kinaia 6740 Commerce Rd. West Bloomfield, MI 48324	YES 4. Date of Rec	eipt <u>5/4/2021</u>	2100.00 \$	2100.00 \$
5. If over \$100.00 cumulative, please pro	vide:		Click Here fo	r Memo Itemization
Occupation Owner  Business Address Type of Contribution: Direct	Employer Papa's Pizz	a & BBQ  Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address Kathie Dunbar	YES 4. Date of Rec	<sup>ceipt</sup> 5/15/2021		
1334 Boston Blvd.			<b>\$ 15,000</b>	s 15,000
Lansing, MI 48910	lda.			
5. If over \$100.00 cumulative, please pro		nsing Community Dev		r Memo Itemization
Occupation Director		ising Community De	v / 1000c.	
Business Address 800 W Barne	s Lansing, MI 48910			
Type of Contribution: X Direct	X Loan from a person	Fund Raiser		
13 14 Page of		Page Subtotal  Grand Total of All Schedules 1A  applete on last page of Schedule)	19,300.00  Enter this total on line 3a of Summar Page.	



## **CANDIDATE COMMITTEE**

45899

1. Committee I.D. Number

2. Committee Name

People for Kathie Dunbar

Enter contributor's name and address. If contribution is from an individual, enter last name, fi middle initial. Check box to indicate if contribution is from a Political Committee or an Independent (PAC) Report all contributions regardless of amount.	irst name, 6. Ame ndent		Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 5/23/202  Name & Address: Francisco Vaca	1		
516 Lauren's Way Lansing, MI 48910	25. \$	01	25.01 \$
5. If over \$100.00 cumulative, please provide:	CI	iok Hara far	Memo Itemization
Occupation Employer		ick mere ior	Memo nemization
Business Address			
Type of Contribution: Direct Loan from a person Fund Raiser			
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/23/2021			
Name & Address Shawn Elliott			
4241 Bond Ave.	250	0.00	<b>250.00</b>
Holt, MI 48842	Ψ		Ψ
5. If over \$100.00 cumulative, please provide:	Cli	ck Here for	Memo Itemization
Occupation Self-Employed Employer SE Growth			
Business Address			
Type of Contribution: Direct Loan from a person Fund Raiser			
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/24/202	1		
Name & Address:  Caralina Alfaro	100	0.00	100.00
2875 Linn Rd.	\$	<del></del>	\$
Lansing, MI 48910	O!	al. I laua fau l	Memo Itemization
5. If over \$100.00 cumulative, please provide:	CIII	ck mere ior i	viemo nemization
Occupation Lab Manager Employer Lion Labs			
Business Address 4800 N Grand River Lansing, MI			
Type of Contribution: Direct Loan from a person Fund Raiser			
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/26/202	21		
Julie Farner			
1009 Hickory St.	10 <sup>1</sup>	0.00	100.00
Lansing, MI 48910	<u>Ψ</u>		Φ
5. If over \$100.00 cumulative, please provide:	Cli	ck Here for	Memo Itemization
Occupation Professor Employer Wayne State University	ity		
Business Address			
Type of Contribution: Direct Loan from a person Fund Raiser			
	Page Subtotal 475.0	)1	
Grand Total of All S		810.01	
(Complete on last page	Enter	this total on a of Summary	
Page 14 14	Page.	•	



## ITEMIZED IN-KIND CONTRIBUTIONS

**SCHEDULE 1-IK** 

1. Committee I. D. Number

2. Committee Name

45899

People for Kathie Dunbar

CANDIDATE COMM	NITTEE 2. Committee Name		
3. 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 Committee (Both are commonly called PACs). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     Name & Address of Vendor from whom goods or services wer purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Jeremy Sprague 218 E Elm St Lansing, MI 48910 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: Sleepwalker Spirits & Ale 1101 S. Washington Ave Lansing, MI 48910  X Fund Raiser Contribution	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Pizza and meeting space  5. Date Of Receipt: 7/19/2021 6. Vendor Name & Address: Sleepwalker Spirits & Ale 1101 S. Washington Ave Lansing, MI 48910	\$ 600.00  N  Click Here for Memo	600.00 \$
Contribution # 2 PAC Receipt? Yes Name & Address  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOA Description  5. Date Of Receipt:  6. Vendor Name & Address:		\$o Itemization
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 Goods or Services Purchased by Candidate or Others- LOAN

Description \_

5. Date Of Receipt: \_

6. Vendor Name & Address:

600.00 600.00 Page Subtotal 600.00

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

> Enter this total on line 6 of Summary Page

Click Here for Memo Itemization

Page 1 \_ of \_ 1

Name & Address:

