



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: <u>10/21/2019</u> to <u>12/31/2019</u>	
1. Committee I.D. Number C-2019-013	4. Candidate Last Name <u>Eyer</u> First Name <u>Jennifer</u> M.I. _____ 4a. Office Sought Including District # or Community Served (If applicable) <u>Board Member - Local</u> 4b. County of Residence <u>WASHTENAW</u>
2. Committee Name Vote Jen Eyer	6. Treasurer's Name & Residential Address <u>Joan Lowenstein</u> <u>502 Burson Pl</u> <u>Ann Arbor, MI 48104</u> Area Code & Phone <u>(734) 761-5248</u>
5. Committee's Mailing Address <u>1831 Covington Drive</u> <u>Ann Arbor, MI 48103</u> Area Code and Phone <u>(734) 846-1566</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Area Code and Phone _____
7. Treasurer's Business Address <u>Same</u> Area Code and Phone _____	

FILED
 WASHTENAW COUNTY MI
 2020 JAN 29 A 9:55
 LAWRENCE KESTER
 COUNTY CLERK/REGISTRAR

<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>August 4, 2020</u></p>	<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly</p> <p>9c. <input checked="" type="checkbox"/> Annual Statement (<u>2019</u>) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	<p>9e. Dissolution of Candidate Committee</p> <p><input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>
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10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper	<u>Joan Lowenstein</u>	<u>[Signature]</u>	Date	<u>1/28/20</u>
	Type or Print Name	Signature		
Candidate	<u>Jennifer Eyer</u>	<u>[Signature]</u>	Date	<u>1-28-20</u>
	Type or Print Name	Signature		



1. Committee I.D. Number C-2019-013

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Vote Jen Eyer

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>5,010.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>5,010.00</u>	(18.) \$ <u>22,840.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u> </u>	(19.) \$ <u> </u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>5,010.00</u>	(20.) \$ <u>22,840.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>450.00</u>	(21.) \$ <u>1,984.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u> </u>	(22.) \$ <u> </u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>316.00</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u> </u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u> </u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>316.00</u>	(23.) \$ <u>2,859.36</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u> </u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u> </u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u> </u>	(24.) \$ <u> </u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u> </u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u> </u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>15,286.64</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>5,010.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>20,296.64</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>316.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>19,980.64</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/21/2019</u> Name & Address: Brenda Strayer 225 Wildemere Dr. Mason, MI 48854 5. If over \$100.00 cumulative, please provide: Occupation <u>Not employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>500</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/24/2019</u> Name & Address: Heidi Mitchell PO Box 70 Port Costa, CA 94569 5. If over \$100.00 cumulative, please provide: Occupation <u>Partner</u> Employer <u>Prentice Partners of Ann Arbor LI</u> Business Address <u>1505 White St, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>250</u>	\$ <u>250</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/06/2019</u> Name & Address: James Pyke 912 Pomona Road Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>10</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/07/2019</u> Name & Address: Tim Richards 1014 Rose Ave Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>Not employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>5</u>	\$ <u>275</u> Click Here for Memo Itemization

Page Subtotal **365.00**

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
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/07/2019</u> Name & Address: Jean Leverich 912 Pomona Rd Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>Social worker</u> Employer <u>CEW at Univ of Michigan</u> Business Address <u>330 E Liberty, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>10</u>	\$ <u>150</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/11/2019</u> Name & Address: Stephanie White 2115 Winchell Dr Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>Exec Director</u> Employer <u>Equality Michigan</u> Business Address <u>19641 W Seven Mile Rd, Detroit, MI 48219</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>525</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/21/2019</u> Name & Address: Brenda Strayer 225 Wildemere Dr Mason, MI 48854 5. If over \$100.00 cumulative, please provide: Occupation <u>Not employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>500</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/06/2019</u> Name & Address: Joan Lowenstein 502 Burson Pl Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>200</u> Click Here for Memo Itemization

Page Subtotal 260.00

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
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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? <input type="checkbox"/> YES	4. Date of Receipt <u>11/03/2019</u>	
Name & Address: John Farah 3756 N. Michael Rd. Ann Arbor, MI 48103		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Dentist</u> Employer <u>Self</u> Business Address <u>3100 W. Liberty, Suite A, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>11/12/2019</u>	
Name & Address: Kevin McKinney 216 N. Chestnut St. Lansing, MI 48933		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Principal</u> Employer <u>McKinney & Associates</u> Business Address <u>216 N. Chestnut St., Lansing, MI 48933</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>11/13/2019</u>	
Name & Address: John Sellek 4686 Kingswood Dr. Brighton, MI 48116		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>11/12/2019</u>	
Name & Address: Terri Fitzpatrick 1503 Waxwing Dr. Dewitt, MI 48820		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COO</u> Employer <u>Boji Group</u> Business Address <u>124 W. Allegan, Ste. 2100, Lansing, MI 48933</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$700.00

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

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Page.



**ITEMIZED CONTRIBUTIONS
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1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/11/2019</u> Name & Address: Amber Shinn 302 E Cesar E Chavez, Apt D Lansing, MI 48906 5. If over \$100.00 cumulative, please provide: Occupation <u>Program Manager</u> Employer <u>URC MI</u> Business Address <u>500 E Michigan Ave, Lansing, MI 48911</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/11/2019</u> Name & Address: Louise Ahern 534 Cedar Ridge Dr Williamston, MI 48895 5. If over \$100.00 cumulative, please provide: Occupation <u>Author</u> Employer <u>Self</u> Business Address <u>534 Cedar Ridge Dr, Williamston, MI 48895</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/11/2019</u> Name & Address: Neil Oza 259 Grosse Pines Dr Rochester Hills, MI 48309 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/11/2019</u> Name & Address: Greg Bird 5625 Ventura Pl Haslett, MI 48840 5. If over \$100.00 cumulative, please provide: Occupation <u>Mng. Director</u> Employer <u>Mich Econ. Dev. Corp</u> Business Address <u>300 N. Washington Sq, Lansing, MI 48913</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization

Page Subtotal **325.00**

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
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>11/12/2019</u>	
Name & Address: Richard Wiener 4445 Rodeo Trail Williamston, MI 48895		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Business Address <u>4445 Rodeo Trail, Williamston, MI 48895</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>11/12/2019</u>	
Name & Address: Dennis Denno 410 Clarendon E Lansing, MI 48823		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self-employed</u> Employer <u>Self</u> Business Address <u>410 Clarendon, E Lansing, MI 48823</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>11/12/2019</u>	
Name & Address: Larry Crittenden 603 W. Crane Howell, MI 48843		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Self</u> Business Address <u>603 W. Crane, Howell, MI 48843</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>11/12/2019</u>	
Name & Address: Elena Greer 753 Audubon Rd E Lansing, MI 48823		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 625.00

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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>11/14/2019</u> Name & Address: Midwest Strategy Group PAC 101 S. Washington Square, Suite 620 Lansing, MI 48933 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250</u>	\$ <u>250</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2019</u> Name & Address: Nicholas Roumel 2718 Hampshire Rd Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Nacht & Roumel, PC</u> Business Address <u>101 N Main St, Ste 555, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>150</u>	\$ <u>150</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization

Page Subtotal **400.00**

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/12/2019</u></p> <p>Name & Address: Peter Spadafore 2310 Moores River Dr Lansing, MI 48911</p> <p>6. Amount: \$ <u>25</u></p> <p>7. Cumulative: \$ <u>25</u></p> <p>5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/13/2019</u></p> <p>Name & Address: Kristin Keller 50650 Colchester Ct Canton, MI 48187</p> <p>6. Amount: \$ <u>250</u></p> <p>7. Cumulative: \$ <u>250</u></p> <p>5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization</p> <p>Occupation <u>Media Buyer</u> Employer <u>Keller Media Consulting</u></p> <p>Business Address <u>43311 Joy Road #330, Canton, MI 48187</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/14/2019</u></p> <p>Name & Address: Teresa Bingman 1425 Ambassador Dr Okemos, MI 48864</p> <p>6. Amount: \$ <u>100</u></p> <p>7. Cumulative: \$ <u>100</u></p> <p>5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization</p> <p>Occupation <u>Self-employed</u> Employer <u>Self</u></p> <p>Business Address <u>1425 Ambassador Dr, Okemos, MI 48864</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2019</u></p> <p>Name & Address: Ryan Hughes 214 Charles St Ann Arbor, MI 48103</p> <p>6. Amount: \$ <u>100</u></p> <p>7. Cumulative: \$ <u>100</u></p> <p>5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization</p> <p>Occupation <u>Computer Programmer</u> Employer <u>University of Michigan</u></p> <p>Business Address <u>214 Charles St, Ann Arbor, MI 48103</u></p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		