Occupation:

Employer Name & Address:

Fund Raiser Contribution

If over \$100.00 cumulative, please provide:



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

45	8	9	S
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1. Committee I. D. Number

2. Committee Name People for Kathie Dunbar

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		5/11/2021	
Name Glasswing Public Affairs			1000.00 \$
Address	Purpose: Campaign Mgmt	Date	
7649 Madrid Dr.	Click I	lere for Memo I	temization Type
Lansing, MI 48917	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2		E /04 /04	
Name Wix, Inc.		5/21/21	<sub>\$</sub> 18.00
Address	Purpose: Website hosting	Date	
500 Tery A Francois Blvd Fl 6	,		to establish Tone
San Francisco, CA 94158-2230	Click I	nere ioi Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #3	statement		
Nome		5/21/21	20.00
Wix, Inc.	email address 1/vr	Date	<sub>\$</sub> 36.00
Address	Purpose:email address 1/yr.	Date	
500 Tery A Francois Blvd Fl 6	Click I	lere for Memo I	temization Type
San Francisco, CA 94158-2230	Check box if this expenditure is payment of		j
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Glasswing Public Affairs		7/1/21	1000.00
	Purpose: Campaign Mgmt	Date	\$
Address 7649 Madrid Dr.	Purpose:		
Lansing, MI 48917	Click	Here for Memo	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Allied Union Serives		5/14/21	5000 50
	Printing/Postage	Date	\$ 5322.59
Address   240 N Fenway Drive	Purpose:		
Fenton, MI 48430			Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
I and Naison		otal this page	7376.59
	Grand Total of al		
	(Complete on last pag		
			Enter this total

Enter this total on line 8a of Summary Page

	1	4
Page	'	of



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

458	9	9
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1. Committee I. D. Number \_\_\_\_\_

2. Committee Name People for Kathie Dunbar

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		6/7/04	
Name Allied Union Services		6/7/21 ———	\$ 4633.30
Address	Purpose: Printing/Postage	Date	
240 N. Fenway Dr.	Click	loro for Memo I	temization Type
Fenton, MI 48430		lete for Memo i	ternization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	<u> </u>	
Expenditure #2			
Name Allied Union Services		6/25/21	2530.01 \$
	Printing/Postage	Date	
Address 240 N Forway Dr	Purpose:		ļ
240 N Fenway Dr. Fenton, MI 48430	Click F	lere for Memo I	temization Type
1 enton, wi 40400	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name Allied Union Services		7/15/21	<sub>\$</sub> 287.61
,	Purpose: Printing/Postage	Date	\$ 207.01
Address	Purpose:		
240 N Fenway Dr. Fenton, MI 48430	Click H	Here for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Allied Union Services		6/9/21	. 145.27
	Printing	Date	\$
Address	Purpose: Printing		
240 N Fenway Dr.	Click	Here for Memo	Itemization Type
Fenton, MI 48430	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5		7/16/01	
Name Facebook, Inc.	Advortising	7/16/21	<sub>\$</sub> 25.00
Address	Purpose: Advertising	Date	-
1601 Willow Ave.	Click	Here for Memo	Itemization Type
Menlo Park, CA 94025	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subt	otal this page	\$7621.19
	Grand Total of al	Schedules 1B	
	(Complete on last page	ge of Schedule)	L
			Enter this total

on line 8a of Summary Page



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

4	5	8	9	9

2. Committee Name

1. Committee I. D. Number People for Kathie Dunbar

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		7/47/04	
Name Facebook, Inc.		7/17/21 ———	<sub>\$</sub> 25.00
Address	Purpose: Advertising	Date	
1601 Willow Ave.	Click	Here for Memo I	temization Type
Menlo Park, CA 94025			Tomaca, typo
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Facebook, Inc.		7/18/21	<sub>\$</sub> 25.00
Address	Purpose: Advertising	Date	·
1601 Willow Ave.	Click	Here for Memo I	temization Type
Menlo Park, CA 94025			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name ActBlue		5/31/21	<sub>\$</sub> 13.51
Address	Purpose: Service Fees	Date	-
PO Box 441146	,		–
Somerville, MA 02144-0031	<del>  _  </del>	Here for Memo I	temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	f	
Fund Raiser	statement		
Expenditure #4			
Name ActBlue		6/30/21	\$ 3.00
Address	Purpose: Service Fees	Date	
PO Box 441146	1 01,5000.		
Somerville, MA 02144-0031	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of	of	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name ActBlue		7/20/21	10.00
Address	Service Fees	Date	\$ <u>13.96                                    </u>
PO Box 441146	Purpose:		
Somerville, M 02144-0031	I	k Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	او	
	Sub	ototal this page	80.47
	Grand Total of a (Complete on last pa		
	(Complete of last be	-95 0. 201100010)	Enter this total

on line 8a of Summary Page

Page \_\_3 \_\_of \_\_4



# SCHEDULE 1B CANDIDATE COMMITTEE

4	5	8	9	9

1. Committee I. D. Number

2. Committee Name People for Kathie Dunbar

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		7/1/21	
Name Paypal, Inc.			<sub>\$</sub> 139.95
Address	Purpose: Service Fees	Date	
2211 N 1st St,	Click	Here for Memo It	emization Type
San Jose, CA 95131			511112a.to.: 1,p5
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2		= (0 (0 t	
Name Vantiv WorldPay		7/9/21 ———	<sub>\$</sub> 7.67
Address	credit card processing	Date	
8500 Grovernors Hill Dr			
Symmes Township, OH 45249	Click	Here for Memo It	emization type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	·	
Expenditure #3			
Name Allied Union Services		7/1/21	<sub>\$</sub> 373.56
Address	Purpose: Printing/postage	Date	* <del></del>
Address 240 N. Fenway Dr.	Tulpose.		
Fenton, MI 48430		Here for Memo II	emization Type
	Check box if this expenditure is payment o debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name Allied Union Services		7/7/21	<sub>\$</sub> 365.71
Address	Purpose: Printing/postage	Date	
240 N Fenway Dr.	1 diposo.		
Fenton, MI 48430	Click	Here for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	ıf	
Expenditure #5		<del></del>	
Name Allied Union Services		7/12/21	
	Printing/postage	Date	\$ <u>343.74</u>
Address 240 N Fenway Dr	Purpose:		
Fenton, MI 48430		Here for Memo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	וע	
Fund Raiser	statement	ototal this page	1,230.63
			16,308.88
	Grand Total of a (Complete on last pa		10,300.00

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS 1. Co	ommittee I.D. Number	· · · · · · · · · · · · · · · · · · ·		
SCHEDULE 1E		Kathie Dunbar		
CANDIDATE COMMITTEE 2. Co	ommittee Name			
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the commodities (Check	nittee OR b. Debts k either a or b. Use only for the pur	and obligations owed <u>to</u> or troose checked.)	forgiven <u>by</u> the com	mittee.
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	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: Kathie Dunbar 1334 Boston Blvd. Lansing, MI 48910	4. Type: Loan  5. Date Debt Was Incurred: 5/15/2021  6. Original Amount of Debt: \$ 15,000.00	\$ \$ \$ \$	\$ 0.00	\$15,000.
If bank loan, name of endorser or guarantor:		<del></del>	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:  Kathie Dunbar 1334 Boston Blvd. Lansing, MI 48910	4. Type: Loan  5. Date Debt Was Incurred:  5/8/18  6. Original Amount of Debt:  \$ 3,068.91	\$ \$ \$	\$	\$ 3,068.91
If bank loan, name of endorser or guarantor:		An	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:  Kathie Dunbar 1334 Boston Blvd. Lansing, MI 48910	4. Type: Loan  5. <u>Date Debt Was Incurred</u> : 4/24/18  6. <u>Original Amount of Debt</u> :  \$ 398.00	7/28/18 <sub>\$</sub> 296.03	\$ 296.03	\$ 101.97
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$	
	Complete on last page of Schedule	Grand Total	I (Outstanding debt of all Schedules 1E or to the committee	\$18,170.88

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.

"owed to" of the Summary Page

Page 1 of 1



Summary Page.

Page \_\_1 \_ of \_\_1

45899

## FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

	•					
1. Committee I.D. Number						
		_	 	_		

Committee Name People for Kathie Dunbar

	2. Cor	imittee Name	
<del> </del>	- USE A SEPARATE SH	EET FOR EACH EVENT	-
Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of place where the activity was held 1101 S Washingto
7/19/2021	20	Pizza, drinks	Ave. Lansing 489
Total Contributions	\$6225.00		
Other Receipts		AM TO SE	
Gross Receipts (Add lines 7	and 8) \$6225.00		
. Total Cost of Event	\$600		
otal Cost includes In-Kind Co	ontributions and All Expenditure	s Made For the Event)	
		Call and drawn	
. Check if event was a jo	oint fund raiser and complete th	e following:	
Co-Sponsor(s)	oint fund raiser and complete th Contribution (%)		Expenditure Split (%)
_	Contribution		
_	Contribution		
<del>_</del>	Contribution		
_	Contribution		

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.