Page Subtotal 475.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>12/16/2019</u>	
Name & Address: Michael Stearns 2160 Newport Ann Arbor, MI 48103		\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Financial Advisor</u> Employer <u>Self</u> Business Address <u>2160 Newport, Ann Arbor, MI 48103</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>12/16/2019</u>	
Name & Address: Amy Crawford 1418 Iroquois Pl Ann Arbor, MI 48104		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Writer</u> Employer <u>Self</u> Business Address <u>1418 Iroquois Pl, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>12/18/2019</u>	
Name & Address: Ann Arbaugh 1915 Austin Ave Ann Arbor, MI 48104		\$ <u>50</u>	\$ <u>784</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Coldwell Banker Weil Manuel</u> Business Address <u>2723 S State St, Ste 130, Ann Arbor, MI 48104</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>12/18/2019</u>	
Name & Address: Peter Graham 2233 Quarry Rd E Lansing, MI 48823		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>Sparrow Health System</u> Business Address <u>1400 E Michigan Ave, Lansing, MI 48912</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 550.00

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
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/06/2019</u> Name & Address: James Pyke 912 Pomona Rd Ann Arbor, MI 48103		\$ <u>10</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/07/2019</u> Name & Address: Tim Richards 1014 Rose Ave Ann Arbor, MI 48104		\$ <u>5</u>	\$ <u>275</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/07/2019</u> Name & Address: Jean Leverich 912 Pomona Rd Ann Arbor, MI 48103		\$ <u>10</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Social worker</u> Employer <u>CEW at Univ of Michigan</u> Business Address <u>330 E Liberty, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/11/2019</u> Name & Address: Stephanie White 2115 Winchell Dr Ann Arbor, MI 48104		\$ <u>100</u>	\$ <u>525</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Exec Director</u> Employer <u>Equality Michigan</u> Business Address <u>19641 W Seven Mile Rd, Detroit, MI 48219</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 125.00

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
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/21/2019</u> Name & Address: Brenda Strayer 225 Wildemere Dr Mason, MI 48854 5. If over \$100.00 cumulative, please provide: Occupation <u>Not employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>500</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/06/2019</u> Name & Address: Joan Lowenstein 502 Burson Pl Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>200</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/06/2019</u> Name & Address: Karen Steff 6047 Sleepy Hollow Lane E Lansing, MI 48823 5. If over \$100.00 cumulative, please provide: Occupation <u>Producer</u> Employer <u>Render Studios</u> Business Address <u>111 E Cesar E Chavez Ave, Lansing, MI 48906</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/16/2019</u> Name & Address: Kirk Mercer 8075 S Jackson Rd Jackson, MI 49201 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>RW Mercer Co</u> Business Address <u>2322 Brooklyn Rd, Jackson, MI 49203</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>500</u>	\$ <u>500</u> Click Here for Memo Itemization

Page Subtotal **750.00**

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
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/19/2019

Name & Address:
Neil Jain
28735 Wintergreen Dr
Farmington Hills, MI 48331

6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

\$ 15 \$ 15

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 #2 PAC Receipt? YES 4. Date of Receipt 12/26/2019

Name & Address:
Thomas Kent
3087 Cedarbrook Rd
Ann Arbor, MI 48105

6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

\$ 100 \$ 100

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Attorney Employer University of Michigan

Business Address 503 Thompson St, Ann Arbor, MI 48109

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/31/2019

Name & Address:
Lon Johnson
1 Park Ave, #1809
Detroit, MI 48226

6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

\$ 250 \$ 250

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation CEO Employer WWF Holdings, Inc

Business Address 1941 W Grand River #32, Detroit, MI 48226

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/26 2019

Name & Address:
Thomas Moher
3338 Lakeshore Dr
Sault Sainte Marie, MI 49783

6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

\$ 100 \$ 100

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Attorney Employer Self

Business Address 546 Ashmun St, Unit 1, Sault Sainte Marie, MI 49783

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 435.00
Grand Total of All Schedules 1A 5,010.00
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number C-2019-013

CANDIDATE COMMITTEE

2. Committee Name Vote Jen Eyer

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 <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: T.J. Bucholz 914 Oneida Woods Trail Grand Ledge, MI 48837 If over \$100.00 cumulative, please provide: Occupation: <u>Mng. Partner</u> Employer Name & Business Address: Vanguard Public Affairs 101 N. Washington Sq., Suite 1400 Lansing, MI 48933 <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Food and drink</u> 5. Date Of Receipt: <u>11/11/2019</u> 6. Vendor Name & Address: <u>Horrocks Market</u> <u>7420 W Saginaw Hwy</u> <u>Lansing, MI 48917</u> Click Here for Memo Itemization	\$ <u>200</u>	\$ <u>200</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address Andy Mosser 6312 Peck Lake Rd Portland, MI 48875 If over \$100.00 cumulative, please provide: Occupation: <u>Asst. Chptr. Mngr.</u> Employer Name & Address: Michigan Chapter, NECA 1026 N Washington Ave Lansing, MI 48906 <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Venue fees</u> 5. Date Of Receipt: <u>12/18/2019</u> 6. Vendor Name & Address: Yankee Air Museum 47884 D Street Belleville, MI 48111 Click Here for Memo Itemization	\$ <u>250</u>	\$ <u>250</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: Click Here for Memo Itemization	\$ _____	\$ _____

Page Subtotal **450.00** **450.00**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **450.00**

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2019-013
2. Committee Name Vote Jen Eyer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Various Address Lansing, MI <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food & supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/18/19</u> Date	<u>\$ 155</u>
Expenditure #2 Name US Post Office Address 2075 W Stadium Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/06/19</u> Date	<u>\$ 55</u>
Expenditure #3 Name Facebook Address 1 Hacker Way Menlo Park, CA 94025 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Event promotions</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/2019</u> Date	<u>\$ 26</u>
Expenditure #4 Name Act Blue Address PO Box 441146 Somerville, MA 02144-0031 <input type="checkbox"/> Fund Raiser	Purpose: <u>Fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/2019</u> Date	<u>\$ 26</u>
Expenditure #5 Name Act Blue Address PO Box 441146 Somerville, MA 02144-0031 <input type="checkbox"/> Fund Raiser	Purpose: <u>Fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/2019</u> Date	<u>\$ 54</u>

Subtotal this page

316.00

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

316.00

Enter this total on line 8a of Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-013
2. Committee Name Vote Jen Eyer

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>12/18/2019</u>	4. Number of Individuals Attending or Participating (whichever is greater) <p style="text-align: center;">6</p>	5. Type of Fund Raising Activity <p style="text-align: center;">Museum Party</p>	6. Address and Name (If any) of the place where the activity was held. Yankee Air Museum 47884 D Street Belloville, MI 48111 <input type="checkbox"/> Private Residence
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7. Total Contributions 1065

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) 1065

10. Total Cost of Event 405
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2019-0
2. Committee Name Vote Jen Eyer

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>11/11/2019</u>	4. Number of Individuals Attending or Participating (whichever is greater) 16	5. Type of Fund Raising Activity Office Party	6. Address and Name (If any) of the place where the activity was held. 101 N Washington Sq, Ste 1400 Lansing, MI 48933 <input type="checkbox"/> Private Residence
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7. Total Contributions 2175

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) 2175

10. Total Cost of Event 200
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

